

NIH Clinical Center Patient Education Materials

Arterial line discharge instructions: Self care and precautions

During your research study, a small catheter was placed into an artery in your arm. For the next 48 hours, you must take special care of yourself and the catheter site.

Activity

For the first 4 hours: Avoid bending your arm or wrist that had the catheter in it.

For 48 hours

- Do not do anything strenuous with your arm that had the catheter in it.
- Do not lift anything over 10 pounds.
- Do not play sports or do anything that requires pulling, pushing, or grasping.

Showering/bathing

For the first 24 hours, keep the dressing dry by covering it with plastic wrap when you shower or bathe.

Checking the catheter site

- Keep the pressure dressing on for 24 hours. After 24 hours, take the dressing off and observe the place where the catheter was removed.
- Check and report to your NIH doctor any signs of infection: pain, tenderness, swelling, redness, and drainage. Also, report to your NIH doctor if you notice color changes, numbness, pins-and-needles feelings, or any weakness in the hand or arm that had the catheter in it. Check your hand or arm twice a day, for the next two days, for any of these symptoms. After 24 hours, if the site looks and feels fine, cover it with a small bandage. Keep this on the site until the next day.

Bleeding

If you notice any bleeding at the site, apply firm, direct pressure as directed by your health care team. After 10 minutes, check for bleeding again. If the bleeding does not stop after 10 minutes, continue to hold pressure, and seek medical assistance or call the emergency contact number given to you upon discharge.

Bruising

- Over the next few days, you may see bruising around the insertion site. This can occur if blood leaks after the catheter is removed. Mild bruising is common; but, if you have a lot of bruising, contact your NIH doctor or your personal doctor immediately.
- Discomfort at the site is normal; but, if discomfort increases or becomes severe, contact your NIH doctor or your personal doctor immediately.

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