Insertion of arterial sampling

Assessment of competences for ANP

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Please note: Practitioners can add DOPS, PBAs and CEXs as evidence.**

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| --- | --- | --- | --- |
|  | **NOT competent** | **Competent** | **Signature and date** |
| Insertion of arterial sampling |
| 1 | Indications* To acquire arterial blood gas
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| 2 | Contraindications* Patient declines consent
* Negative modified Allen’s test
* Lymphoedema
* AV fistula
* Skin infection
* Soft tissue injury
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| 3 | Equipment* Sterile dressing pack, drapes, gowns, gloves, face visor
* Lignocaine 1% (if patient awake), gas syringe and needle, dressing
* Wrist support if available
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| 4 | Describe anatomy* Three main nerves – median, radial and radial
* Arteries – radial into palmar carpal branch, dorsal carpal branch and ulnar into, interosseous artery, palmer carpal branch and dorsal carpal branch
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| 5 | Insertion* Consent
* Position wrist
* Modified Allen’s test
* Clean area
* Drape
* Local anaesthetic if patient awake
* Palpate the artery
* Position hand with dorsi flexed to approx. 60%
* Administer local anaesthetic
* Put gloves on
* Hold the syringe at 45 degree angle to the skin like a pen, palpate the artery and insert into the skin
* Advance the needle until blood is seen, then advance approx. 2 mm further and allow the syringe to fill if automated, if manual slowly withdraw
* Remove the needle
* Provide pressure for 5 mins
* Cover with secure dressing
* Ensure blood sample is put through the gas machine, interpreted, acted on
* Complete documents and print out filed
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| 6 | Complications* Exsanguination
* Thrombosis
* Air embolism
* Haematoma
* Pseudoaneurysm
* Arterial spasm
* Traumatic injury to the artery
* Nerve injury
* Skin necrosis
* Infection/sepsis
 |  |  |  |
| 7 | Demonstrate proficiency in the interpretation of results and action required to include:* Recognition of the correct range of results
* Actions if abnormal readings
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| **Assessor’s comments** – Describes the indication in relation to clinical findings/indication, the A&P, contraindications and complications. Acquires a sample according to the above criteria, ensures the sample is processed correctly and results are acted on. Identifies abnormal results and correct action that should be taken.Practitioner should comment on communication with the multidisciplinary team and the documentation according to the practitioner’s professional body and code of conduct.Assessor signs to say the practitioner in competent in insertion and has demonstrated the knowledge associated with the process: |
|  |
| **This practitioner has completed these outcomes to the appropriate standard.****Assessor’s name:****Signature and date:** | **Practitioner’s signature:****Date:** |