Rethinking
Central Venous Access
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Disclosures





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Objectives

Discuss Indications for Central Venous Catheters
Discuss the downsides to Central Venous Catheters
Discuss Alternatives to Central Venous Catheters

Why Central Lines?	
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Emergency venous access	
Volume resuscitation	

Vasopressor Therapy

Jugular > Subclavian > Femoral	
7	
Femoral > Subclavian > Jugular	
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Still the Right Thing to Do?	

Before Placing a CVC

When am I placing this line?

Why am I placing this line?

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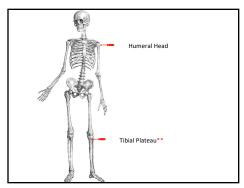


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Flow Rates in IV/IO Access		
Gauge	Approximate Flow Rate to Gravity (mL/min)	Time to Infus
14G	250	ц
I6G	150	7
Cordis	130	8
I8G	100	10
ISG Humeral IO	80	13
16G Distal Port Triple Lumen	70	15
ISG Tibial IO	70	15
20G	60	
22G	35	29
I8G Prox Port Triple Lumen	30	34
REBEL REVIEW	, PMID: 2058 377: 20	

Better Alternatives	
13	
Intraosseous Lines	
14	
15	

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	low Rate	s in IV/IO A	ccess
	Gauge	Approximate Flow Rate to Gravity (mL/min)	Time to Infuse (min)
	14G	250	4
	16G	150	7
	Cordis	130	8
	IRG	100	Ю
	15G Humeral IO	80	13
I6G D	istal Port Triple Lumen	70	15
	15G Tibial IO	70	15
	200	60	17
	22G	35	29
18G F	Prox Port Triple Lumen	30	34
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Large Bore P.I.V.



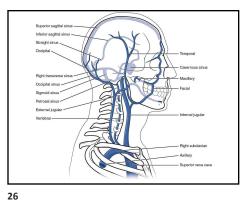
Flow Rates in IV/IO Access			
Gauge	Approximate Flow Rate to Gravity (mL/min)	Time to Infuse (min)	
14G	250	4	
16G	150	7	
Cordis	130	8	
18G	100	10	
15G Humerai 10	80	13	
16G Distal Port Triple Lumen	70	15	
ISG Tibial TO	70	15	
20G	60	17	
22G	35	29	
18G Prox Port Triple Lumen	30	34	

Midline Catheters

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i.e.	_
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23	
E-Z IJ	



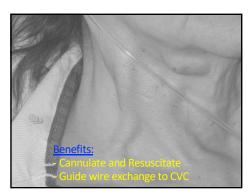




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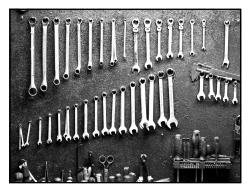
Gauge Approximate Flaw Rate to Tile Gravity (ml./min) NG 250 NG 50 Cordis 130 NG 186 100 NG 180 180 NG 180 NG 180 NG 180 180	4 7 8 10
Cordis 130 186 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100 100	8
18G 100 56 Humeral 10 80 tal Port Triple Lumen 70	
tal Port Triple Lumen 70	10
tal Port Triple Lumen 70	
tal Port Triple Lumen 70	13
	15
ISG Tibial IO 70	15
20G 60	17
22G 35	29
rox Port Triple Lumen 30	34
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Why	Central	Lines?
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Consider Other Options

When am I placing this line?

Why am I placing this line?





References

