

Lumbar Drain Tip Sheet

Last Update: Masters, 2021

Lumbar Drain Supplies

L458B Storage B – Neuro Supply

Anesthesia Workroom

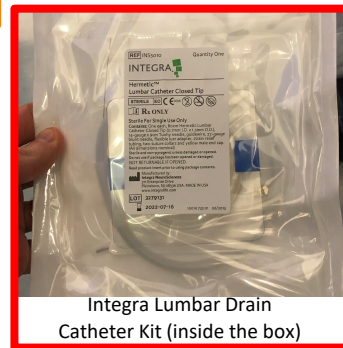
3 Kits To Gather:

- **Integra Lumbar Drain Catheter Kit** (*essential!*)
 - Lumbar drain, wire, 14G Touhy, connectors, caps.
- **Integra Lumbar Drain Lidocaine Kit** (least important, could easily recreate)
 - Lidocaine, gauze, syringe, small procedure drape with hole
- **External CSF Drainage System** (for EVDs, used for Lumbar Drains too)
 - Sterile tubing, stopcocks, bag, attachments to connect to an EVD stand



Additional Things to Gather:

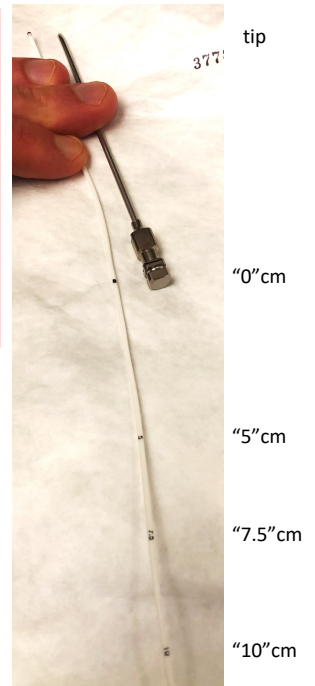
- Large drape, or half sheet, for larger sterile field to lay out catheter
- Chlorapreps to clean patient's back
- 22G Quincke spinal needle (as finder needle after lidocaine, before Touhy)
- (*optional*) 20G Quincke spinal needle, for stiffer spinal needle if hard to get in
- 25-27G needle, to administer lidocaine
- Sterile flushes
- More gauze, including some 2x2 gauze (for bolster to pad skin exit point of catheter, to prevent kinking)
- 2 inch paper tape



Integra Lumbar Drain Catheter Kit (inside the box)



Connector for catheter to Luer-lock



Tips for Success for Lumbar Drains:

- Use a large drape to lay out whole catheter in sterile field while setting up.
- Flush empty catheter with saline to lubricate before threading wire, makes withdrawing wire easier.
- Use spinal needle (i.e. 22G Quincke spinal needle) to find path to CSF before using 14G Touhy
- Immediately thread catheter (with wire) after 14G Touhy in place, don't lose too much CSF.
- Remember first/zero marking of Integra catheter is NOT at the catheter tip for lumbar drains! Instead, markings indicate how much catheter has been threaded out the tip of the Touhy needle!
- NEVER withdraw catheter back through Touhy, which risks shearing off of catheter, instead only move catheter (with wire) inwards and withdraw Touhy back over catheter.
- When removing wire, pinch catheter at the skin firmly enough to stabilize, but don't pinch too hard or wire won't slide out; remove wire straight out, rather than at an angle, for easiest withdrawal.
- Check for maintained CSF drainage (drops still flowing?) every time after manipulating catheter, i.e. after pulling back or taping down.
- Tape small bolster of gauze at catheter skin exit site, as most common kinking spot of catheter is when it makes 90 degree turn exiting the skin.
- Management: usually after 60 minutes, then drain 5cc CSF every 30 minutes – always discuss!