

# Femoral Arterial Line Insertion Procedure Note

INDICATION: \_\_\_\_\_

PROCEDURE OPERATOR: \_\_\_\_\_

ATTENDING PHYSICIAN: \_\_\_\_\_ In Attendance (Y/N) \_\_\_\_\_

**CONSENT:**

Consent was obtained from \_\_\_\_\_ prior to the procedure. Indications, risks, and benefits were explained at length.

The procedure was performed emergently and the permission was implied because of the emergent nature.

**PROCEDURE SUMMARY:**

A time out was performed. My hands were washed immediately prior to the procedure. I wore a surgical cap, mask with protective eyewear, sterile gown and sterile gloves throughout the procedure. The LEFT / RIGHT inguinal region was prepped using chlorhexidine scrub and draped in sterile fashion using a three quarter sheet drape and sterile towels. The femoral pulse was identified. Anesthesia was achieved using 1% lidocaine. Palpating the femoral pulse throughout the procedure, the introducer needle was inserted into the femoral artery. Arterial blood was withdrawn. The syringe was removed and a guidewire was advanced through the needle into the femoral artery. The needle was exchanged over the wire for an arterial catheter. The wire was removed and the catheter was secured to the skin using a suture. The patient tolerated the procedure without any hemodynamic compromise. At time of procedure completion, the catheter was connected to the cardiac monitor and calibrated. Appropriate waveform and blood pressure tracing was observed.

**COMMENT:**

ESTIMATED BLOOD LOSS: \_\_\_\_\_ ml

Physician Signature \_\_\_\_\_ ID# \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_



VENTURA COUNTY MEDICAL CENTER  
SANTA PAULA HOSPITAL  
**FEMORAL ARTERIAL LINE INSERTION  
PROCEDURE NOTE**

Patient Label  
or  
Two Patient Identifiers