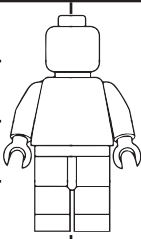


R Brachial		L Brachial
R Radial		L Radial
R Fem		L Fem
R Dorsalis		L Dorsalis

Please Circle site above

20G Flowswitch

20G Seldinger **Wire Removed**

18G Seldinger

For PiCCO lines, use full asepsis



Arterial Line Procedure Record

1 Person procedure

TIME & DATE:

OPERATOR & GRADE

SUPERVISOR or OPTIONAL ASSISTANT & GRADE

USS used	<input type="checkbox"/> NO	<input type="checkbox"/> YES
Hair removal	<input type="checkbox"/> N/A	<input type="checkbox"/> YES
Hand hygiene		<input type="checkbox"/> YES
Sterile gloves & small sterile field		<input type="checkbox"/> YES
2% chlorhexidine prep		<input type="checkbox"/> YES
Sutured (mandatory)		<input type="checkbox"/> YES
Clean dry skin/ dressing		<input type="checkbox"/> YES

Comments / complications / failed attempts: