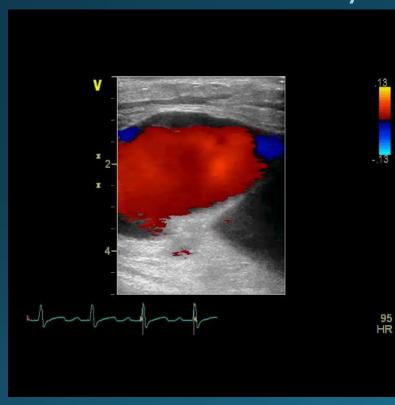
# How to set up ultrasound-guided vascular access in your cath lab

Yun-Hyeong Cho, MD, PhD Myongji Hospital Cardiovascular Center

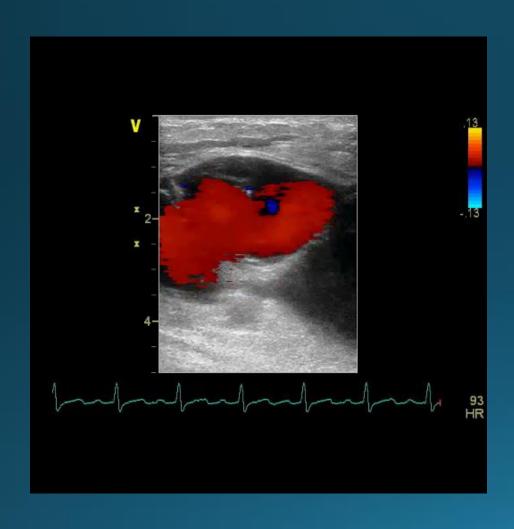
#### Vascular Access Complication

#### Femoral Pseudoaneurysm



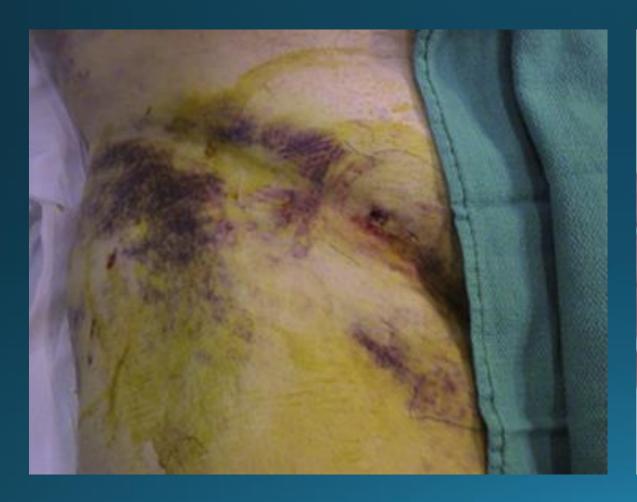
- Vascular closure device
- Transfemoral -> Transradial
- US-guided thrombin injection
- Blind -> Ultrasound

