Decision made to discharge patient into community with Pleurx Drain or implanted drain in situ

AND

Patient is on SACT or will be on SACT with drain in place

**NO**

**YES**

Follow procedure for disposal: Using gloves, empty into toilet and double flush with toilet lid down if patient is receiving SACT or has received SACT within the last 7 days

**Arrange for District Nurse to attend** tofollow procedure for disposal:

Empty into toilet and double flush with toilet lid down if patient receiving SACT (or has done within the last 7 days).

**PPE to be used**: Apron, eye protection and purple nitrile gloves.

If the drain cannot be emptied into the toilet please contact Danny Gillan (NHS Lothian Waste Manager at danny.gillan@nhslothian.scot.nhs.uk) to arrange waste uplift from patient’s home stating clearly whether the waste is cytotoxic or not. When appropriate all fluid waste should be solidified using Vernagel sachets and placed into leak proof containers.

**NOTES:**

1. Please refer to pages 31 to 33 of the [**GUIDELINES FOR THE SAFE USE OF SYSTEMIC ANTI-CANCER THERAPIES (SACT\*)**](http://intranet.lothian.scot.nhs.uk/Directory/ooqs-theoncologyonlinequalitysystem/Chemotherapy/Documents/Guidelines%20for%20the%20safe%20use%20of%20SACT.docx) **–** which deal specifically with safe handling and disposal of bodily waste.

*\* follow the hyperlink or search for the title in capitals on the NHS Lothian intranet*

1. No fluid should be transported in a District Nurse’s car.

**NO**

Contact the District Nursing team to alert them **stating clearly if the patient received systemic anti-cancer therapy during last 7 days or when patient is due to start SACT.** Provide standard drain/ SACT letter and this flowchart to the community team for information.

Can the ***fluid*** bedisposed of into the toilet?

**YES**

Can the patient dispose of the fluid themselves?