



Surgery residents do not strictly adhere to the guidelines for CVC and CT insertions, and there is substantial variation in the practice of the procedures, which may contribute to complications associated with these procedures” Cho et al (2018).

Abstract: OBJECTIVES: Central venous catheter (CVC) and chest tube (CT) insertions are common bedside procedures frequently performed by surgery residents. Despite published guidelines, variability in the practice exists. We sought to characterize the surgery residents’ practice patterns surrounding these two bedside procedures. MATERIALS AND METHODS: Over the last 1½ months of the academic year in 2012 and 2013, surgery residents across the US were surveyed online. Participants reported levels of agreement for 15 questions in a 5-point Likert scale format. RESULTS: A total of 219 residents completed the survey. Majority of residents agreed that they received appropriate education and training. Over half of the respondents reported that they did not have attending staff physician’s supervision during the procedures. Junior residents felt less confident in performing CVC or CT insertions. Those younger than 29 years old and of female sex were also less confident in performing CT insertion. Although almost all residents reported using maximal sterile barrier precautions, 7% reported not securing their gowns and another 7% reported inadequate draping of patients. About ⅓ reported no hand cleansing before the procedures. Those from community programs compared to university programs less frequently used antibiotics. Sixty-five percent of residents reported routine use of ultrasound for CVC insertion. CONCLUSION: Surgery residents do not strictly adhere to the guidelines for CVC and CT insertions, and

there is substantial variation in the practice of the procedures, which may contribute to complications associated with these procedures. This survey opens new areas for in-service education, feedback, and practices for these procedures to reduce the risk of complications, especially the infectious one.

Reference: Cho, E.E., Bevilacqua, E., Brewer, J., Hassett, J. and Guo, W.A. (2018) Variation in the Practice of Central Venous Catheter and Chest Tube Insertions among Surgery Residents. *Journal of Emergencies, Trauma, and Shock*. 11(1), p.47-52. doi: 10.4103/JETS.JETS_124_15.

