

removing a pvad short cannula

Female1: So here we are again. We're taking this out now.

Female2: Yeah, the patient is actually being discharged home and she no longer needs the IV so we're going to remove that for her.

F1: So do you have to have a doctor's order to take this out?

F2: For a PVAD short, no. The only time you might send a patient home with an intravenous is if maybe somebody's continuing care in the community. In which case they more often than not have a PICC line or a central line in. But PVAD shorts, they come out. So no, you don't need an order. So first thing I'm going to do is to do some hand hygiene, and I'm going to, of course, inform the patient about what we need to do. You would wear some clean gloves because the--

F1: Does this hurt when you take it out?

F2: The tape can pull on the little hairs, but the IV cannula itself does not hurt.

F1: Do we need to do any special precautions, like, you know, if she was on any anticoagulants or anything like that?

F2: Oh, that's a really good question. Yeah, if she was on anticoagulants we're going to expect that she's going to bleed at the site, so we're going to either ourselves hold pressure at the site longer or ask the patient to.

F1: Okay.

F2: Yeah. Great, so we're going to remove the tape. Sometimes when the tape is stuck on itself it's a little more tricky to get off.

F1: I see you're still holding the catheter there when you're pulling that tape off. Why

do you do that?

F2: Yeah, you try to minimize the movement at the insertion site if at all possible. It just reduces the irritation of the vein and discomfort to the patient. There we go. Okay, you just put a sterile gauze in place and then you hold some pressure and you just slide out the IV. If you could hold some pressure there for a couple of minutes.

F1: What do we do with that? Is there anything we have to do with that catheter?

F2: Well, it is contaminated with blood. And so you need to discard it. So a good way to do that is just to put it inside your glove and all the blood and body fluids are contained and nobody's going to be exposed. And then I would put a piece of tape on there and advise the patient to remove that in about 48 hours.

F1: Okay.