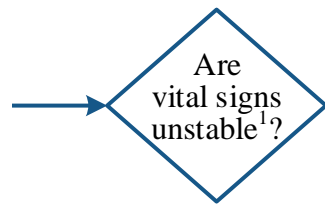


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**Note:** This algorithm is used by Acute Care Procedures Team

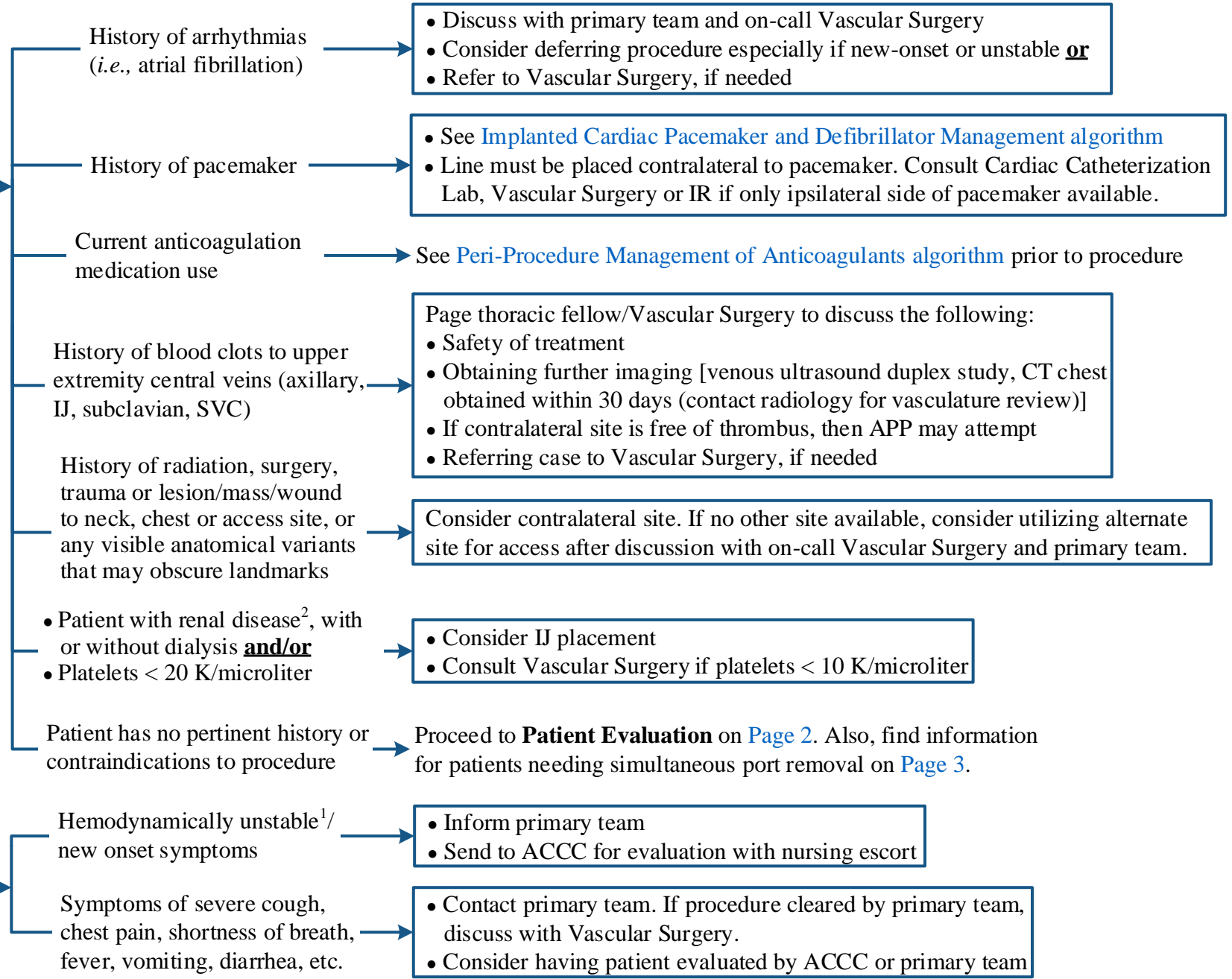
Patient pending CVC placement [internal jugular (IJ), subclavian or femoral]. All requests placed to Infusion Therapy.



