

BEST PRACTICE GUIDANCE
**Importance
of Guidewire
Positioning: CVC
Insertion**

Guidewires rarely require positioning more than 20 cm deep depending on the stature of the patient.^{1,2}

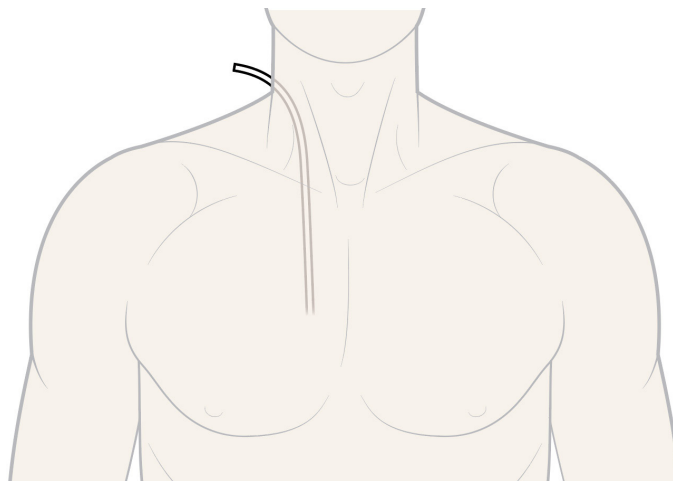
Depending on patient stature, the superior cavoatrial junction averages¹:

- 18 cm for right subclavian access
- 21 cm from the left subclavian

Advancing the guidewire deeper risks intra-cardiac or inferior vena cava (IVC) wire placement with the potential for²:

- Cardiac arrhythmia
- Perforation
- Snaring of other intravascular devices

Recommendation: Advance the guidewire only as far as needed to allow passage of the catheter over the wire.



References: **1.** Andrews, RT., Bova, DA., Venbrux, AC., Critical Care Med., 2000;28(1):138., How much guidewire is too much? Direct measurement of the distance from subclavian and internal jugular vein access sites to the superior vena cava-atrial junction during central venous catheter placement. Accessed May 31, 2022. **2.** McGee WT., Moriarty, KP., J Intensive Care Med. 1996;11(1):19., Accurate placement of central venous catheters using a 16 cm catheter. Accessed May 31, 2022.