WSMI Procedure for Patients with Difficult Venous Access

Certain diseases and medication treatments deteriorate ones veins, especially chemotherapy. To obtain images with sufficient contrast enhancement in CT and MRI the injection must be made using an automatic injector. In order to do so, a catheter must be inserted into a vein that will withstand a significant amount of pressure.

Our combined goal is to make the experience as painless as possible for our patients. With our joint efforts we can make sure the patient is both mentally and physically prepared for the exam. These patient needs to be made aware that the catheter being inserted for their exam is not the same needle that is used for a blood test.

WSMI has reiterated the following procedure that will be followed for all patients with difficult venous access:

**Identifying patients with difficult veins:**
1. Patients undergoing or who have undergone chemotherapy, who have/had a portacath, or who have/had PICC line or central line insertions should be brought to the attention of the Study Coordinator before booking exams.
2. Patients with difficult veins will be flagged in the RIS system under Medical Alerts

**Preparation for patients with difficult veins:**
When scheduling patients with difficult veins, they will be requested to begin drinking plenty of water starting 24H before the exam up to the 3H before the exam when they must be NPO.

**Finding IV access:**
1. 15min before attempting to find an IV access, hot compresses will be applied.
2. A maximum of 3 attempts will be made by the nurse, if unsuccessful an experienced technologist will then attempt up to 3 times. If still unsuccessful a Radiologist will be called in.
3. If the Radiologist does not find a venous access the Data Manager will be called to find out if the exam can be done with out IV contrast.