

Nicholls Ward / PICU

External Ventricular Drains (EVDs): Information for Parents

This leaflet explains external ventricular drains (EVDs) including the benefits, risks, any alternatives and what you can expect when your child comes to hospital.

If you have any further questions, please speak to a doctor or nurse caring for your child.

What is an EVD?

An external ventricular drain (EVD) is a temporary method that uses gravity to drain cerebrospinal fluid (CSF) out of compartments in the brain, called ventricles, via a thin tube that goes out of the head into a chamber and bag. The tube is inserted in the operating theatre. It is stitched in and covered with a dressing.

What is cerebrospinal fluid (CSF)?

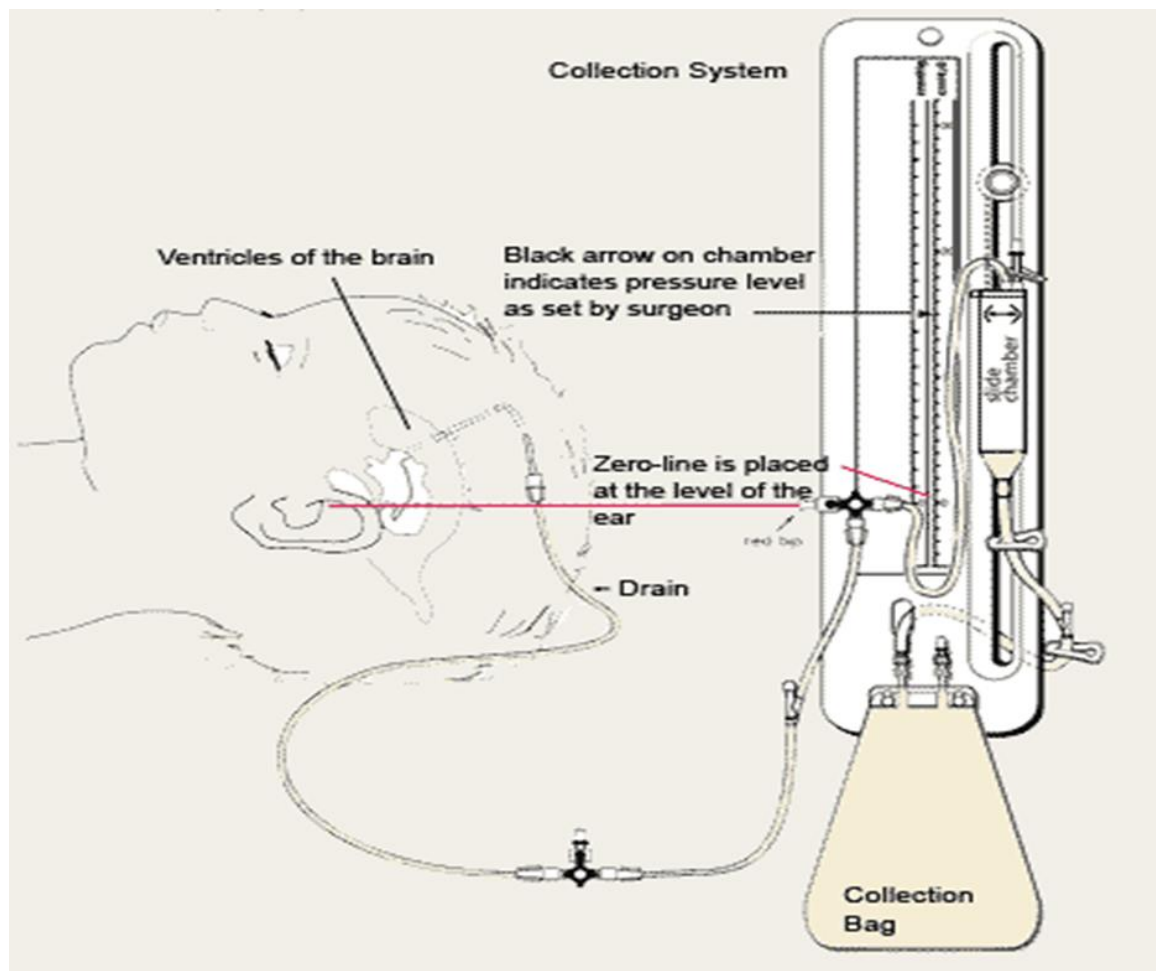
CSF is a fluid that is continuously made in the ventricles in the brain. It flows through the brain and spinal cord before later being reabsorbed. CSF provides cushioning and nutrients to the brain and spinal cord.