### US-guided thrombin injection





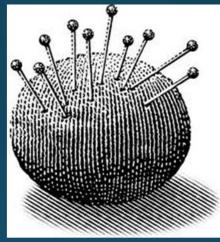
#### Femoral -> Radial





#### Blind Approach

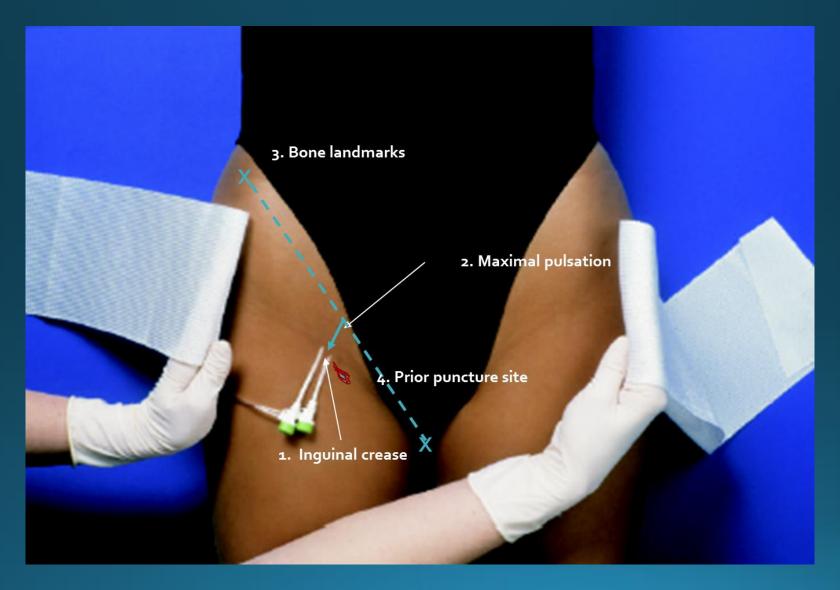
Keep poking until you get a gusher







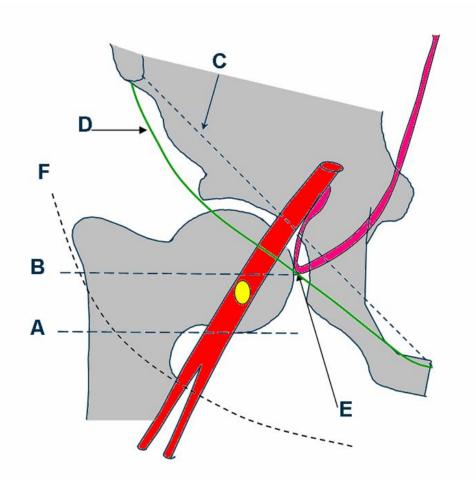
#### Landmarks for Femoral Access

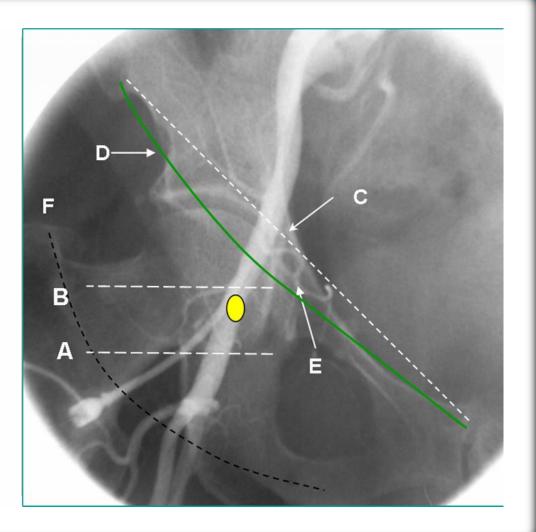


# Ideal









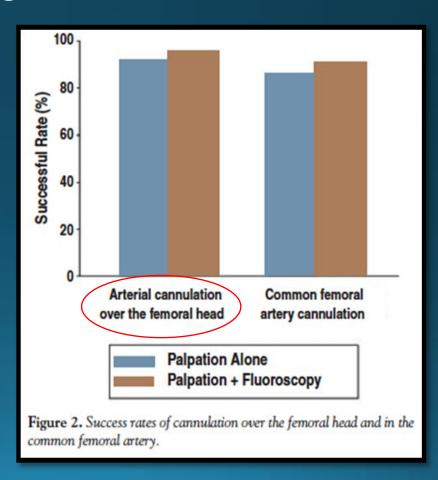
#### Fluoroscopic guidance – the elusive CFA

