

This is for your learning for exams and clinical. For the HESI Skills listed utilize the LMS HESI calendar & HESI Across the Module sheet. Study guide answers will be released on LMS before Muddy Waters #2.

For questions contact Ms. Kilpatrick

HESI Skills: Critical Care Collection

- Arterial Catheter Insertion (assisting) Care, and Removal - review the extended sheet and take the quiz

HESI Skills Respiratory Collection

- Arterial Catheter Blood Sampling - review the extended sheet and take the quiz

<https://youtu.be/cw-NLUmHTv4> Arterial Line Removal Nursing Lecture (2016) live demonstration of arterial line removal on actual patient

<https://www.youtube.com/watch?v=9YzmimDY15s> Safe Set System from ICUmed 2012

Optional Videos

<https://youtu.be/zfQf-KK5mCc> Arterial Lines (Guide for Nursing Students by K. Sun, Army of Nurses (2015) (25.3 min) Explanations and visuals are good and easy to follow

<https://youtu.be/aJmQepDWWqW> Transducers in Invasive Pressure Monitoring (2016) (8.41 min) Basics of how a transducer works & why being level with phlebostatic axis is important. See video at 4.20 minutes. **Note:** Heparin is not used with NS for adult patients

<https://youtu.be/1naup00IZOQ> Arterial Line Management & Nursing Care (2017) Mometrix.com (7.5 minute) Good illustrations & explanations

1. How many mmHg should the pressure bag be maintained?
 - 300 mmHg
2. List two reasons a patient would need an arterial line.
 - More accurate monitoring of BP (systolic, diastolic and mean arterial pressure)
 - Frequent blood sampling so you don't have to poke the patient every time you need blood. (ABG's)
3. What neurovascular and peripheral vascular assessments should be performed on a patient with an arterial line.
 - Allen's sign, zeroing the system, check for pressure accuracy, and neurovascular assessment (5 P's: pulse, pallor, paresthesia, poikilothermia, pain, paralysis)
4. What medications can be given through an arterial line?
 - Not generally used to administer medication since many injectable drugs lead to serious damage if administered into an artery rather than a vein.
5. What is the phlebostatic access and how does it relate to the arterial line transducer?
 - This is the anatomical point that corresponds to the right atrium and accurately reflects a patient's hemodynamic status. This relates to the arterial line transducer because you want to position the transducer at the phlebostatic axis.
6. List three things to assess and document for arterial line removal
 - Check that there's a HCP order to discontinue arterial line
 - Assess coagulation studies prior to taking out arterial line.
 - Ensure tip remains sterile in case there's an order to culture it.
 - Document that you applied at least 15 mins of direct pressure on the site after removal
 - Frequently assess 5 P's to ensure the patient is okay after removal