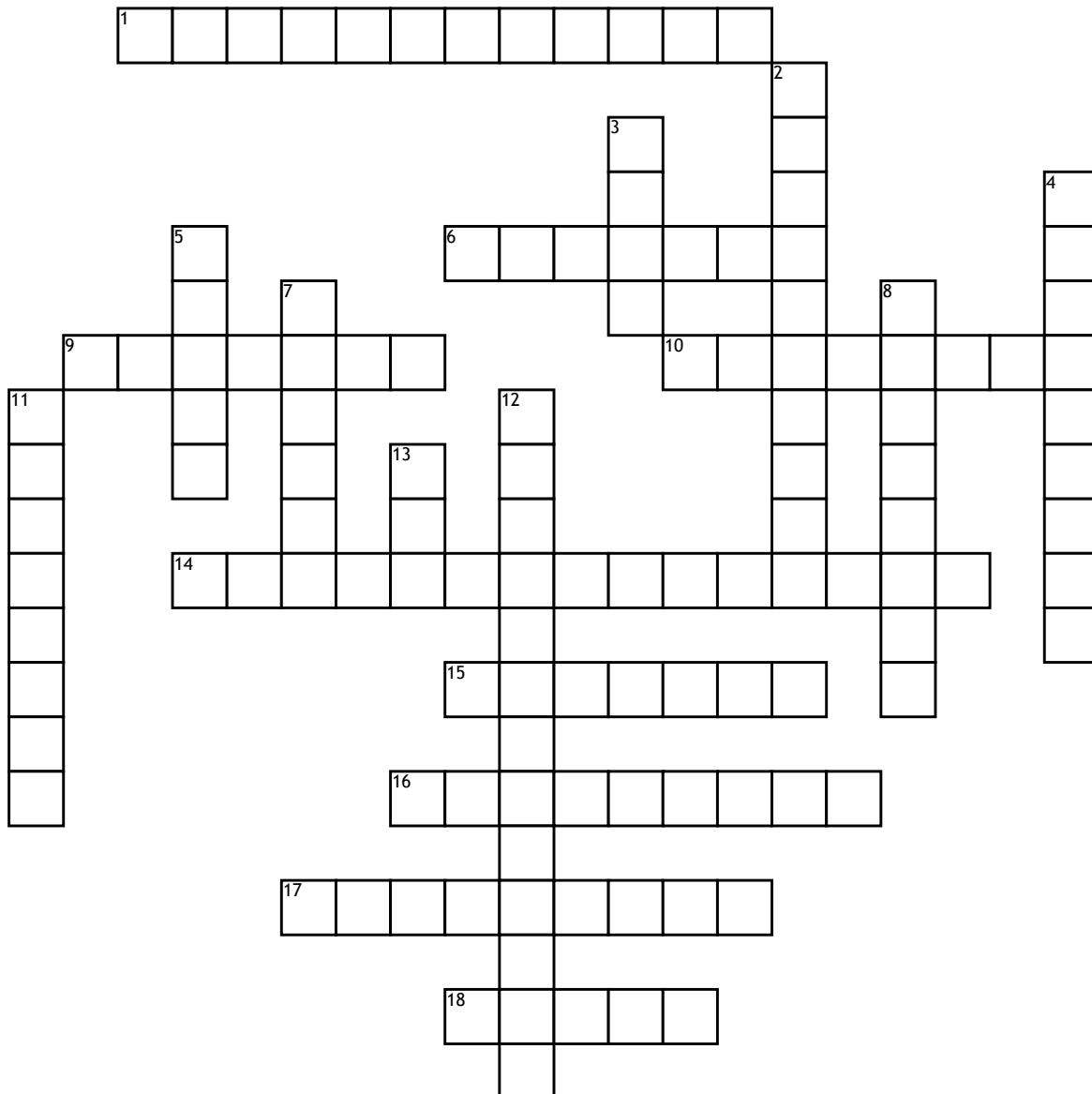


Chest tube set up and Management



Across

1. Decreased SaO₂, increased WOB, diminished breath sounds, decreased chest movement, tachycardia or bradycardia, hypotension
6. Pre procedure checklist and _____ must be charted for chest tube insertion at the bedside.
9. The presence of bubbling in the water seal chamber indicates _____.
10. Securement of chest tube to "christmas tree"
14. Accumulation of fluid in the lungs
15. Water levels in suction control chamber are to be _____ each shift.
16. The indwelling chest tube should be clamped when the drainage system is being changed out and when chest tube is _____.

17. Chest tube dressings should be changed if non-occlusive or signs of _____.

18. True or False... It is ok to strip or milk the tubing when there is no physician order

Down

2. When the chest tube unit is connected to the wall suction, what is the suction mode?
3. During a transport, chest tube suction stopcock should be kept _____ at all times.
4. What does it mean when the stockcock on suction regulator is turned verticle
5. The number of chambers in the chest drainage unit
7. Vigorous or Gentle Bubbling is best?

8. Regulation of the suction

11. Emergency equipment that is kept at the bedside for chest tubes; smooth hemostats, xerform gauze, suture removal kit, sterile gauze and _____.

12. The ball in the water seal chamber fluctuates slightly with inspiration and expiration indicating the patency of the chest tube. If there is no fluctuation in the ball, RN must _____.

13. The steps taken if the chest tube becomes dislodged: Xeroform gauze over site, Call MD, Monitor Respiratory Status, and _____.