Widely recommended, but 3 RCTs negative

Huggins CE - J Inv Cardiology 2009

Jacobi JA - Proc (Bayl Univ) 2009

Abu-Fadel MS - CCI 2009



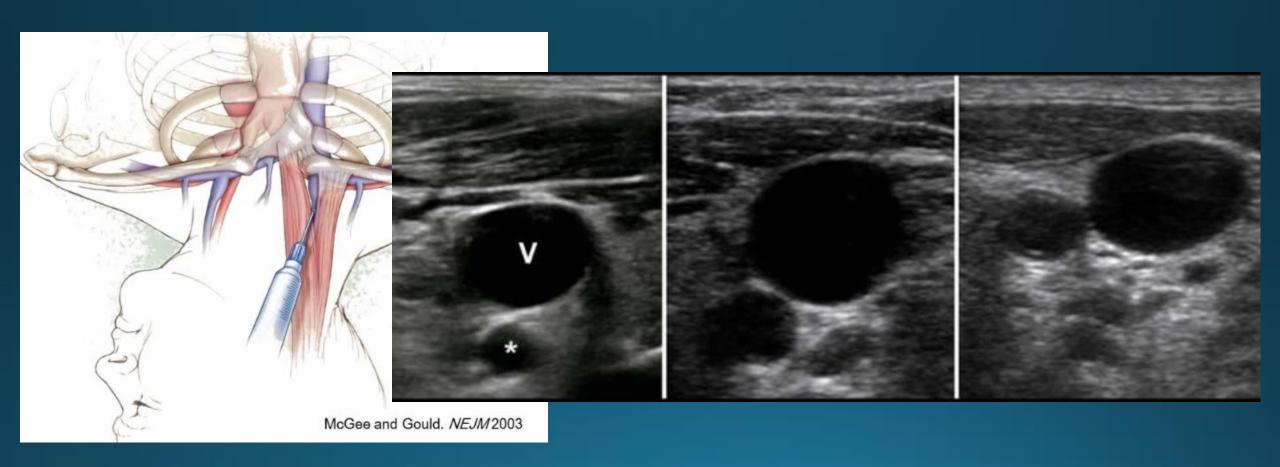
#### Need to see the Safe Zone! Everyone is unique!



Unpredictable:

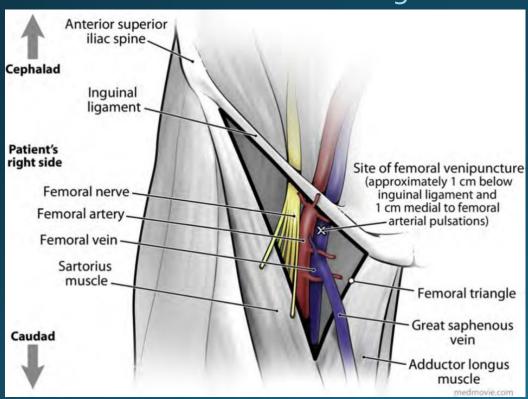
Low inguinal ligament + High bifurcation

## Blind -> US-guided



#### Blind -> US-guided

#### We can do well without seeing~!



#### We can do better with seeing



#### Ultrasound Access Techniques

- "Static"
  - mapping technique
  - no sterile technique required for US

- "Dynamic"
  - views needle entering vein
    - freehand
    - needle guide
  - requires sterile technique



