

EMERGENCY DEPARTMENT PROCEDURE NOTE: FEMORAL CENTRAL LINE

CPT Code: 36556

DATE

SURGEON

PREOPERATIVE DIAGNOSIS

POSTOPERATIVE DIAGNOSIS

PROCEDURE PERFORMED

Right / Left Femoral Central 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 central IV access for hemodynamic instability and medication administration.

DESCRIPTION OF PROCEDURE IN DETAIL

The patient was lying in the supine position. All persons involved were shielded with hairnets, facemasks and sterile gowns. With sterile-gloved hands the [right / left] femoral area was thoroughly sponged with chlorhexidine and allowed to dry. The area was draped with the large disposable sterile field provided in the kit. The skin and subcutaneous tissues superficial to the [right / left] femoral vein was anesthetized with ____ mL of 1% lidocaine. The femoral artery was palpated and avoided. A finder needle was advanced at a 45-degree angle toward the inguinal ligament until the syringe was seen to fill with blood. The needle was then held in place while the guide wire was advanced. The needle was then removed. A skin dilator was advanced over the guidewire and removed, then the triple-lumen catheter was advanced over the guide wire into proper position. The guide wire was removed and discarded. The ports were aspirated which showed good blood return indicating proper position into the vein and then carefully flushed with normal saline. The catheter was stabilized and sutured to the skin with 2-0 silk at 2 anchor ports. A sterile bio-occlusive dressing was placed over the catheter, including the insertion site. The patient tolerated the procedure well.