Why does my child need an EVD?

Sometimes infection, injury or other conditions may cause either too much CSF to be made, not enough to be reabsorbed or the flow of CSF to become blocked. The CSF builds up creating pressure within the brain. An EVD will relieve the pressure by draining off some of the CSF. The amount drained is variable and depends on several factors including height of the chamber in relation to the ventricles in the brain. The drain will be adjusted every time your child changes

position. This will help reduce the problems associated with either over drainage or under drainage of CSF.

If the CSF is infected the EVD enables antibiotics to be given directly into the CSF to treat the infection.



What else will happen?

Your child will be closely monitored; a nurse will be monitoring the EVD every hour checking the level, amount drained and the colour of the CSF. The nurse will also carry out neurological observations (the frequency will depend on the condition of your child).

Problems that your nurse will be looking for include if your child:

- seems irritable, confused, disorientated (does not know where they are) or just not their usual self
- seems more sleepy than usual
- says they have a headache
- vomits or says they feel sick
- says that they have double vision or blurry vision
- has fluid leaking from the head or tubing.

If you notice any of the above symptoms please inform your nurse.

The nurse will show you how to clamp the EVD before your child sits up, lies down or is picked up or is crying a lot. You must then call the nurse to re-adjust the height of the EVD and unclamp the drain.

YOU MUST NOT ATTEMPT TO RE-LEVEL OR UNCLAMP THE DRAIN, ONLY THE NURSE AND DOCTORS ARE ABLE TO DO THIS.

Will my child have pain?

An EVD should not cause pain, however paracetamol will be available as needed along with additional pain relief depending on your child's condition.

Daily activities

You may help your child with many of their usual daily activities, with assistance from your child's nurse.

Your child will not be able to walk around but may be able to sit out of bed, with assistance from your nurse.

During meal times your child should sit up as much as possible to avoid the risk of choking.

Activities continued

You and your child's nurse will work together to ensure that your child keeps their hands away from their EVD tubing so that it is not

accidentally dislodged; this can be done by providing play and distraction.

Play therapists are available on the ward Monday to Friday to help keep your child active and stimulated while the EVD is in place.

When will the EVD be removed?

The length of time an EVD is needed varies and the neurosurgeon will discuss with you when it may be removed. The EVD will be removed by the doctor either on the ward or in the operating theatre if further surgery is required. Removal of the drain may need suturing. After the EVD is removed, a permanent method of draining CSF is sometimes needed.

This is known as a shunt. If your child is likely to need a shunt, the neurosurgeon will discuss this with you. The neurosciences nurse specialists can provide you with additional shunt information as required.

Contact us

If you have any questions or concerns about your child, please contact the paediatric neurosciences clinical nurse specialists on 020 8725 2649 (Monday to Friday, 8am to 4pm). Out of hours, please contact Nicholls ward on 020 8725 2098.

For more information leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit www.stgeorges.nhs.uk

Was this information helpful? Yes / No

Please let us know, contact

patient.information@stgeorges.nhs.uk and include the leaflet title.

Thank you.

Additional services

Patient Advice and Liaison Service (PALS)

PALS can offer you advice and information when you have comments or concerns about our services or care. You can contact the PALS team on the advisory telephone line Monday, Tuesday, Thursday and Friday from 2pm to 5pm.

A Walk-in service is available:

Monday, Tuesday and Thursday between 10am and 4pm

Friday between 10am and 2pm.

The Walk-in and Advisory telephone services are closed on Wednesdays.

Please contact PALS in advance to check if there are any changes to opening times.

PALS is based within the hospital in the ground floor main corridor between Grosvenor and Lanesborough wings.

Tel: 020 8725 2453 **Email:** pals@stgeorges.nhs.uk

NHS UK

The NHS provides online information and guidance on all aspects of health and healthcare, to help you make decisions about your health.

Web: www.nhs.uk

NHS 111

You can call 111 when you need medical help fast but it's not a 999 emergency. NHS 111 is available 24 hours a day, 365 days a year. Calls are free from landlines and mobile phones.

Tel: 111

AccessAble

You can download accessibility guides for all our services by searching 'St George's Hospital' on the AccessAble website (www.accessable.co.uk). The guides are designed to ensure

everyone – including those with accessibility needs – can access our hospital and community sites with confidence.



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