

Percutaneous catheterisation of the axillary vein and proximal basilic vein.

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Abstract:

Percutaneous catheterisation techniques for the axillary vein and proximal portion of the basilic vein based on venepuncture on a visible or palpable vein are described. Results are presented on 73 catheterisation attempts on axillary veins and 68 on proximal basilic veins, in which the failure rate was 4.9% and 6.9% respectively. The advantages of the techniques include simplicity and the absence of acute life-threatening complications. The incidence of phlebitis from indwelling catheters maintained for an average of 5 days (range 1-28 days) is less than 2%. Several aspects of the techniques including background anatomy and anticipated risks are discussed.