

ASCENSION ST VINCENTS

PARACENTESIS PATIENT HANDOUT

Radiologist who performed your procedure:

Procedure Description:

- An imaging-guided paracentesis is a procedure used to remove fluid from the abdomen. It is usually done to relieve pressure, improve comfort, improve breathing or to test the fluid to determine cause of the fluid buildup. The skin is cleaned with antiseptic, and local anesthetic is used to numb the area. A thin catheter is inserted into abdomen, and the fluid is removed.
- Patients who have a large amount of fluid removed (at least 5 liters) usually receive an intravenous infusion of albumin during the procedure. The albumin helps to reduce the chance of low blood pressure, kidney injury and rapid fluid reaccumulation.
- The procedure itself usually takes 30-60 minutes (occasionally longer if more fluid needs to be removed).

Benefits:

- Minimally invasive: The procedure uses a small catheter with no incisions or stitches.
- Symptom relief: The procedure usually improves abdominal distention, abdominal discomfort, breathing and mobility.
- Diagnostic value: Sometimes the fluid is tested to help determine the cause of the fluid buildup (such as liver disease, heart failure, renal failure, infection or cancer).
- Low risk of complications: The risk of serious complications is low, with most side effects being mild and temporary.
- Rapid recovery: Most patients return to normal activities soon after the procedure.

Risks & Potential Complications:

- Pain: Pain can occur (up to 10-20% of cases). The pain is usually mild, usually goes away within a few days and can be managed with over-the-counter pain medicine.
- Bleeding: Minor bleeding/bruising can occur (up to 5% of cases). Significant bleeding is rare (up to 0.5% of cases) and is more common in patients with advanced liver disease (cirrhosis) and in patients on blood thinners.
- Infection: Infection is rare (less than 1% of cases). Most infections are mild and can be treated with antibiotics.
- Vasovagal reaction: Feeling faint or lightheaded can occur during or after the procedure (up to 5% of cases). It is usually mild and goes away quickly.
- Allergic reaction: A reaction to the local anesthetic, topical antiseptic or other medications is rare (less than 1% of cases).
- Internal injury: Injury to organs (liver, spleen, kidneys), bowel/intestine or large blood vessels is rare (less than 0.1% of cases).
- Death: Death is rare (much less than 1% of cases).
- Re-accumulation of fluid is common depending on the cause of the fluid buildup.

Alternatives:

- Observation: Observation and monitoring if the fluid buildup is mild and not causing symptoms.
- Medications: Medications such as diuretics (water pills) can help the kidneys remove the fluid in some patients.
- Dietary changes: Limiting salt intake to reduce fluid accumulation.
- Tunneled catheter: A drainage catheter tunneled under the skin is sometimes placed in patients who have to undergo frequent paracentesis to allow for fluid removal at home.
- TIPS: Placement of a metallic stent in the liver's blood vessels to decrease pressure in those vessels and decrease the fluid buildup. This procedure is only performed in select patients.
- Surgery: Surgery can be performed to remove fluid in rare, complicated cases.

Aftercare:

- A bandage will be applied over the procedure site. Skin glue may also be applied to the site. You may remove the bandage 24 hours after your procedure, however, allow the skin glue to flake off on its own (do not pick it off).
- You may shower and allow water to flow over the site 24 hours after your procedure, however, do not submerge the site in water (bath, pool, hot tub or ocean) until the site has healed.
- Do not apply lotion/ointment to the site until it has healed unless instructed to do so.
- If you were provided with an ice pack, apply it to the procedure site periodically for 20-30 minutes after your procedure.
- Avoid strenuous physical activity for at least 48 hours. Then increase your activity level as tolerated.
- It is normal to experience mild pain and bruising after your procedure. You can take acetaminophen (Tylenol), aspirin, ibuprofen (Motrin) or naproxen (Aleve) for relief. It is safe to take aspirin, ibuprofen or naproxen soon after your procedure, however you may experience more bruising if you do so.
- Contact Radiology or your ordering clinician if you have any concerns or experience any of the following: continued bleeding, significant swelling, severe pain not responding to over-the-counter medications, signs of possible infection (significant redness or purulent drainage from the site, severe pain, fever or chills), shortness of breath and/or chest pain that is worse than normal for you, dizziness / lightheadedness when standing or a faster than normal heart rate. Call 911 in the event of an emergency.
- Weekdays 8 am to 5 pm call 308-8401 (Riverside), 296-3886 (Southside), 602-1360 (Clay) or 691-1297 (St Johns). Weekdays 5 pm to 10 pm or weekends 6 am to 10 pm call 308-8401. If outside of these hours, call the hospital operator at 308-7300 and ask to speak to the Interventional Radiologist on call.

How Do I Receive Procedure Results?

- The fluid removed during your procedure may be sent for laboratory testing. Results can take up to 5 days (sometimes longer) to become available. Please contact your provider's office to obtain results and for follow-up instructions.