#### A 15-MHz i7 hockey stick probe



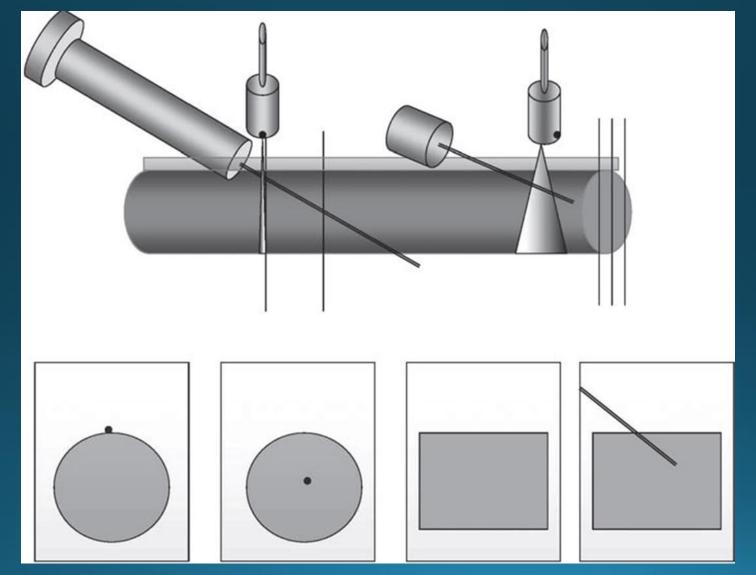








### Transverse vs. Longitudinal



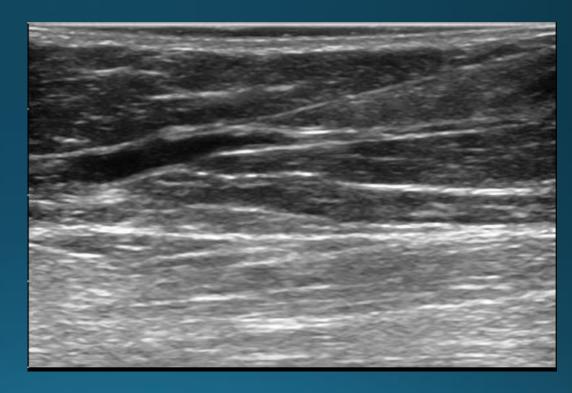




#### Transverse

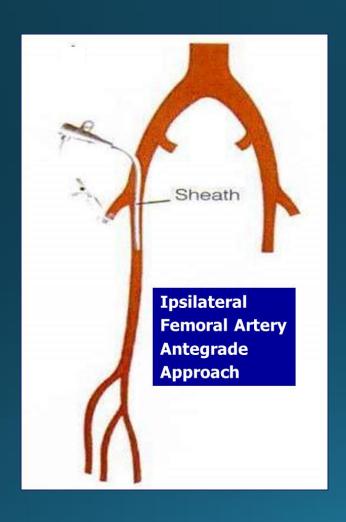


### Longitudinal



# Ultrasound-guided Arterial Access

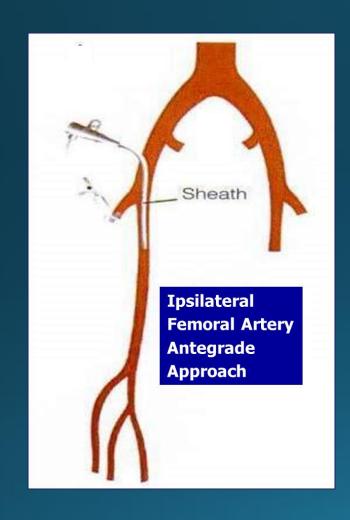
#### Ipsilateral Antegrade Femoral Access

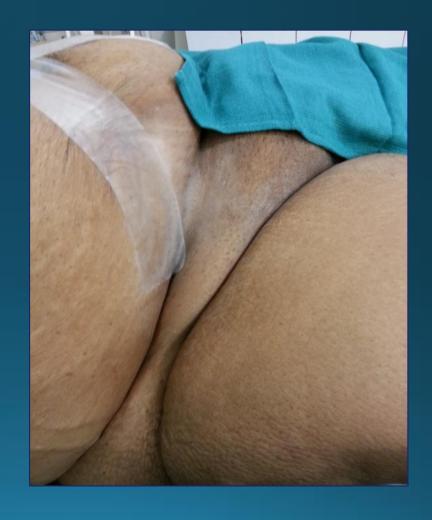


#### Advantages:

- Better 'support' & higher success to cross complex L.E. lesions/CTO
- Can reach distal pedal lesions
- Less contrast use
- Novice operator:
  - Learning curve
  - Radiation exposure

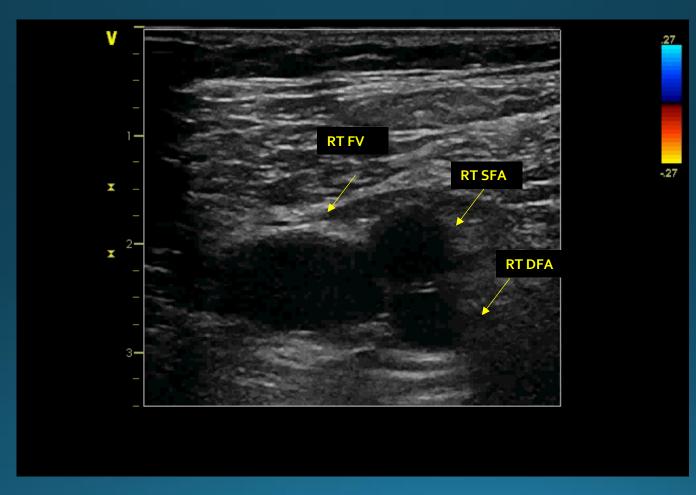
#### Ipsilateral Antegrade Femoral Access





