



During Conveyance

- Arm and body in position of comfort
- Wrist movement restriction
- IV in situ
- SPO₂ on same hand as band

Patient Assessment

1. Assess prior to interfacility transfer, then every 15 minutes:

- Baseline vital signs
- Neurovascular:
 - Capillary refill (less than 2 seconds or baseline for patient)
 - Pain, tingling, numbness
 - Coolness and/or colour change
 - O₂ saturation of the affected thumb
- Bleeding or hematoma.

2. Document assessment findings

Band Removal Procedure

⚠ The band may stay on (deflated) during transfer to the receiving facility to allow for re-inflation if bleeding occurs.

Pre-Removal

1. Confirm band application time
2. Confirm band release start time on Post Procedure Form
3. Document air in mL at starting point (usual amount is 15 mL, max is 18 mL)

If bleeding occurs during deflation, stop and re-inflate with the same amount removed.

Procedure

1. Insert syringe tip into air port
2. Ensure syringe at 2 mL deflation position
3. Remove 2 mL of air every 15 minutes
4. Re-assess site after each deflation
5. After deflation, if there are no complications, remove the band from patient's wrist
6. Apply a Tegaderm dressing
7. Continue patient assessments every 15 minutes

Complications

Bleeding (band in situ):

1. Inject enough air to control bleed **not exceeding 18 mL** until bleed is controlled
2. If bleeding is not controlled with maximal inflation, remove the band and apply direct pressure just proximal to access site for 10 minutes
3. Once hemostasis is achieved, continue with site checks
4. If bleeding persists for longer than 10 minutes, continue direct pressure and divert to the nearest hospital

Do not re-apply the band

Hematoma:

1. Outline perimeter of hematoma
2. Document and restart site checks
3. If hematoma occurs while the band is on, leave band on and apply pressure to the hematoma for 10 minutes (or longer if not resolving).
4. Notify receiving hospital.

Neurovascular Compromise

1. Remove 1 mL of air from band air-port (repeated as long as hemostasis is maintained)
2. Monitor for improvement:
 - a. **WITH improvement:** continue site checks
 - b. **WITHOUT improvement:** convey to nearest hospital
3. Document
4. Notify receiving hospital

✓ Indications

- Interfacility transfer following trans-radial cardiac angiography

✗ Contraindications

- No absolute contraindications