

External Jugular Access (≥ PL4)

Clinical Indications:

1. External jugular vein cannulation is indicated in a critically ill adult patients who require intravenous access for fluid or medication administration, and in whom an extremity vein or is not obtainable.
2. External jugular cannulation can be attempted initially in life threatening events where no obvious peripheral site is noted, and intraosseous access is contraindicated or undesirable.

Contraindications:

1. No absolute contraindications

Procedure:

1. Place the patient in a supine head down position where possible to distend the neck veins.
2. Turn the patient's head toward the opposite side if no risk of cervical injury exists.
3. Prep the site as per peripheral IV site.
4. Align the catheter with the vein and aim toward the same side shoulder.
5. "Tourniqueting" the vein lightly with one finger above the clavicle, puncture the vein midway between the angle of the jaw and the clavicle and cannulate the vein in the usual method.
6. Attach the IV and secure the catheter avoiding circumferential dressing or taping.
7. Avoid use of cervical collars with external jugular venous access. If needed, other methods of cervical motion restriction should be used.