Assess patient history

No

Yes



**Coagulopathy Threshold**

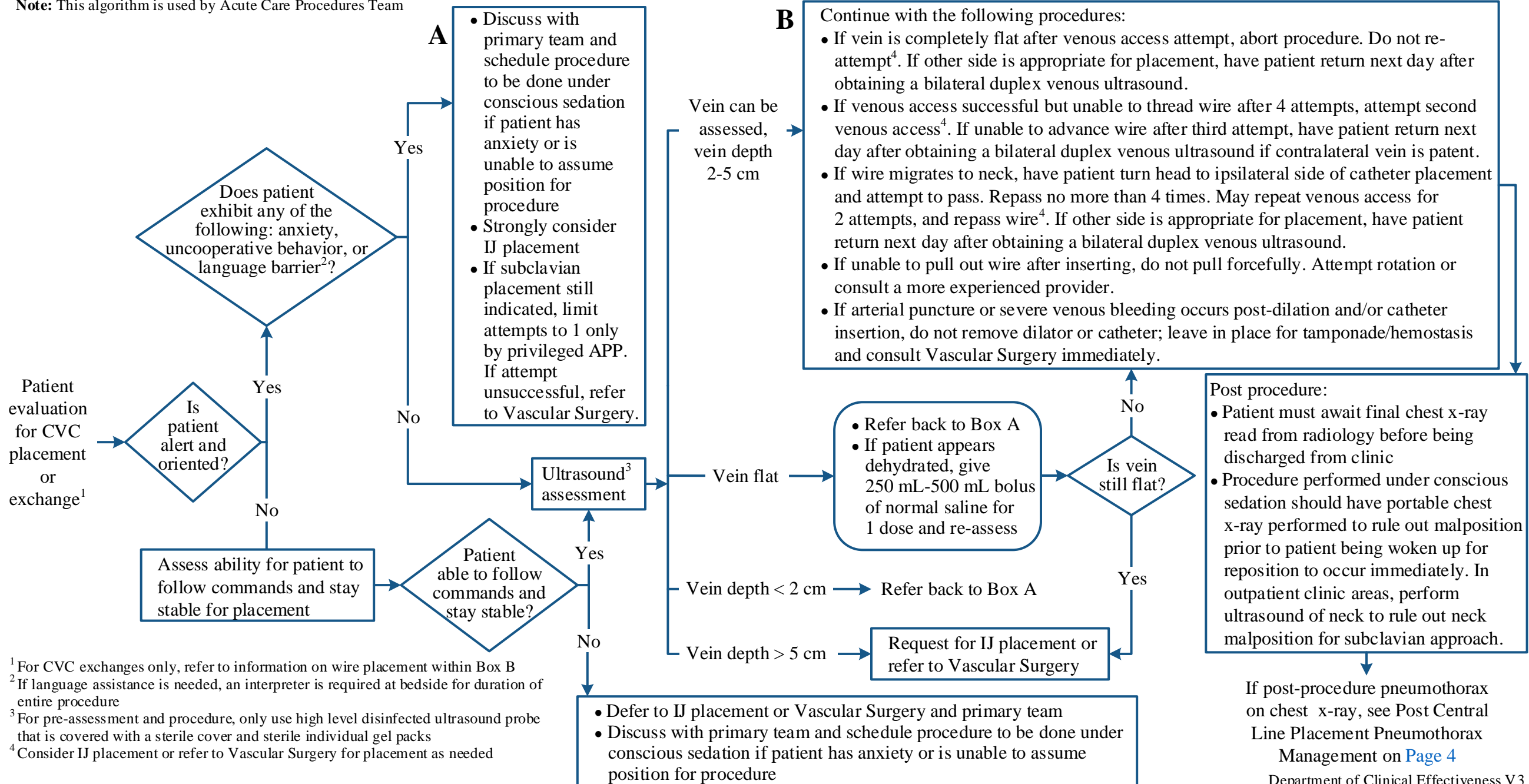
Procedure	Minimum platelet threshold	Threshold to infuse platelets during procedure	INR
IJ	20 K/microliter	10-20 K/microliter	2
Subclavian	30 K/microliter	20-30 K/microliter	2
Femoral	20 K/microliter	10-20 K/microliter	2

