

EMERGENCY DEPARTMENT PROCEDURE NOTE: FEMORAL ARTERIAL LINE

CPT Code: 36620

DATE

SURGEON

PREOPERATIVE DIAGNOSIS

POSTOPERATIVE DIAGNOSIS

PROCEDURE PERFORMED

Right / Left Femoral Arterial line placement.

ANESTHESIA

_____ mL of 1% lidocaine plain

ESTIMATED BLOOD LOSS

5 mL.

SPECIMENS

None.

COMPLICATIONS

None.

INDICATIONS FOR PROCEDURE

The patient is a []-year-old [male/female] s/p_____. The patient is in need of continuous direct blood pressure monitoring for hemodynamic instability and the need for arterial access for repeated blood sampling.

DESCRIPTION OF PROCEDURE IN DETAIL

The patient was lying in the supine position. The skin was thoroughly sponged with chlorhexidine and allowed to dry. All persons involved were shielded with hairnets, facemasks and sterile gowns. With sterile-gloved hands the [right / left] femoral area was draped with sterile towels. The skin and subcutaneous tissues superficial to the [right / left] femoral artery were anesthetized with ____ mL of 1% lidocaine. The femoral artery was carefully palpated and identified. A finder needle and syringe was advanced at a 45-degree angle into the lumen of the artery until the syringe was seen to rapidly fill with bright red blood. The needle was then held in place while the guide wire was advanced. The needle was then removed. The skin was dilated with a #11 blade scalpel, then the arterial catheter was advanced over the guide wire into proper position. The guide wire was removed and discarded. Bright red pulsatile blood was seen from the catheter as the tubing was being connected. The catheter was stabilized and sutured to the skin with 2-0 silk at 2 anchor ports. A good waveform was seen on the monitor. A sterile bio-occlusive dressing was placed over the catheter, including the insertion site. The patient tolerated the procedure well.