

Bölüm 5

VENÖZ KATETERİZASYON VE MONİTÖRİZASYON

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GİRİŞ

Santral venöz kateterizasyon (SVK), tarihte ilk kez 1929 yılında cerrahi asistanı Werner Forssmann tarafından üreter kateteri kullanarak kendi antekübital veninden perükten girişimle sağ atriuma kadar uzan yerleşim bildirilmiştir⁽¹⁾. İnsan üzerindeki ilk uygulanmasıyla, tedavi, monitörizasyon ve venöz erişimde yeni bir dönemin başlangıcı olmuştur⁽¹⁾. Aubanic 1952 yılında ilk kez subklaviyan vönez girişimi tanımlamıştır. 1953'te Sven-Ivar Seldinger tarafından kendi adıyla adlandırılan klavuz tel ile güvenilir kateter yerleştirilmesini kolaylaştıran teknik tanımlanmıştır⁽²⁾. 1969' da ilk internal jugüler venöz kanülasyonundan sonra santral venöz basınç(SVB) monitörizasyonu bildirilmiştir. Hemodiyaliz kateterleri 1960' larda geliştirilmiş, 1970' lerde ise tünelli kateterler kullanılmaya başlanmıştır⁽³⁾.

Venöz kateterizasyon, hidrasyon sıvılarının, ilaç uygulamalarının, kan ve kan ürünlerinin ve beslenme ürünlerinin güvenli infüzyonunu sağlanması amacıyla periferik ya da merkezi bir vene kateter yerleştirilmesidir.

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