Procedural Skills Instruction
Central Venous Catheter (CVC) Removal Checklist

ASSESSORS: PLEASE DO NOT LEAVE ANY ITEM UNRATED

All points in checklist must be verbalized and/or performed.

Please rate the examinee on the following items:	
1. A physician order is required prior to removal of the CVC by RNs	__ Done __ Not Done __ N/A
2. For patients on anticoagulants, verify lab results including PT, INR, PTT, Platelets. (The RNs will review lab results with experienced MD, NP, or PA prior to removal of CVC.)	__ Done __ Not Done
3. Verify timing of CVC removal with transfusion services (clinical note or pager 3803) if the patient has received plasmapheresis in the last 24 hours.	__ Done __ Not Done
4. Verify if catheter tip culture has been ordered. If so, confirm that culture cup and sterile scissor are ready.	__ Done __ Not Done __ N/A
5. Obtain and set up supplies, prior to removal of catheter, for easy access.	__ Done __ Not Done
6. *At least two* clinicians (MD/NP/PA/RN) are present during removal; the primary RN (or assigned alternate) must remain at bedside until the bleeding stops.	__ Done __ Not Done
7. **Ask, "Who is qualified to remove a CVC?"** Correct Response: - Attending physicians credentialed on CVC insertion & maintenance - Experienced RNs (as defined by Nursing P&P) - Residents/PA/NP who have been assessed by their program and deemed qualified to remove a CVC (if clinician is unsure if (s)he is qualified they must contact a member of Medicine, Anesthesiology, Surgery, or Interventional Radiology for resident/attending assistance during removal)	__ Correct __ Incorrect
8. Identify patient.	__ Done __ Not Done
9. Explain valsalva maneuver to patient and have patient demonstrate observing for holding breath and bearing down.	__ Done __ Not Done
10. Wash Hands and put on gloves.	__ Done __ Not Done
11. Clamp and disconnect any IV that is running through CVC.	__ Done __ Not Done
12. Place the patient lying flat *without pillows*, or in a slight Trendelenberg position if tolerated. Have the patient turn head away from the catheter.	__ Done __ Not Done
13. Remove old dressing to avoid dislodgement of CVC. Discard dressing and gloves.	__ Done __ Not Done
14. Put on clean exam gloves. Remove sutures.	__ Done __ Not Done

motion for a minimum of 30 seconds and allow site to dry.	
16. Instruct patient to perform the Valsalva Maneuver. Gently withdraw catheter while applying firm, direct pressure at insertion site using an occlusive dressing (sterile gauze with antibiotic ointment). If patient is unable to follow instructions (or ventilator patients) remove catheter at the end-inspiration	__ Done __ Not Done
17. If any resistance is felt, removal is aborted, and the attending physician is notified immediately.	__ Done __ Not Done
18. If catheter fracture occurs (a complete catheter should have a blue tip): - Apply direct pressure over the site; notify the attending physician immediately. Obtain a STAT CXR. Notify IR for removal if catheter fragment is identified. - If catheter fragment is palpable, apply additional pressure distal to the catheter to prevent migration. Apply pressure proximal to catheter to prevent air embolism. - Position patient in Trendelenberg position and on their left side.	__ Done __ Not Done
from your assistant, cut 1" from the catheter tip and place into sterile culture cup. The	__ Done __ Not Done __N/A
18. Do NOT sit patient up at any time during CVC removal or immediately afterward.	__ Done __ Not Done
19. Do NOT massage the site after CVC removal.	__ Done __ Not Done
20. Continue applying firm pressure for several minutes until the bleeding stops without lifting the dressing. If there is an absolute need to assess insertion site, peek slightly by lifting the edge of the dressing without decreasing pressure at the site.	__ Done __ Not Done
21. When bleeding has stopped, secure occlusive dressing and label with date, time, and initials.	__ Done __ Not Done
22. Dispose of equipment appropriately and wash hands.	__ Done __ Not Done
23. Patient instructed to remain supine for 30 minutes post CVC removal or as appropriate to the clinical situation.	__ Done __ Not Done
24. For removal of CVC from the femoral site, patient should remain flat without hip flexion for at least 2 hours.	__ Done __ Not Done
27. Monitor for signs of distress during and after removal. If distress is observed call RRT *immediately*.	__ Done __ Not Done
28. **Ask, "What should be done for the patient until the RRT arrives?"** Correct Response: Place patient on left side, Trendelenberg position, on 100% oxygen. May side-roll patient if nausea/vomiting occurs. Do NOT sit patient up.	__ Correct __ Incorrect
25. Observe site for bleeding and hematoma formation.	__ Done __ Not Done
26. Recheck dressing within 10 minutes and PRN. Keep dressing in place for at least 24 hours. Periodically assess the site, circulation, and movement as appropriate to the clinical situation.	__ Done __ Not Done
28. Document the removal in the EMR.	__ Done __ Not Done