

# Home Care for Peripherally Inserted Central Catheters (PICC Line)

## Why Do I Need a PICC Line?

Your doctors and healthcare providers have determined that you are a candidate for a peripherally inserted central catheter, also called a PICC line. The PICC line is useful if you may need long term or continuous therapy involving:

- IV medication (antibiotics, chemo, etc.)
- IV nutrition
- blood transfusions
- frequent blood samples

## What is a PICC Line?

- A PICC line is a thin, flexible tube (catheter) that is inserted into a vein in the upper part of your arm.

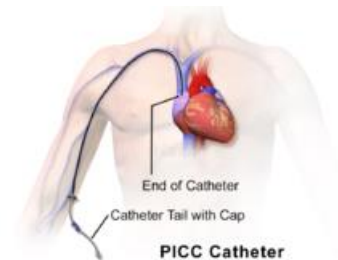


## What Are the Benefits of a PICC Line?

- Eliminates frequent IV changes that can be painful.
- Medications can be given in a large vein that would be irritating if they were given through a smaller vein.
- You can go home with a PICC line in place and receive medications at home.
- A PICC line can stay in place for weeks to months depending on your needs or your course of treatment.

## How is the PICC Line Inserted?

- Your PICC will be inserted in the Interventional Radiology department.
- While you lay on a table, the doctor or physician assistant (PA) will use an ultrasound machine to find a large vein in your upper arm.
- The skin over the area selected will be numbed by Lidocaine. (Lidocaine is like the novocaine your dentist uses.)
- Once the area is numb, the catheter will be guided through the vein until the tip of the catheter lies in the large vein just above your heart.
- You may feel slight pressure during the insertion but you should not feel the catheter as it threads up your arm.
- The catheter will be mostly under the skin with one or two “tails” that extend and hang out at the insertion site.



## Caring for Your PICC Line

Once you are home, caring for your line is very important.

Key Points:

- Be sure you have a safe and clean area to store your supplies.
- Store the equipment on a table or shelf at or above waist height.
- Develop a routine for line care so that your supplies are convenient.
- Always wash your hands thoroughly before touching the line. You can wash your hands at the sink, or use sanitizing gel. Be sure to clean thoroughly and for the recommended amount of time.

## Supplies Needed to Change Your Dressing

- Antiseptic swab or pad
- Clean gloves
- Drape
- Two masks
- Sterile gloves
- Window dressing (gauze and tape)

You may be given an additional type of dressing that includes an antiseptic disk. The disk is placed around the catheter.

## Removing the Old Dressing

1. Wash and dry your hands thoroughly.
2. Put on clean gloves.
3. Open the dressing kit and carefully remove the mask without touching anything else in the kit.
4. Put on the mask. If someone is assisting you, they will need to wear a mask as well.
5. Carefully remove the old dressing. Start by gently removing the tape around the edges first, working inward. Do not touch the skin around the insertion site. Be careful not to tug on the catheter.
6. Inspect the area around the site. **Do not touch the site with your fingers.** Check for redness, tenderness, swelling or drainage. If any of these are present, call your nurse and follow any additional instructions.
7. Remove your gloves and dispose of the old dressing and the gloves.

## Applying the New Dressing

1. Open the sterile glove kit.
2. Put on the sterile gloves.
  - a. Without touching the outside of the sterile glove, carefully insert one hand into a glove; pull it on using the rolled back cuff.
  - b. Insert the other hand, and, without touching your skin, pull the glove on snugly.
3. Gently scrub the site with the antiseptic swab or pad beginning at the insertion site. Clean the site using a back and forth scrubbing motion for 30 seconds.
4. Extend the cleaned area to a 3 x 3 inch area. **Do not go back over any area that has already been cleaned.** Wait until the skin is dry.
5. Apply skin protectant around the edges where the dressing will stick to your skin. Do not put protectant on or near the insertion site.
6. Let the area dry.
7. If you have an antiseptic disk, put it around the catheter at the insertion site. Put the shiny side against your skin. If your antiseptic disk has a blue side, place the blue side away from your skin.
8. Remove the protective backing off the new dressing - there is a slit for the catheter tube. **Position the slit at the bottom of the dressing.**
9. Apply the dressing, being careful not to touch the side that will be in contact with your skin. Smooth the dressing from the inside out and remove any trapped air.
10. Remove the outer border on the outside of the dressing.

## Changing the Catheter Cap

1. Gather your supplies and assemble them in a clean work area:
  - a. alcohol pad
  - b. new cap
  - c. sterile gloves
  - d. two masks
2. Make sure the tubing is clamped.
3. Wash and dry your hands thoroughly.
4. Put on your mask. If someone is assisting, they will need to wear a mask as well.
5. Put on sterile gloves (see instructions under "Applying New Dressing").
6. Open the end cap package and set aside, using the bottom of the package as a tray – be careful to keep the cap in its package.
7. Wipe the junction of the cap and line with an alcohol pad.
8. Remove the old cap and set aside.
9. Keep the line facing towards the ceiling at all times – this prevents the possibility of contamination. **Never touch the connector or the inside of the cap.**
10. Connect the new end cap securely.