### Mickey Mouse Sign





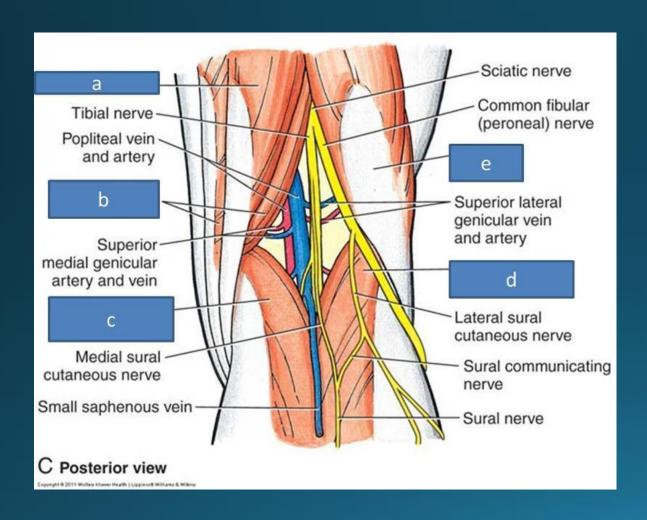
#### Ipsilateral Antegrade Femoral Access

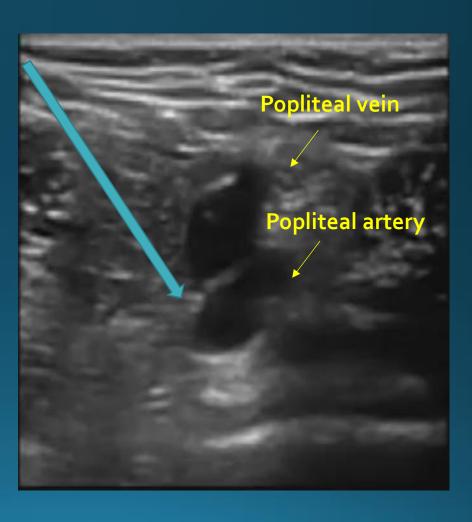






#### Popliteal ultrasound





## Popliteal artery puncture

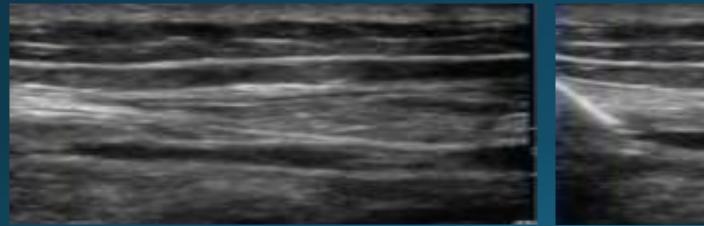


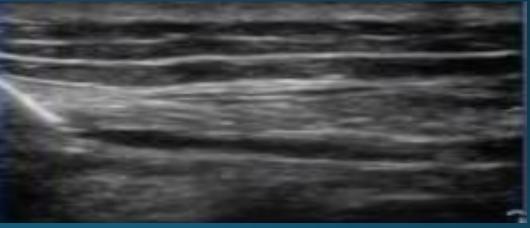
#### Pedal Arteries





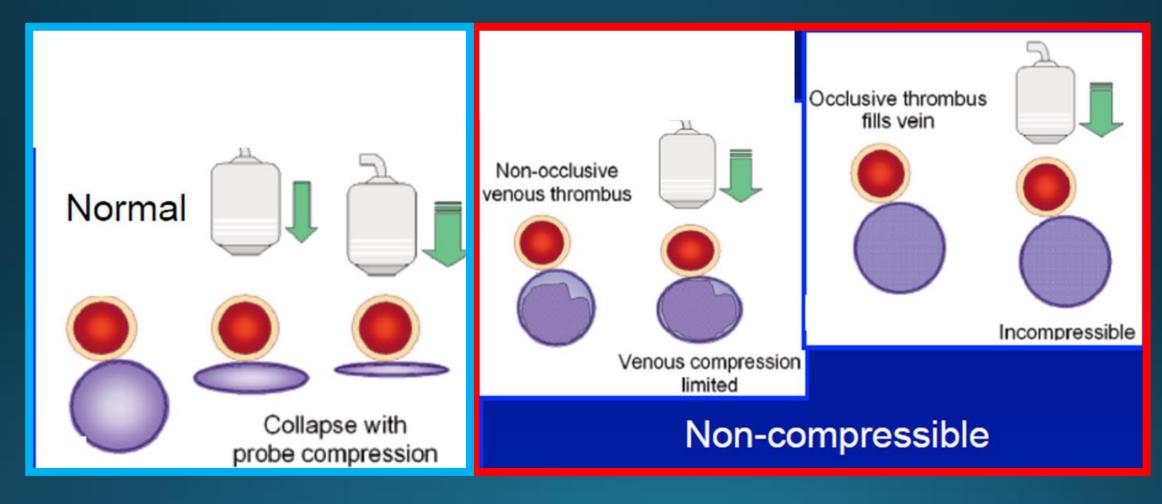
#### Pedal Puncture





# Ultrasound-guided Venous Access

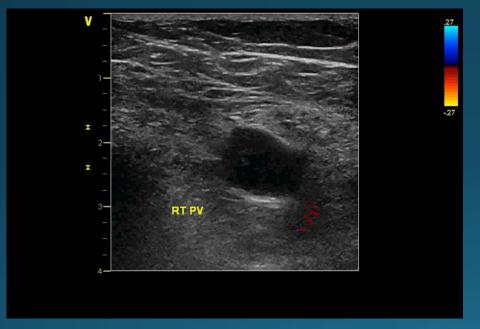
#### **DVT**



#### Popliteal Vein

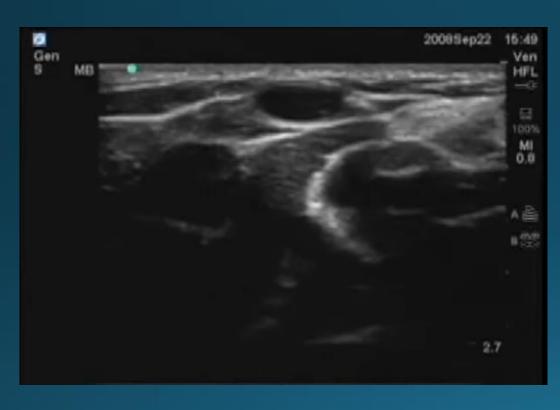
