

# Ambulatory pleural effusion pathway

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Mersey and West Lancashire  
Teaching Hospitals  
NHS Trust

This pathway has been developed to facilitate discharge for patients with pleural effusion requiring investigation and follow up.

Patient assessment
Smoking status
Occupational history, including asbestos exposure
Red flags: haemoptysis, weight loss
Symptoms or signs of heart failure, liver failure, renal failure- consider checking BNP, LFT, U&E, albumin.

Inclusion criteria	✓
Pleural effusion confirmed on imaging	
Oxygen saturations in target range on room air or usual LTOT	
Haemodynamically stable	
NO mediastinal/tracheal shift on CXR	
Pleural infection NOT suspected	
Patient feels they can manage symptoms at home	
Able to ambulate/come to clinic	
Transudative causes considered and felt unlikely	

<b>If all inclusion criteria met, patient can be ambulated. Please complete:</b>	✓
Bloods (FBC, Coag, LDH, serum protein + albumin)	
Medication review. Document indication for any anti-coag or anti-platelet.	
Provide patient info leaflet	
Provide safety netting advice regarding worsening breathlessness	
Complete <a href="#">pleural clinic referral form</a>	
Inform patient they will be contacted about appointment and if/when to suspend anti-coagulation/anti-platelet	

## If inclusion criteria not met:

Refer to relevant team for inpatient review.  
If respiratory, use [pleural clinic referral form](#)  
or email [respiratorywardrefer@sthk.nhs.uk](mailto:respiratorywardrefer@sthk.nhs.uk).

## Useful links:

[Pleural clinic referral form](#)  
[Patient info leaflet on pleural aspiration](#)  
[BTS pleural disease guideline 2023](#)

If you are not sure whether your patient fits the criteria, contact respiratory SpR on bleep 7045 Mon-Fri 9-5, or medical SpR on call out of hours.