

Round -1

Dear Editor,

Answer: First of all thank you. All requested revisions have been made. The language has been revised again. Table and result have been revised. All changes made are highlighted in the main article in yellow.

Catheter insertion site and length of stay is an important risk factor in catheter-borne infections. Jugular catheters should be preferred over the entry points as the risk of infection is less than other catheters, and preventive measures should be taken by closely monitoring the patients in reducing hospitalization infections.

Criteria used when selecting the location of a central venous catheter: In the emergency department, ultrasonography was not available until 2018. For this reason, none of the 1042 patients could be subjected to catheter placement accompanied by ultrasonography. Accompanied by ultrasonography, we were unable to learn about complications that may occur as a result of catheter placement. But for catheter placement, all patients were applied with some criteria. These criteria;

-*Jugular catheters;* elderly, cachectic, superficial vein structure, lack of coagulopathy barrier, lack of local wound infection, low risk of pneumothorax, rapid venous return, and direct compression in bleeding. Right or left catheter placement was performed according to the current condition of the patient and the experience of the clinician.

-*Subclavian catheters;* obesity, the dressing was comfortable, the placement procedure was possible while ensuring airway control, there was no local infection, no coagulopathy, and the right or left catheter was placed according to the experience of the clinician.

-*Femoral catheters;* Fast intervention with high success rate, no local infection, no coagulopathy, no division during cardiopulmonary resuscitation and/or intubation, no risk of pneumothorax, no Trendelenburg position, cachectic patients and according to the experience of the clinician, right or left catheters were placed. However, due to the current location of the inguinal region, jugular or subclavian catheters were

preferred more because of the high risk of infection, although sterility was taken into consideration.

Table 2 was revised. See blow.

Table 2: Analysis of the inserted catheter area according to gender, complication, and final situation

		Catheter Area Inserted						Total n(%)	P- value
		R Jugular n(%)	L Jugular n(%)	R Subclavian n(%)	L Subclavian n(%)	R Femoral n(%)	L Femoral n(%)		
Gender	Female	248(42)	73(47.4)	20(29.4)	23(26.1)	30(39)	29(45.3)	423(40.6)	0.009
	Male	343(58)	81(52.6)	48(70.6)	65(73.9)	47(61)	35(54.7)	619(59.4)	
Complication	No	583(98.6)	149(96.8)	63(92.6)	75(85.2)	49(63.6)	46(71.9)	965(92.6)	0.001
	Pntx	0	0	1(1.5)	3(3.4)	0	0	4(0.4)	
	GW	0	0	0	0	1(1.3)	1(1.6)	2(0.2)	
	Bleeding	2(0.3)	0	0	4(4.5)	1(1.3)	1(1.6)	8(0.8)	
	WI	2(0.3)	1(0.6)	1(1.5)	1(1.1)	2(2.6)	6(9.4)	13(1.2)	
	AI	4(0.7)	4(2.6)	2(2.9)	3(3.4)	11(14.3)	3(4.7)	27(2.6)	
	Sepsis	0	0	1(1.5)	2(2.3)	13(16.9)	7(10.9)	23(2.2)	
Decision	OPT	104(17.6)	28(18.2)	12(17.6)	14(15.9)	9(11.7)	7(10.7)	174(16.7)	0.001
	DWH	484(81.9)	121(78.6)	46(67.6)	58(63.6)	35(45.5)	41(64.1)	783(75.1)	
	Mortality	3(0.5)	5(3.2)	10(14.7)	18(20.5)	33(42.9)	16(25)	85(8.2)	
Total		591(100)	154(100)	68(100)	88(100)	77(100)	64(100)	1042(100)	

R: Right, L: Left, Pntx: Pneumothorax, GW: Guidewire, WI: Wound infection, AI: Arterial intervention, OPT: Outpatient treatment, DWH: Discharged with healing

Thank you again.

Best regards.

Round -2

Answer: Thank you for your interest. The required minor revision was made in the article.

Central venous catheterization is an indispensable application especially for emergency services and brings with it the risk of many complications. Complications in the subclavian and femoral veins are more common in long-term use. Jugular vein catheterization can be preferred primarily due to the difficulties in application and the low number of complications. In addition, prevention of risk factors with infection control policies and measures developed can significantly reduce catheter-related infection rates.