APP = Advanced Practice Provider      IR = Interventional Radiology  
 ACCC = Acute Cancer Care Center      SVC = superior vena cava

<sup>1</sup> Heart rate >110 bpm or < 60 bpm, oxygen saturation < 92% and systolic blood pressure < 95 mmHg or > 170 mmHg  
<sup>2</sup> Stage 3B or higher with glomerular filtration rate < 45 mL/minute

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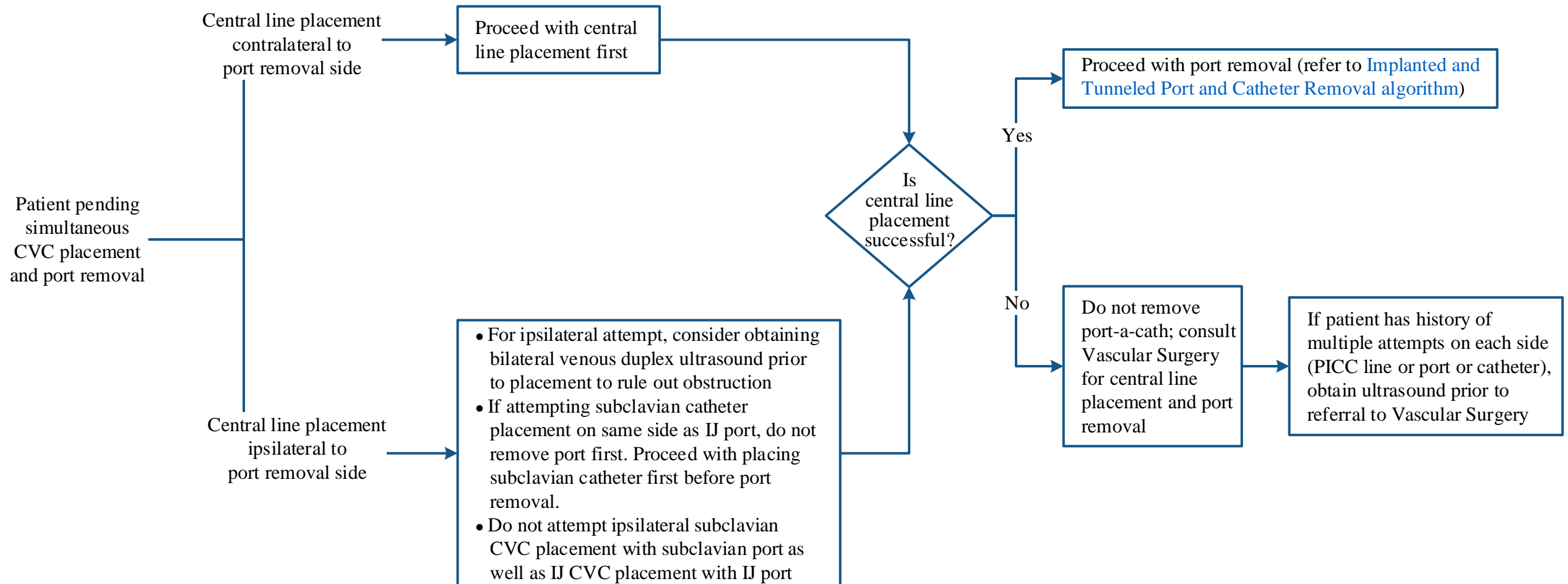
**Note:** This algorithm is used by Acute Care Procedures Team



<sup>1</sup> For CVC exchanges only, refer to information on wire placement within Box B  
<sup>2</sup> If language assistance is needed, an interpreter is required at bedside for duration of entire procedure  
<sup>3</sup> For pre-assessment and procedure, only use high level disinfected ultrasound probe that is covered with a sterile cover and sterile individual gel packs  
<sup>4</sup> Consider IJ placement or refer to Vascular Surgery for placement as needed

