



محاضرة رقم 2

Lecture No2

الجانب النظري

Theoretical

تقنيات اجهزة تخدير الكورس الاول

INVASIVE BLOOD PRESSURE MONITORING

Sawa University

College of health and medical
techniques

Department of Anesthesia

Four Stage

جامعة ساوة الاهلية

كلية التقنيات الصحية
والطبية

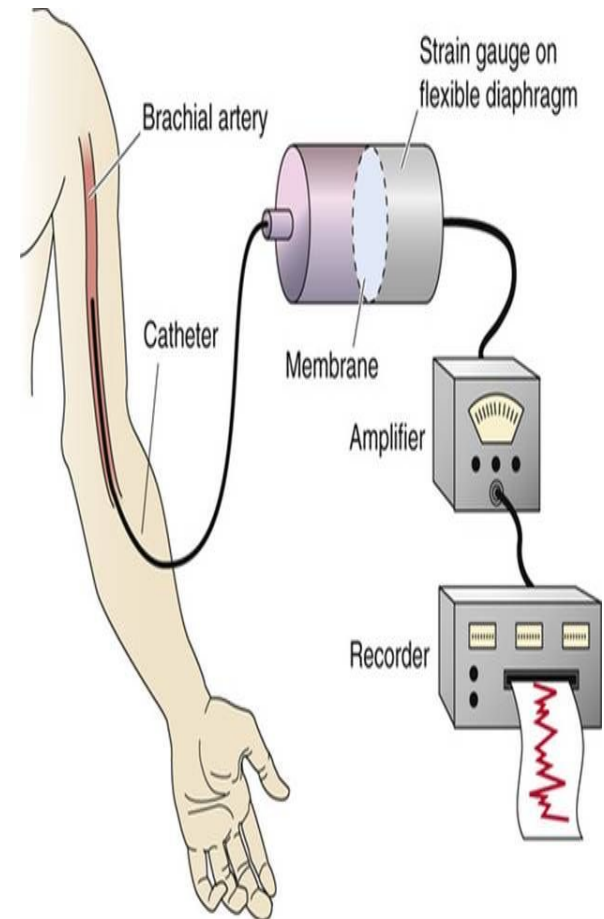
قسم تقنيات التخدير

المرحلة الرابعة

استاذ المادة :م.د سامي رحيم حسن

Definition

- Invasive Blood Pressure Monitoring is the **continuous measurement of arterial pressure** using a **catheter** inserted directly into an artery.
- It is connected to a **pressure transducer** that converts **pressure waves into electrical signals**.
- It is the gold standard for **accurate and continuous arterial blood pressure measurement**.



Indications

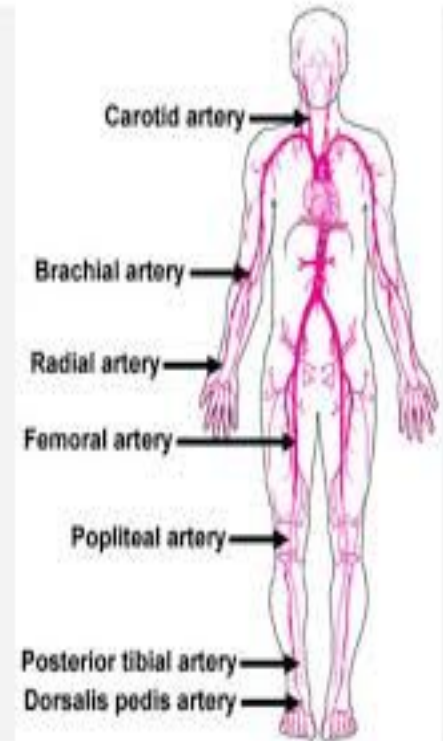
Used when:

- 1- Continuous, beat-to-beat BP measurement is required.
- 2- Patients are critically ill or under major surgery.
- 3- Anticipated rapid hemodynamic changes.
- 4- Frequent arterial blood sampling is needed.



Common Arterial Sites

1. Radial artery – most common, easy access.
2. Femoral artery – during low perfusion or shock.
3. Brachial artery – alternative site.
4. Dorsalis pedis or posterior tibial artery – in specific cases.



