ABSTRACT

The use of a triple-lumen catheter with 0.4cm of space between the proximal port and the medial port, and 1.3 cm of distance between them and their distal port in order to administer incompatible solutions does not lead to adverse clinical effects.

INTRODUCTION

Introduction In the 1970s, a technique was developed for the simultaneous administration of incompatible drugs across a central venous catheter with a decreased port to port distance. The drug is then placed in the catheter and the port is closed. After several hours, the drug is removed from the catheter and the port closed. The drug is then placed in a separate container and the port open.

The drug is then placed in a separate container and the port open. The drug is then placed in a separate container and the port closed. The drug is then placed in a separate container and the port closed. The drug is then placed in a separate container and the port closed. The drug is then placed in a separate container and the port closed. The drug The study examined a triple-lumen catheter with alterations in its design, measuring 5.5 F 5 cm (Arrow International), with an additional 0.4 cm port distance between the medial and proximal ports and only 1.3 cm from the distal or lateral ports, and having fewer port spaces between lumens to determine if they precipitate when given intravenous solutions that are not incompatible at the same time.

CONCLUSION

Our study examined the use of a triple-lumen catheter with 0.4 cm port distance, 1.3 cm ports between distal and medial ports, 5 cm overall length, and modified catheter for in vivo administration of incompatible solutions, including phenytoin and TPN, using redesigned catheters. We used previously published methodology to investigate the effects of administering drugs administered through specialized catheter models, but not those of another individual designed for intravenous administration.