11. Remove the gloves and throw the old cap and gloves away.
12. Immediately secure the tubing (see instructions below).

### **Securing the Tubing**

1. Make a small loop in the tubing and position the ends facing upwards. Tape it onto the outside edges of the dressing itself (so there is less tape on your skin). This will secure the tubing, help prevent too much tension on the tube, and lessen the risk that the tube will be pulled out.
2. Wash your hands.
3. Write the date on new dressing.

### **Flushing Your PICC Line**

Flushing the line is important to prevent blood from clotting and blocking the catheter.

1. Gather your supplies and assemble them in a clean work area:
  - a. alcohol pad
  - b. 10 cc syringe prefilled with a solution
  - c. clean gloves
2. Wash and dry your hands thoroughly.
3. Put on clean gloves.
4. Make sure the tubing is clamped.
5. Thoroughly cleanse the catheter cap with an alcohol wipe and hold onto it to prevent contamination.
6. Inspect the syringe. Remove the cap. Hold the syringe facing upward and remove the cap with gentle pressure. If there are bubbles, flick the syringe with your finger to remove as many as possible. (A few small bubbles may remain, there is no danger.)
7. Insert the tip of the syringe into the center of injection cap.
8. Unclamp the catheter.
9. Gently pull back on the syringe until you see a flash of blood. (This insures that there is no air in the line.)
10. Slowly push the plunger of the syringe to inject the solution.
11. Re-clamp the catheter when your syringe only has about 1 ml left in it.
12. Immediately remove the syringe and dispose of it properly.
13. **Never use the same syringe a second time.**
14. Re-tape the tubing if necessary.
15. Wash your hands.

### **What if the Catheter Gets Pulled?**

- Don't panic. Check to see if the catheter is totally out or just a small length was pulled out. The catheter extends several inches inside the vein.
- If the catheter is still in the skin, tape it in place. Put a bandage on the site and apply pressure for 10 minutes.
- If the catheter has totally come out, apply pressure on the site for 10 minutes.

- Either way, contact your doctor right away. If you feel it is an emergency, go to your nearest emergency room.

### **Common Reasons to Call Your Doctor/Nurse Promptly**

- Can't flush the line using normal pressure
- Have pain, redness, or unusual drainage over/around the site
- Have a fever of 100.4°F (38°C) or higher
- Aches, pains, or swelling in the shoulder, neck, arm, or line site
- You feel burning when your medicine is infusing
- You have unusual bleeding
- You can't draw back blood from the catheter (with a syringe)
- You hear rushing water sounds in your ear(s)
- You feel vibration, movement, or pain in your jaw
- Your face is flushing or the veins in your neck look larger
- The catheter breaks
- You have chest pain or shortness of breath
- The hand or arm on the side where you have your PICC line has swelling or the skin in the area changes color or feels colder

### **General Precautions**

Follow these general guidelines to prevent infection and stay safe.

- Wash your hands before and after any contact or handling the PICC line.
- Check your dressing every day. Keep it clean, dry, and in place.
- Most of the catheter will be under the skin but there may be one or more "tails" that extend out of the insertion site. Do not let the catheter tails dangle freely. Secure them to your arm.
- Make sure the line clamped (closed) when you are not using it.
- Use plastic wrap to cover the line during a shower or bath.
- Never use pins or scissors near your PICC line.
- Your doctor or nurse will tell you how often to change the dressing.
- In addition, change the dressing as soon as possible if it becomes soiled or wet.
- Make sure there is always an end cap attached to the end of the port.
- Change the end caps every time you change your dressing.

### **Common Questions**

#### **How long will I have to have this line in place?**

Only your physician can let you know how long your therapy will last.

When you no longer need the therapy, the line can be removed.

#### **Where will I get my supplies and equipment?**

Your supply needs will be coordinated by a home care agency and you will receive instructions on their use. Store all your supplies in a clean, dry area. Store them at waist height or above. Do not store any supplies lower than waist height, such as on the floor.

### **If You Have Any Other Questions or Concerns**

Your PICC line is an important part of your care and we encourage you to call us if you have questions or concerns. Your physician can be reached by calling your Center. Centers are generally open Monday to Friday, 8:00am to 5:00pm.

### **What to Do if You Need Medical Attention**

- **If you require medical attention outside of business hours, please call your Center.** Your call will be answered by our triage nurses or Call Center staff if your Center is closed.
- Roswell Park's Assessment and Treatment Center is open 24 hours a day, 365 days a year. If you are sick and require immediate evaluation for non-life-threatening symptoms, your physician is required to contact the ATC on your behalf. (The ATC is not a walk-in clinic.)
- You can reach Roswell Park 24/7 at **1-800-ROSWELL**  
**(1-800-767-9355)**
- **If you feel you are in a life-threatening situation, call 911 or go to the nearest hospital emergency room.** Bring your Roswell Park green card with you. If you go to the ER or are hospitalized, please have someone call us to let us know.

### **Your Home Care Agency**

Name \_\_\_\_\_

Phone \_\_\_\_\_

### **Your personal PICC Information**

Name \_\_\_\_\_

Lot # \_\_\_\_\_

PICC product # \_\_\_\_\_

Date of insertion \_\_\_\_\_