



THE TELEFLEX  
**ACADEMY**

# VA Forum Perth Oct 2016

*Joy Blacka (RN, MCP, VA-BC)*

# AVA : The Venue



# AVA 2016 Disney World – Orlando – Florida



# AVA 2016 Continued...Fun...



## *My Take Aways.....*

- New Technology.....Lock Therapy
- Controversy.....Midlines
- Clinicians need to be loud and proud that they are Vascular Access Clinicians and shouldn't limit their scope to PICC nurses or cannulation nurse
- Posters
- Thrombosis & Infection
- Linking Research > Clinical Practice > Evidence
- Amy Bardin received the 2016 Suzanne Herbst Award for her contribution to Vascular Access

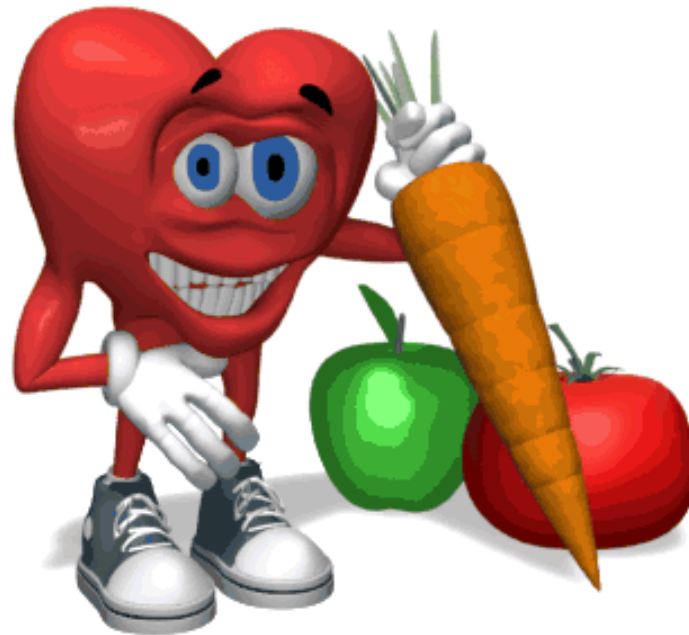
# *Its all About Networking*



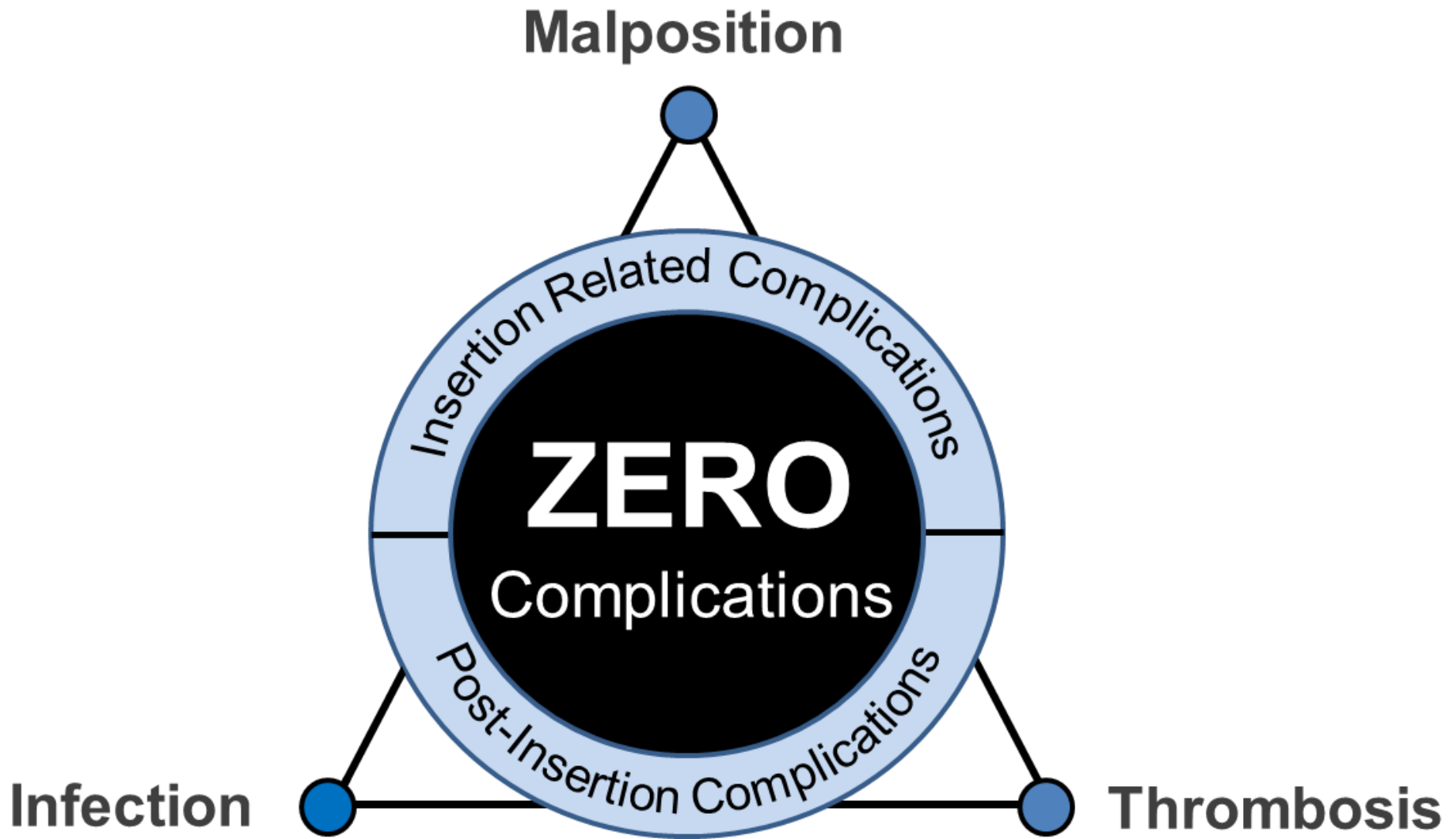
# Over to Peter.....



