OLIVE VIEW-UCLA MEDICAL CENTER RESPIRATORY CARE SERVICES – NICU POLICY & PROCEDURE

NUMBER: 1954 VERSION: 1

SUBJECT/TITLE: ARTERIAL PUNCTURE

- **POLICY:** Arterial sampling requires a doctor's order, collateral circulation (if radial artery is used) and following the proper procedures.
- **PURPOSE:** To obtain samples for arterial blood gas determinations when venous and capillary sampling is not suitable.
- **DEPARTMENTS: RESPIRATORY CARE SERVICES**
- **DEFINITIONS:**
- **PROCEDURE:** Contraindications
 - 1. Coagulation defects
 - 2. Circulatory compromise in the extremity
 - 3. Inadequate collateral circulation (Negative Allen's Test)

Preparation

- Before any arterial sampling, confirm a written order is found in the patient's chart.
- Confirm the patient identity using three identifiers: DOB, verify patient identity with the nurse caring for the patient and the OVMC MRUN number.
- Wash hands and use PPE as required.
- Perform Allen's Test to assess collateral circulation. If negative, choose another site for sampling.

Allen's Test

- 1. Place neonatal patients hand in a tight fist or raise arm above heart level for several seconds
- 2. Apply direct pressure on the radial and ulnar arteries to obstruct arterial blood flow to hand while patient's fist is opened and closed rapidly several times.
- 3. Keep patients arm above heart level.
- 4. Keep the radial artery compressed when releasing the ulnar

ARTERIAL PUNCTURE

SUBJECT/TITLE: Policy Number: Page Number:

1954 2

artery.

5. Examine the palmar surface for an erythematous blush occurs within 6 seconds.

Results

- Positive Allen's Test- erythematous blush occurs within 6 second indicates adequate collateral circulation.
- Negative Allen's Test- pallor remaining after 6 seconds indicates inadequate collateral circulation.
- Administer sucrose in accordance with the pain control policy.
- The preferred site for an arterial puncture is the radial artery.
- Comfortably extend the patients arm. Holding the wrist, bend at the elbow and press ipsilaterally to ribs firmly to prevent movement.
- Position a small roll underneath the wrist for hyperextension or slightly hyperextend with your free hand.
- Thoroughly cleanse the site with 2% chlorhexidine gluconate and 70% v/v isopropyl alcohol followed by a gentle wipe with a normal saline wipe.
- Use a Blood Gas Syringe or a 23 gauge butterfly and a 1cc blood gas preheparinized syringe
- Maintain an aseptic technique.

Puncture Procedure

- Use your index finger to locate the radial notch.
- Slowly move your finger towards the center of the wrist to locate the radial pulse. A good "rule of thumb" is that the pulse can be found ¹/₄ the width of the wrist.
- Once the pulse is located, hold your finger there and visualize the arteries position.
- With the other hand, place the needle, bevel up, on top of the pulse, at approximately a 45-degree angle.
- Firmly advance the needle until blood can be seen flowing into the syringe.
- Hold your position until the sample amount is complete.
- Place a gauze pad lightly over the insertion site and remove the needle.
- Apply pressure to the puncture site. Hold for 5 minutes.
- Slowly remove the gauze and watch for any bleeding. If bleeding is present, apply pressure to the site for another 5 minutes or until bleeding has stopped completely.
- Check for a pulse before and after the puncture.
- Do not use a bandage to cover the site.

Post Puncture

• Remove any air bubbles from the blood gas syringe.

SUBJECT/TITLE:	ARTERIAL PUNCTURE
Policy Number:	1954
Page Number:	3

- Cap the blood sample immediately after withdrawal from patient. Send it directly to the lab with the appropriate label.
- Discard all your waste particles in their proper containers.
- Wash your hands.
- Document results of Allen's Test on radial punctures, pre and post procedure site appearance and location.
- Length of time pressure held.

References: 1. A.A.R.C. Uniform Reporting Manual Pg.D4. 2. Respiratory Care Pg.234-235. 3. CLIA		
final rule April 24 2003.		
Approved by: Arnold Panganiban (Chief of Respiratory Therapy),	Date: 05/17/2019	
Nikhil Barot ()		
Review Date: 05/17/2019	Revision Date:	
Next Review Date: 05/17/2022		
Distribution: Medicine, Provision of Care, Respiratory Care		
Original Date: Not Set		