Spontaneous Pneumothorax
If Bilateral/Haemodynamically unstable
proceed to chest drain

BTS Pleural Disease Guideline 2010
MANAGEMENT OF SPONTANEOUS PNEUMOTHORAX

Primary Pneumothorax

Size > 2cm and/or breathless

NO

Size 1–2 cm

NO

Consider discharge review in OPD in 2–4 weeks

* In some patients with a large pneumothorax but minimal symptoms conservative management may be appropriate

Aspirate 16–18G cannula
Aspirate <2.5l

Success (< 2cm and breathing improved)

YES

Primary Pneumothorax

Size > 2cm and/or breathless

YES*

Aspirate 16–18G cannula
Aspirate <2.5l

Success (< 2cm and breathing improved)

YES

Chest drain
Size 8–14Fr
Admit

NO

Secondary Pneumothorax

Size > 2 cm or breathless

NO

Success
Size now < 1cm

NO

Admit
High flow oxygen (unless suspected oxygen sensitive)
Observe for 24 hours

Aspirate 16–18G cannula
Aspirate <2.5l

YES

BTS Pleural Disease Guideline 2010 is published in Thorax Vol 65 Supplement 2 and is available online at: http://www.brit-thoracic.org.uk/clinical-information/pleural-disease.aspx

The BTS Pleural Disease Guideline is endorsed by: Royal College of Physicians, London; Royal College of Surgeons of England; Royal College of Physicians of Edinburgh; Royal College of Surgeons of Glasgow; Royal College of Radiologists; Royal College of Anaesthetists; Royal College of Pathologists; College of Emergency Medicine; Society for Acute Medicine; Association for Clinical Biochemistry; British Society of Clinical Cytology.

# Measure the interpleural distance at the level of the hilum