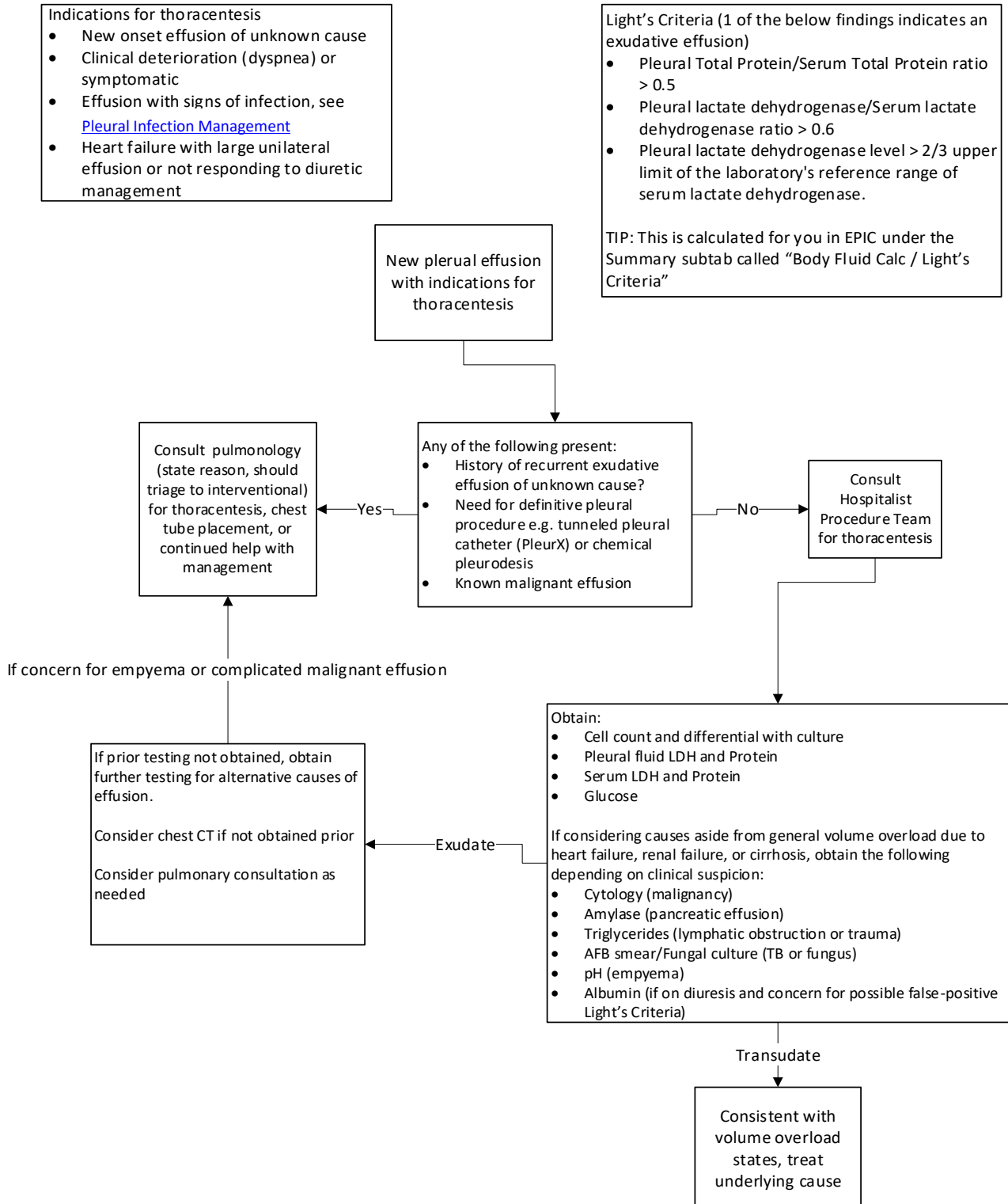


# Diagnostic Approach to Pleural Effusion – Thoracentesis, Inpatient Hospitalist-performed

Clinical Standardization - Updated: February 8, 2023

## Clinical Algorithm: Diagnostic Approach to Pleural Effusion – Thoracentesis



## Clinical Pathway Summary

**CLINICAL PATHWAY NAME:** Diagnostic Approach to Pleural Effusion – Thoracentesis, Inpatient Hospitalist-performed

### PATIENT POPULATION AND DIAGNOSIS:

- Inpatient Adults
- Diagnosis of pleural effusion with indication for thoracentesis:
  - New onset effusion of unknown cause
  - Clinical deterioration (dyspnea) or symptomatic
  - Effusion with signs of infection [Pleural Infection Management](#)
  - Heart failure with large unilateral effusion or not responding to diuretic management

**APPLICABLE TO:** Butterworth Hospital

### BRIEF DESCRIPTION:

- Algorithms and guidelines for Hospitalist-performed procedures, to standardize clinical pathways and communicate best practices.
- [Anticoagulation guidelines related to Paracentesis and Thoracentesis procedures](#)

**OPTIMIZED EPIC ELEMENTS (if applicable):** Orders: Paracentesis Performed by Hospitalist, Thoracentesis Performed by Hospitalist

**IMPLEMENTATION DATE:** 12/28/2022

**LAST REVISED:** 2/8/2023

## Clinical Pathways Clinical Approach

### TREATMENT AND MANAGEMENT:

- New pleural effusion with indications for thoracentesis should be referred for thoracentesis.
- Evaluation of an effusion of uncertain cause should include a cell count and differential, culture, LDH, protein, and glucose in addition to other studies as clinically necessary.
- If there is a high suspicion for infection or recurrent malignancy, pulmonary medicine should be consulted for assistance with management and possible chest tube placement.

## Pathway Information

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**CONTRIBUTOR(S):** Pleural Effusion and Anticoagulation Guidelines – John Egan and Fergus Peacock

**EXPERT IMPROVEMENT TEAM (EIT):** Hospitalist Quality EIT

**CLINICAL PRACTICE COUNCIL (CPC):** Acute Health CPC

**CPC APPROVAL DATE:** 2/7/2023

**OTHER TEAM(S) IMPACTED: ED, Specialty Health**

## **References:**

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