*Lets Eat....*







# *Arrow Update*



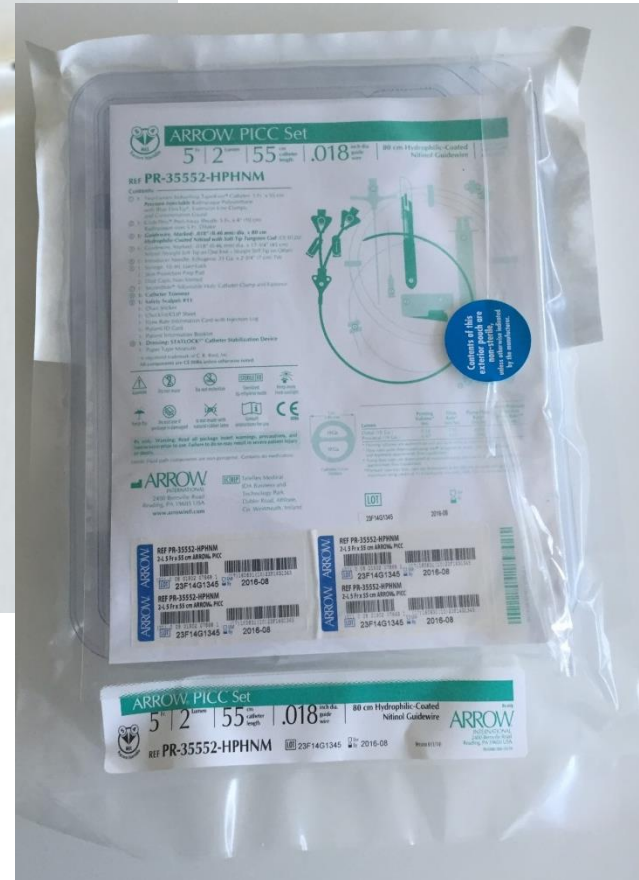
# *IO : Bridging the Gap: Expanding Scope of Practice*



***As the Vascular Access Guru can you get immediate access in less than 10 secs?***



# We have listened..... Premium Components/New Packaging



# Pressure Injectable Antimicrobial CVCs

ANZCA release guidelines

<http://www.anzca.edu.au/communications/anzca-bulletin/bulletin-release-2014/college-conversations-september/04-allergies-to-chlorhexidine-new-guidelines.html/?searchterm=chlorhexidine>



# ***SOP 47. Central Vascular Access Device Tip Location***

## ***Practice Criteria***

- Tip should be in lower segment of SVC at or near CAJ
- Deeper tip location (near tricuspid valve or ventricle) is associated with cardiac arrhythmias (II)
- Use ECG technology in real time for tip location (II)
- ECG technology is more accurate, allows more rapid initiation of infusion therapy and reduces cost (II)
- Tip confirmation by chest radiograph when ECG unavailable
- Document CVAD tip location in medical record
- Place ECG tracing, radiology report or other appropriate report in the medical record

*Infusion Therapy Standards of Practice 2016 [www.ins1.org/](http://www.ins1.org/)*

# Tip Positioning Technology

## Tip Positioning

- ECG Interpretation P Wave (Nautilus Delta & Arrow VPSR)

