TITLE: Removal of Interscalene Catheter

PROCEDURE:

A. Review physician order.
B. Identify patient using 2 identifiers.
C. Adhere to standard precautions.
D. Explain procedure.
E. Instruct patient not to administer bolus prior to removing catheter.
F. Observe site for purulence or inflammation around catheter site. If present, notify physician.
G. Gather sterile supplies.
H. Remove old dressing. Pull dressing off toward insertion site.
I. Don sterile gloves.
J. Clean skin with antiseptic agent such as chlorprep or providine-iodine.
K. Fix the proximal end of the catheter and gently pull the distal end of the catheter in small increments until fully removed.
   1. If resistance is felt when removing the catheter and there is no pain at the catheter site or radiating pain, gently pull the skin in opposite direction and move limb. If still unable to remove the catheter, redress catheter site and call physician.
   2. If there is pain radiating down limb, redress the catheter site and notify physician.
L. Inspect the distal end of the catheter for tip integrity/complete removal, length and condition.
   1. If the catheter is not intact or doubt of complete removal of the catheter redress the site and notify physician.
   2. Any catheter defect should be noted and entered into the UMHS Patient Safety Database.
   3. The catheter has white sheath over metal wire. A small amount (1/4") of metal will be extended past the white sheath on the end of the tip.
M. Apply gauze pressure dressing to the site.
N. Educate patient to change the dressing in 24 hours and assess site for drainage/complications and contact number to report abnormal findings.
O. Document in Nursing Note:
   1. Date and time of removal
   2. Patient response to removal
   3. Ease or difficulty of removal
4. Condition and length of catheter
5. Site complications/physician notified
6. Discharge instructions

**APPROVAL AND REVISIONS:**

1. October 2007, new procedure.
2. January 2013, no changes.
3. December 2015, reviewed with no changes and new signatures not required.