

University of Florida

The interpleural distance is the distance between the visceral and parietal pleura and a safe thoracentesis distance is about 10-15 mm. This will ensure that you have a bit of an error margin when puncturing the chest wall

Question	Your Answer	Correct Answer
1		
2		
3		

The angle of entry should be perpendicular to the ribs in order to reach the chest wall in the most direct way

Reviewer Comments

In a supine patient, when you measure 5 cm (or 50 mm), between the chest wall and the lung line, you can be safe to say that at least 500 mL of fluid is in the chest. There are a number of alternative methods to quantitate fluid.

When using ultrasound guided thoracentesis, one must be sure to not move the patient from the time the ultrasound is obtained to when thoracentesis is performed. This will minimize errors

1. What is the minimal interpleural distance considered to be safe to perform thoracentesis?

- A. 5 mm
- B. 10-15 mm
- C. 20 mm
- D. 30 mm

2. The distance between the visceral and parietal pleural layers is called:

- A. Interpleural distance
- B. Dynamic pleural distance
- C. Fluid distance
- D. Separation distance

3. When performing thoracentesis, the optimal angle of entry in relationship to the ribs is:

- A. Perpendicular
- B. 45 degrees
- C. Parallel

4. In a supine position, the interpleural distance at the base of the lung greater than 50 mm corresponds to a pleural effusion greater than:

- A. 50 mL
- B. 500 mL
- C. 1000 mL
- D. 1500 mL

5. T or F: When performing thoracentesis, the patient should not be moved in between ultrasound imaging and needle puncture when real time ultrasound is not used

- A. True
- B. False