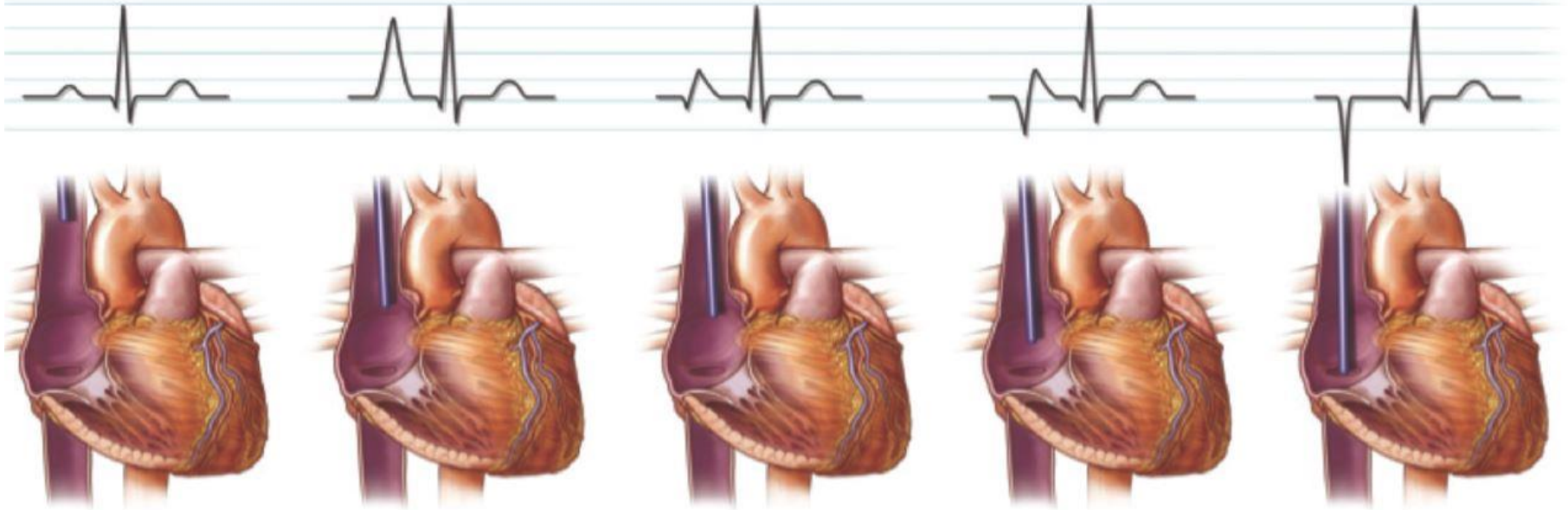
## Navigation + Tip Positioning

- Magnetic Tracking (Sherlock & Arrow VPSR)
- \*Doppler (Arrow VPSG4)
- ECG Interpretation “R” Wave (Nautilus Delta & Arrow VPSR)

*\* Not registered or available in ANZ*



# ECG Interpretation for Tip Position of CVCs



**Figure 1**  
No evident P-wave changes indicates catheter is not in acceptable position.

**Figure 2**  
A P-wave at its maximum height will indicate the catheter is in the lower 1/3 of superior vena cava/ right atrial junction.

**Figure 3**  
A downward deflection on the leading edge of the P-wave indicates the catheter entering the right atrium.

**Figure 4**  
A biphasic P-wave indicates the catheter is within the right atrium.

**Figure 5**  
An inverted P-wave indicates a catheter is approaching the right ventricle.

# Arrow VPSR

- **Simple**

- Familiar ECG technology

## Flexible

Modular device

## Reliable

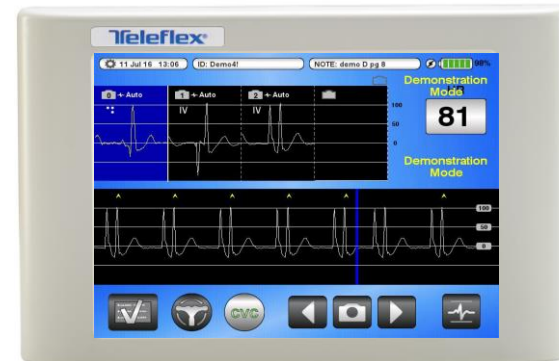
Eliminate chest X-ray

**Find Your Rhythm**

# VPS<sup>®</sup> System Portfolio

## VPS Rhythm<sup>™</sup> Device

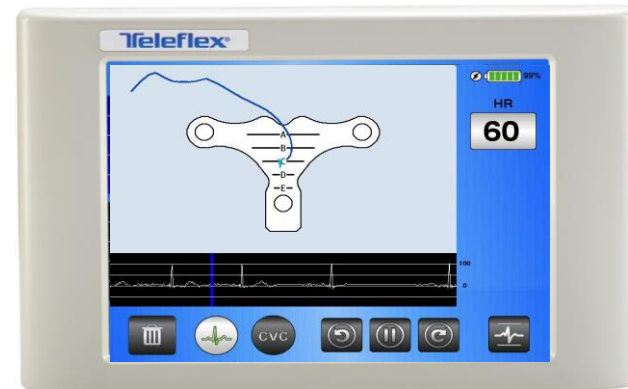
- Basic ECG only - simple to use
- Incorporates familiar ECG modality
  - Requires interpretation of P-wave
- Tip Confirmation Checklist



# VPS<sup>®</sup> System Portfolio

## VPS Rhythm™ Device with TipTracker™ Technology

- Visual **navigation** and **tip confirmation**
- Incorporates familiar ECG modality
  - Requires interpretation of P-wave
- Tip confirmation checklist



Find  
Your  
Rhythm



## *Upcoming Conferences*

- Combined AVAS & WoCoVa conference

Date: 10<sup>th</sup>, 11<sup>th</sup> & 12<sup>th</sup> May 2016

Venue: Perth Conference Center

***Thank You***

*Thank You*