Equipment Required

1. Arterial catheter (20G–22G)
2. Pressure tubing and flush system
3. - 500 mL saline with 3 mL heparin
4. Pressure bag (300 mmHg)
5. Pressure transducer and monitor
6. Sterile field and insertion kit

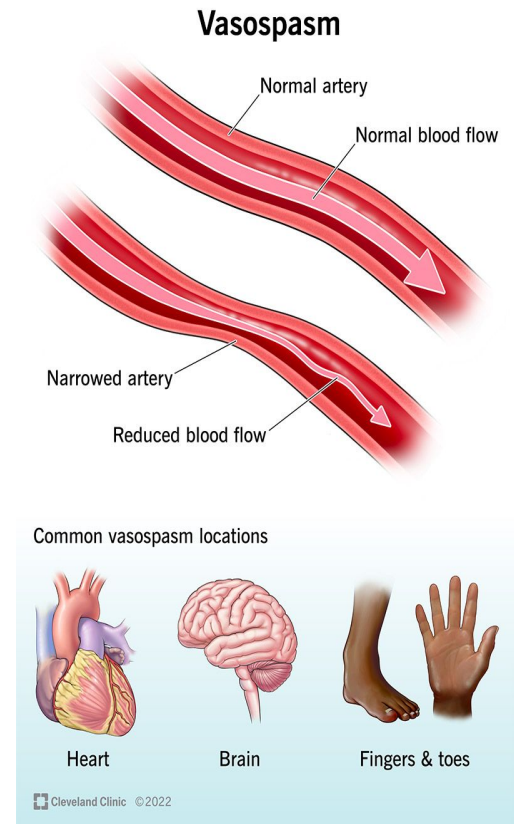


Principle of Operation

- The **pressure in the artery** is transmitted via the fluid-filled tubing to the transducer.
- The transducer converts pressure into an electrical signal.
- The **monitor displays the arterial waveform and values for systolic, diastolic, and mean arterial pressure.**

Complications

1. Infection
 2. Thrombosis or embolism
 3. Hemorrhage
 4. Arterial spasm or occlusion
 5. Nerve injury
- Prevention: **strict aseptic technique, proper site care, frequent observation.**



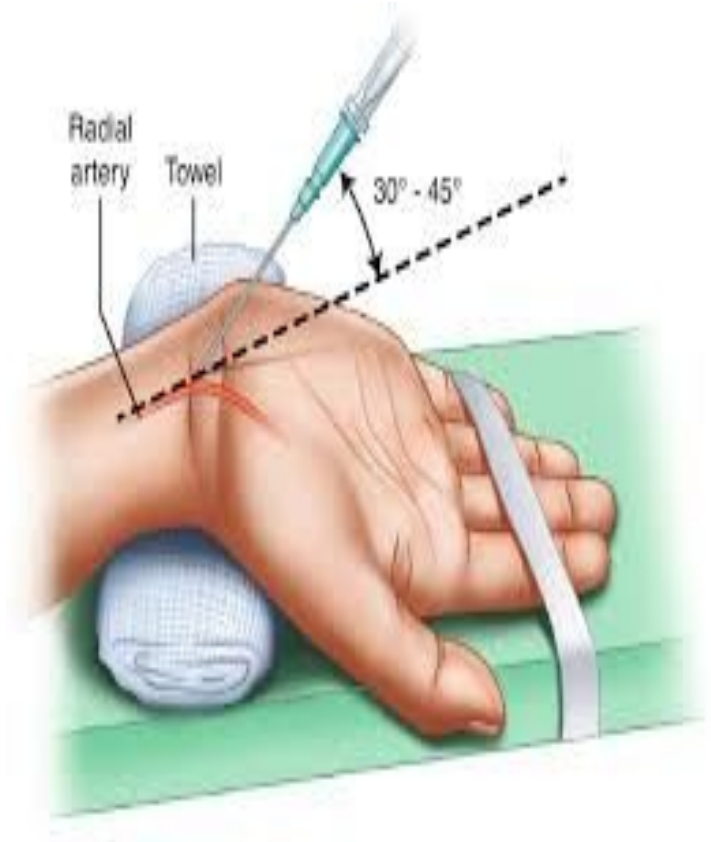
Advantages

1. Continuous and accurate BP monitoring.
2. Early detection of hemodynamic instability.
3. Allows frequent blood sampling.



Disadvantages

1. Invasive and risk of complications.
2. Requires technical skill.
3. Costly and time-consuming setup.



References

1. Miller's Anesthesia, 9th Edition
2. Barash PG. Clinical Anesthesia, 9th Edition
3. Morgan & Mikhail. Clinical Anesthesiology, 7th Edition
4. Aitkenhead AR. Textbook of Anaesthesia, 6th Edition