#### Noncompressible

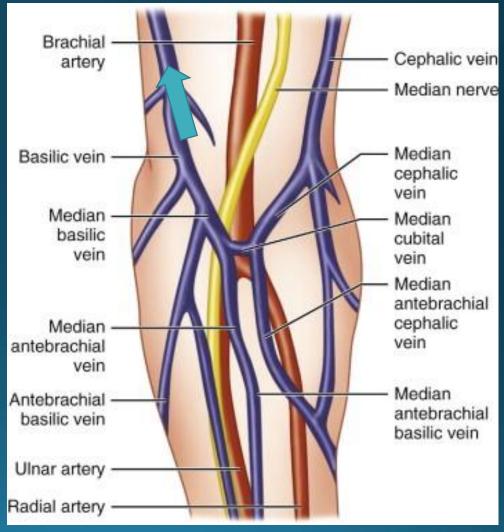
#### Compressible



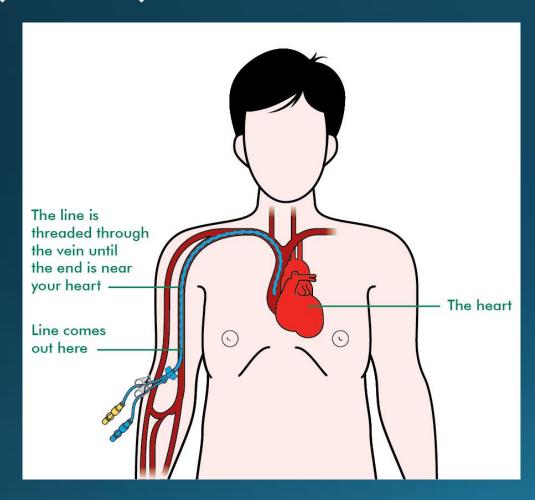


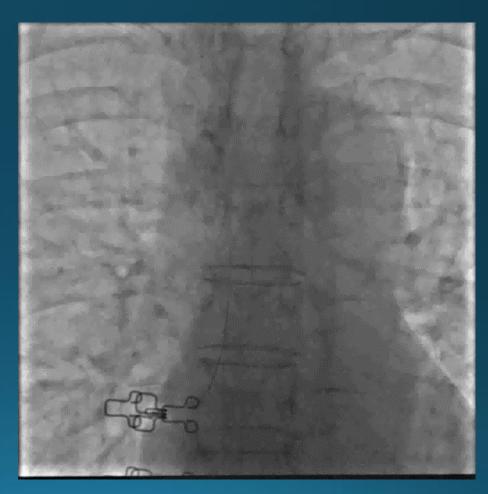
#### Basilic or Cephalic Vein Puncture





# Peripherally Inserted Central Catheter (PICC)

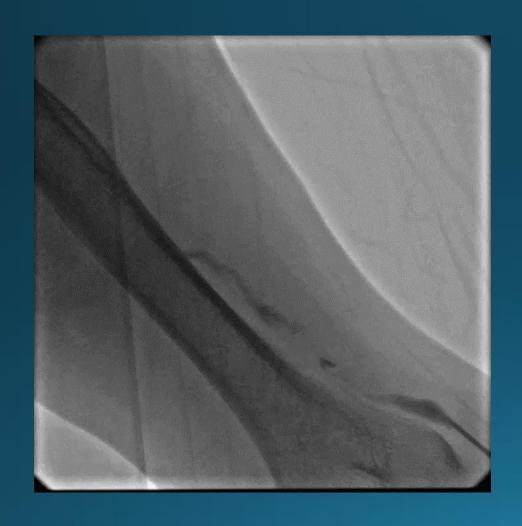




#### Ultrasound-guided basilic vein puncture



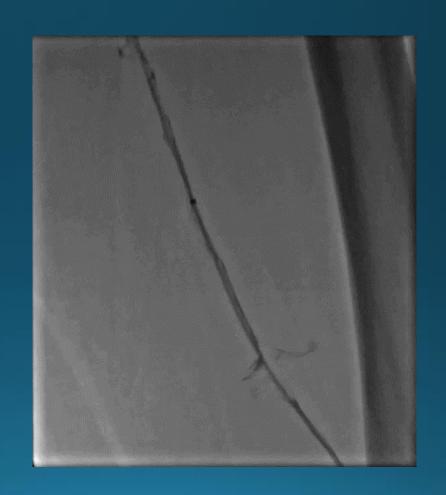
#### Hemodialysis Access PTA





# Catheter-Directed Thrombolysis for Acute DVT

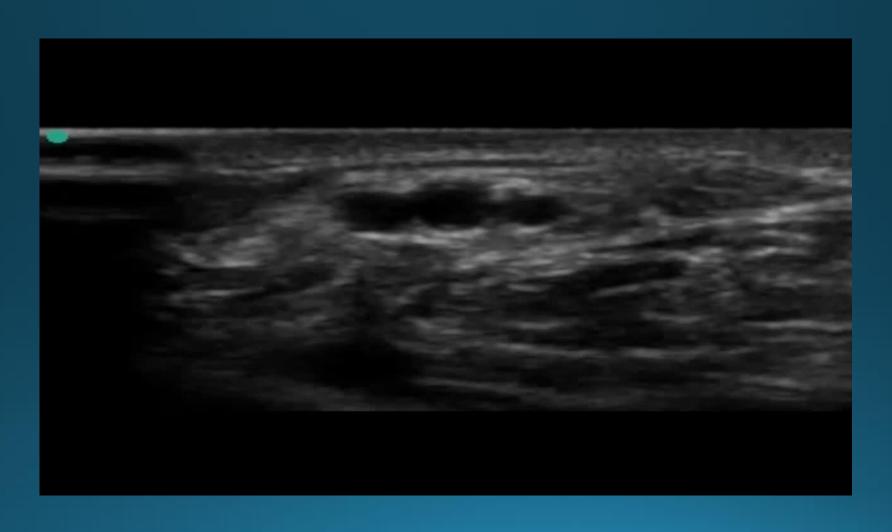




