

Sheath Management and Documentation Guide

TR Band - All radial sheaths to be pulled by Cardiac Cath Lab Staff (x7248)

Management

- Start air volume reduction per order
- Reduce the volume of air in TR band by 3 mL every 15 minutes until the TR band is off
- Document ulnar pulse - notify MD for absence of ulnar pulse, cap refill greater than 3 seconds, any cyanosis, lack of hemostasis, or patient complains of numbness/severe pain in affected hand
- If bleeding occurs: re inject 2-4 mL of air into TR Band balloon until hemostasis occurs. Wait 30 minutes and repeat steps to reduce air volume
- Cover site with protective dressing (Tegaderm) after TR band removal
 - No blood pressures on affected arm for 48 hours
 - Limit use of procedure wrist for 24 hours

Documentation

- When TR band is in place, document Q 15 minute vital signs and assessment on post cath/procedural flow sheet
- Post cath/procedural flow sheet is also where you will document air reduced/added and when band is removed
- Post TR band removal: document vital signs and assessment in cath/procedural flow sheet
 - Q 15 minutes x 4, then
 - Q 30 minutes x 4, then
 - Q 1 hour x 4, then
 - Per unit policy

Brachial Sheath – All brachial sheaths to be pulled by Cardiac Cath Lab Staff 9x7248)

Management

- Sheath removed based on ACT value, check iStat every hour until ACT is at desired goal per provider preference
 - All sheaths to be pulled by Cardiac Cath Lab Staff
- Assess brachial access site for hematoma, bleeding, and verify pulse every 15 minutes
- Apply hemostasis pad
- Hold proximal pressure for 15-20 minutes – slowly released after 15-20 minutes. If bleeding or hematoma occurs, reapply pressure and notify provider
- Post Removal: patient should be instructed to keep arm in a relaxed but straight position for 4 to 6 hours
 - No blood pressures on affected arm for 48 hours

Documentation

- When sheath is in place, document Q15 minutes vital signs and assessment on post cath/procedural flow sheet
- Post sheath removal: Document vitals and assessment in cath/procedural flow sheet
 - Q 15 minutes x 4, then
 - Q 30 minutes x 4, then
 - Q 1 hour x 4, then
 - Per unit policy

Femoral Sheath - All femoral sheaths to be pulled by credentialed staff

Management

- Complete bed rest while sheath is in place
- Elevate HOB no more than 15 degrees while in place
- Check iStat ACT every 2 hours after Heparin is discontinued
 - May pull sheath when ACT reached desired range per provider
- If hematoma develops: hold pressure, mark groin site, and notify provider
 - Strict bed rest if hematoma develops
 - Patient is not allowed to eat or drink if hematoma develops, until notified otherwise by provider
 - Assess groin site and document every 15 minutes
- Keep affected leg straight for 4-6 hours and HOB less than 30-40 degrees post removal

Documentation

- When sheath is in place, document Q15 minute vital signs and assessment on post cath/procedural flow sheet
- When pulling sheath use policy: Femoral and Radial Arterial Sheaths, Management, and Removal (8323.P0112)
- When pulling sheath, document Q 5 minute vital signs and assessment on post cath/procedural flow sheet
- Post sheath removal: Document vitals and assessment in cath/procedural flow sheet
 - Q 15 minutes x 4, then
 - Q 30 minutes x 4, then
 - Q 1 hour x 4, then
 - Per unit policy