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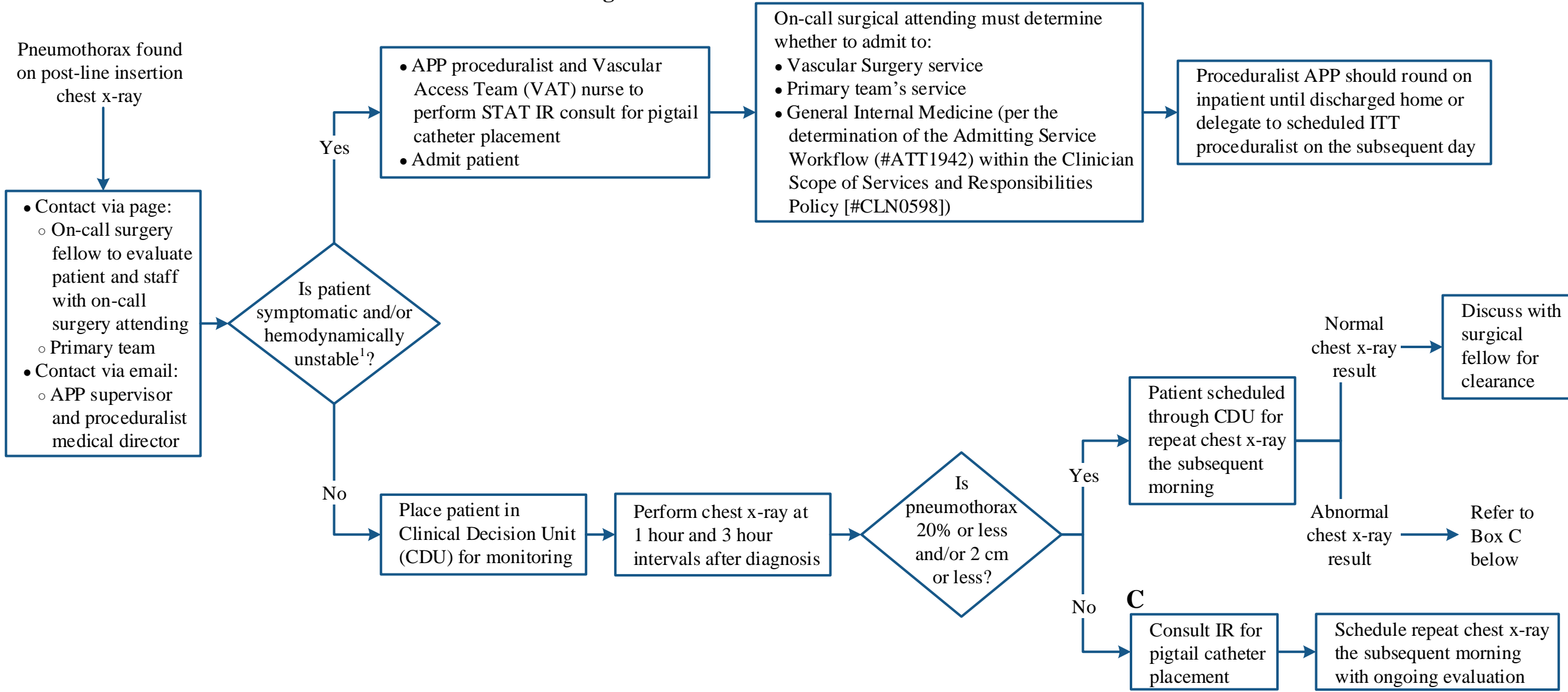
**Note:** This algorithm is used by Acute Care Procedures Team



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**Note:** This algorithm is used by Acute Care Procedures Team

## Post Central Line Placement Pneumothorax Management



<sup>1</sup> Heart rate > 110 bpm or < 60 bpm, oxygen saturation < 92% and systolic blood pressure < 95 mmHg or > 170 mmHg

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## DEVELOPMENT CREDITS

This practice consensus statement is based on majority opinion of the Acute Care Services experts at the University of Texas MD Anderson Cancer Center for the patient population. These experts included:

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