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## Cannulation of the Internal Jugular Vein: Variation on a Theme

*To the Editor:*—When one reads the letter on cannulation of the internal jugular vein by Gibbs and Arandia<sup>1</sup> one notes the striking similarity to an article by Civetta *et al.*<sup>2</sup> This latter article describes a technique in which a 22-gauge spinal needle is passed through the center of a 14-gauge steel needle and the spinal needle is used to locate the internal jugular vein. When the jugular vein is located, the 14-gauge needle is advanced over the spinal needle into the vein, the spinal needle is withdrawn, and a plastic cannula is passed through the 14-gauge needle and threaded into the vein. The larger needle then is retracted, leaving the smaller catheter within the jugular vein.

The modification described by Gibbs and Arandia is certainly more attractive, since the catheter remaining in the vein is larger than either of the components which have pierced the vein. Thus, the larger cannula would be more likely to seal the puncture in the venous wall and would reduce the probability of bleeding or hematoma formation. Although the modification is useful, reference should have been made to the previous article.

There are many descriptions of central venous cannulation in the literature; a representative, but by no means comprehensive, list follows.<sup>1-8</sup>

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