Even for

# Radial artery

## Radial Artery



#### US-guided Radial Artery Puncture



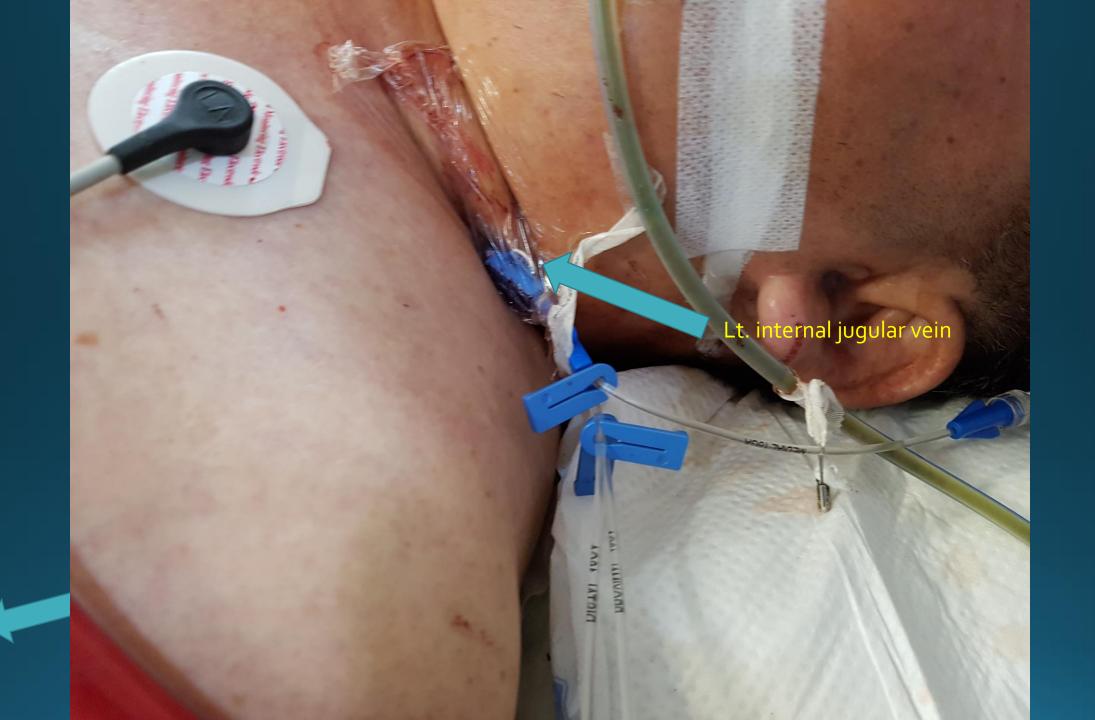
#### Palpation vs. Ultrasound Guidance for Transradial Catheterization

	Ultrasound Guidance (n=236)	Palpation (n=237)	<i>P</i> Value
Number of Attempts	1.65±1.2	3.05±3.4	<.0001
Time to Sheath Insertion, sec			
Mean	83±78	113±124	.0016
Median (IQR)	60 (42-91)	75 (50-119)	<.005
First Pass Success Rate	64.8%	43.9%	<.0001

# Extra-Corporeal Cardiopulmonary Resuscitation (ECPR) - ECMO

- Rt. Common femoral artery for arterial cannula
- Rt. Common femoral vein for venous cannula
- Lt. Common femoral artery for coronary angiography

- Antegrade Rt. Superficial femoral artery for distal perfusion
- Rt. radial artery for (Harlequin syndrome) monitoring



#### Summary

 Ultrasound guided vascular access is reliable & safe (possible now)

 Tactile and Fluoro-guided vascular accesses are out dated standards

Ultrasound-guided access needs learning curve



## 경청해주셔서 감사합니다.

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