

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/aJmQepDWVqw> 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.
Monitor blood pressure continuously
Obtain serial blood gas or laboratory specimens**

- 3. What neurovascular and peripheral vascular assessments should be performed on a patient with an arterial line.
Pain, pallor, pulse, paresthesia (numbness/tingling), paralysis, poikilothermia (coolness), temperature, capillary refill, sensation/motor function**

- 4. What medications can be given through an arterial line?
None**

- 5. What is the phlebostatic access and how does it relate to the arterial line transducer?
The phlebostatic axis is located at the fourth intercostal space at the mid anterior posterior diameter of the chest wall (right atrium). This position helps determine the placement of the arterial line transducer which reflects a patient's hemodynamic status such as blood pressure.**

- 6. List three things to assess and document for arterial line removal
-Catheter tip is 100% intact with no clot
-keep pressure on site for 5 minutes or until there's no hemostasis
-apply pressure dressing and occlusive dressing**