

NEEDLE DECOMPRESSION, CHEST

Indications

- Tension pneumothorax (hypotension with absent breath sounds during ventilation)
- Traumatic arrest with chest trauma

Contraindication

- Pneumothorax without hypotension

1. Locate and palpate site at 2nd intercostal space (above 3rd rib), mid-clavicular line.
2. Prep site appropriately.
3. Insert 10-14 gauge (2.5-3.25 inch) IV catheter @ 90° angle to chest wall, until air is released.
4. While holding needle steady, advance catheter over needle, until catheter hub at skin
5. Leave catheter in place and remove needle.
6. Assess for improvement in clinical status (e.g., increased BP).
7. Frequently reassess patient (esp. BP, lung sounds) and catheter patency; may need to repeat procedure if clinical deterioration or catheter occlusion occurs.
8. IF FAILED attempt OR PATIENT IS MARKEDLY OBESE, use 4th intercostal space lateral to inferior mammary fold mid axillary.

