



## Thoracentesis



Patient is placed in the upright position with arms held at heart level, separating the scapula. Needle is inserted midway between the spine and the posterior axillary line, one or two interspaces below the level where the percussion note becomes dull and tactile fremitus is lost (or fluid level is detected using hand-held ultrasound). The needle is inserted into the intercostal space over the superior aspect of the rib, avoiding the intercostal neurovascular bundle. This figure shows the successful removal of the typically straw-colored pleural fluid.