Central Venous Catheter Placement

I request Dr. David Traficante to do the following procedure: Central Venous Catheter Placement

Communication with my Doctor

Dr. David Traficante has explained the following information:

Procedure:

- This procedure involves placing a catheter into one of the central veins. A catheter is a hollow
 tube that is inserted into the body to create a passageway. The central veins are large veins that
 drain blood directly into the heart. By using a central vein, fluids or medicines are supplied to
 the whole bloodstream more directly and quickly.
- The catheter is usually placed percutaneously (through the skin). This involves tunneling the catheter under the skin into a vein. Your doctor will insert a needle into a vein. This is usually in the arm, neck, chest, or groin. Sometimes, a small wire will be passed through the needle to guide catheter placement. The catheter will slide over the needle and/or the wire. It will then be moved forward through the vein.
- Your doctor may use x-ray images during the procedure. This will make sure the catheter is placed correctly. Your doctor may choose to have an x-ray taken after the procedure.

Illness or medical condition:

 Delivery of fluids, nutrition, drugs, or other products for the treatment of serious or long-term conditions. A CVC can also be used to monitor pressure in the central veins, for dialysis, or for frequent drawing of blood.

Alternative treatment options:

- Use of temporary peripheral intravenous (IV) sites.
- You may choose not to have any treatment.

Prognosis and possible risks if I do not have the procedure:

• If you choose not to have this procedure, you may not be able to receive treatment or nutrition. Your treatment options will be limited. Your condition may get worse. You may die.

Risks of the procedure:

- Bleeding.
- Bruising and/or swelling at the treatment site.
- Pain or redness at the treatment site.
- The implanted device may move or fail. You may need surgery to reposition, remove, or replace it.

Physician Initial:	Patient/Authorized Person Initial:	Date:	1
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Risks (continued):

- The procedure may not cure or relieve your condition or symptoms. They may come back and even worsen.
- You may need additional tests or treatment.
- Your doctor might not be able to place the device in the desired location. It could move later.
- Embolism. An embolism is an object that moves through your body in your bloodstream. It can be an air bubble, a blood clot, a piece of fat or other material. It can block a blood vessel. This can lead to stroke, pulmonary embolism (blockage of the main artery of the lung), or injury to organs or extremities.
- Heart rhythm disturbances. You may need medications, a temporary pacemaker, shock(s) to your heart, or CPR.
- Infection.
- Partial or total lung collapse due to air, blood, or fluid in the chest cavity. You may need a chest tube or other treatment.
- The device may become blocked at any time.
- The device, equipment, or material used to do the procedure or implanted may not work correctly, fail or cause problems during the procedure or later. The procedure may not be completed. You may need additional treatment now or later.
- Collapse of small pockets within the lungs (atelectasis). Part or all of the lungs may lose function.
- Damage to the heart, blood vessels, or nearby structures. This may be discovered during the procedure, or later.
- Puncture or other injury to lung.
- Tear or hole in the large blood vessels in the neck and/or chest.

In addition to the risks listed above, any health or disease factors that I/my child has that could increase my risks has been explained.

Benefits of the procedure:

• This procedure may allow you to receive treatments. These may include fluids, nutrition, drugs, or other products. It also allows for continuous or long-term access to the bloodstream. It limits the discomfort from repeated needle pricks.

Recovery – including information on medication, nutrition, pain control, return to activity and wound care:

Wound care:

- Your wound will be covered with a sterile dressing. The insertion site should be covered with a sterile dressing at all times.
- A small amount of drainage is normal. Tell your doctor or nurse if the drainage is red, has a bad odor, or soaks your entire dressing.

Physician Initial:	Patient/Authorized Person Initial:	Date:	2
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Let your doctor know immediately if you:

- Have difficulty breathing.
- Notice swelling, redness, bleeding, or drainage with a bad odor from your wound site.
- Have swelling of your upper arm.
- Notice the catheter tubing has come out partially or completely.
- Notice any leakage from the tubing cap.
- Notice that the wound dressing falls off or does not cover the entire insertion site.

Consent for Treatment

By signing below, I agree that:

- I have read this form or it was read to me.
- I understand the explanation of the benefits and possible risks.
- I understand my other options and what would happen if I have no treatment.
- I was able to ask questions and they have been answered to my satisfaction.
- I was given the opportunity to have a support person/interpreter present
- I choose to have this procedure done and authorize Dr. David Traficante to complete the procedure and his/her designated associates to assist with the procedure.
- I consent to any other emergency procedure required to treat a life-threatening event during the procedure.
- I consent to the disposal of any tissues or parts that may be removed during the procedure.
- I understand that no guarantee has been made that the procedure/operation will improve the condition.

Signature of patient or person authorized to give consent	(Relationship to patient)	Date
Witness to Patient signature	Witness to Patient (Printed)	Date
I believe that the patient/substitute decision-maker	r fully understood the review of the ope	eration.
Signature of physician	 Date	