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*Capital Health, Nova Scotia*

www.cdha.nshealth.ca

*Prepared by: Critical Care Emergency Resource Team, Halifax ©*
*Diagram by: Janice Bennett Mumford*
*Designed and Printed by: Capital Health Audio Visual and Printing Departments*

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The information is not intended to be and does not constitute healthcare or medical advice.
If you have any questions, please ask your healthcare provider.

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The information in this pamphlet is to be updated every 3 years.
Arterial Line

This pamphlet is about an arterial line and why it may be needed. We would like to encourage you to read this pamphlet. The nurses and doctors will also explain the use of this line. Feel free to ask us questions about the line and about any other aspect of care.

Why is it used?
An arterial line may be used when a patient needs:

• frequent blood samples taken.
• a continuous blood pressure reading which will be used to guide treatment.
• to have his/her treatment evaluated.

This line may be used when patients are in the Intensive Care Unit (ICU), Intermediate Care Unit (IMCU), Post Anesthetic Care Unit (PACU), or Operating Room (OR).
How is a line inserted?
• The doctor assisted by a nurse will insert the arterial line. It is usually placed in the wrist area, although it sometimes may be placed in the foot or groin.
• The area around where the catheter enters the body will be frozen.
• A solution will be used to clean the area.
• The needle will be inserted and the plastic part of the needle (catheter) will remain in the artery.
• The catheter will be connected to pressure tubing and a flush solution that contains normal saline.
• The catheter may be stitched to the skin.
• The area will be covered with a clear dressing.

What happens while the line is in place?
• The nurse will be watching the patient closely. He/she will also be taking measurements at specific times. Sometimes the arterial line (blood pressure) will appear as a tracing on the monitor.
• The nurse will check the area around where the catheter enters the skin for redness, swelling, or pain.
• The nurse will ensure everything is kept sterile when he/she collects blood or measures the blood pressure.
• If the line is needed for more than 4 days, the nurse will change the pressure tubing, flush solution and the clear dressing.
• There may be some discomfort at the insertion site.

How is the catheter removed?
• The nurse will remove the line when the doctor decides the patient is well enough.
• First, the stitch will be cut and removed.
• The nurse will remove the catheter. There may be slight discomfort.
• Pressure will be applied to the area for at least 5 minutes. Then a Band Aid™ will be placed over the area. There may be a bruise at the site.

What are the risks of an arterial line?
There is a risk of:
• infection
• bruising and discomfort at the site where the catheter enters the body

There is a very slight chance that the patient could lose fingers, toes, a hand, a foot, or leg depending on the insertion site.

We know that this is a stressful time for all of you. This may make it very difficult to remember things. We want to help you understand all aspects of care. If at any time you wish us to review information, do not hesitate to ask.
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