**Paracentesis Procedure**

Date: <\_\_\_\_>

Time: <\_\_\_\_>

Indication: <Diagnostic evaluation of ascites and therapeutic removal of ascites fluid>

Resident completing procedure: <\_\_\_\_>

Supervising attending: <\_\_\_\_>

A time-out was completed verifying correct patient, procedure, site, positioning, and special equipment if applicable. Ultrasound was utilized to obtain safe catheter insertion site for procedure. The patient’s <right/left> abdomen was prepped and draped in a sterile manner. 1% lidocaine was used anesthetize the surrounding skin. A finder needle was then used to locate fluid and <clear yellow> fluid was obtained. An 11-blade scalpel was used to make a small incision to allow for passage of catheter. The paracentesis catheter was then threaded without difficulty. The patient had <mL> of <clear yellow> fluid removed and the site was covered with bandaid/pressure dressing.

<Attending/Resident> was present for the entire procedure. The fluid will be sent for several studies

Estimated Blood Loss: <\_\_\_\_>

The patient tolerated the procedure well and there were no complications.

Resident Name, PGY-#

Pager Number: