

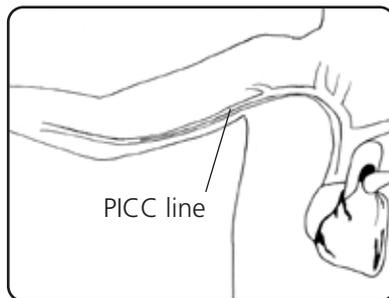
# Peripherally Inserted Central Catheters (PICC lines)

This booklet is intended to support the information you receive about peripherally inserted central catheters, which are often called PICC lines. The practitioner placing the line will explain the procedure and any potential risks.

## What is a PICC?

A PICC is a soft, long tube. It is inserted into a vein in the upper arm and passed along the vein until it is positioned in a large vein just above the heart (as seen in picture).

Depending on your treatment the PICC may have one or two lumens (tubes).



## Why do you recommend I have a PICC?

A PICC may be recommended for several reasons. These include:

- The need for intravenous therapy that lasts for more than a few days.
- All types of intravenous drugs (e.g. chemotherapy, antibiotics, blood products and other fluids) can be safely administered via a PICC.
- The major benefit is that it can stay in place for the length of your treatment or up to two years, that way it avoids the discomfort from having repeated needles (cannulae) during your treatment.
- Some medications can only be given via PICC line as the smaller veins in the hand are not suitable.

- In most cases it can be used for taking blood samples.

## What are the alternatives to having a PICC?

Another type of central catheter may be considered such as a tunnelled central catheter (a Hickman line) or a TIVAD (Totally Implanted Vascular Access Device or port) may be considered. The options can be discussed with you.

## What preparation do I need for the procedure?

As a patient you need to do very little to prepare before the insertion of your PICC. It will help if you have been drinking fluids prior to the insertion. You will also need to be on your bed for the procedure.

You can eat and drink normally.

## What does the procedure involve?

The insertion of the PICC is not an operation; it will be a sterile procedure. The practitioner will prepare sterile equipment, and dress in surgical clothing.

They will measure your arm and chest to determine the length the line will need to be.

The practitioner will use ultrasound to locate your veins, before inserting the PICC. Local anaesthetic (lidocaine) is injected to numb the area. This does sting momentarily and works quickly.

You will need to lie down during the procedure, although not necessarily flat, with the appropriate arm out supported on a pillow. It will take approximately 30-60 minutes. The practitioner will make sure you are in as comfortable a position as possible during this time.

Your skin is cleaned with an antiseptic and sterile drapes will be used.

Once the PICC is inserted it will be secured with clear sterile dressing.

## What happens after the PICC insertion procedure?

You may need a chest x-ray before the line can be used to make sure it is located in the correct position. After the local anaesthetic has worn off you may feel some discomfort around the insertion site and your shoulder may ache a little from having your arm in an awkward position. This can be relieved by taking a painkiller like Paracetamol and should last for only a few hours.

The line site will be cleaned and the dressing renewed within 24 - 48 hours of insertion. The dressing and connector will subsequently be renewed on a weekly basis.

## Are there any risks?

Although inserting a PICC can be straightforward, there are a couple of risks to consider:

### Bruising or bleeding

As with any procedure that involves inserting a needle into a vein, some bruising or bleeding may occur. This may be affected by your medical condition, or the medication you are taking.

We will routinely check your blood clotting results before starting the procedure and note if you are on medication such as warfarin or aspirin.

### Infection

Strict hand cleansing before any contact is essential.

Any device that is inserted into the body can become a source of infection. The nurses or doctor need to know if:

- the area around where the line goes into the vein becomes red, swollen, sore or oozes;
- if you develop a temperature or chills;
- you feel generally unwell.

You can help by not getting the area wet. Waterproof covers are available, please ask.

## Thrombosis/blood clot

A small risk is a formation of a blood clot around the line. If you develop pain or swelling in your armpit or down your arm, inform us immediately. This would normally result in additional treatment.

## Misplaced tip

Occasionally the x-ray will show the tip of the PICC is not in the right place. This will not harm you. In this instance, depending on where the tip is positioned, the practitioner will discuss with you options which may involve another x-ray or withdrawing the line to a shorter length or, in a very small number of cases, removing and replacing the line.

To reduce the possibility of the PICC going the wrong way you will be asked during insertion to turn your head to the side as the line is being introduced with your chin on your shoulder.

## Accidental puncture of the artery

The risk of arterial puncture is minimised by the use of ultrasound as described in the procedure.

## Failure to insert

On rare occasions it can be difficult to insert the PICC. This may result in multiple attempts, or failure to place the line.

We will advise on alternative vascular access devices if this happens.

## Blocked PICC

Sometimes the line may block; this will prevent the PICC being used. We may be able to unblock it, but if we cannot it will need to be removed.

Fast, pulsatile flushing of the PICC after each use; or weekly flushing if the line is not in use, minimises the risk of the line becoming blocked.

## If blood cannot be withdrawn from the line

If this happens we will instill medication into the PICC to resolve this. It may required you to have blood taken from your arm for a short period of time. It can be frustrating because blood samples have to be taken with a needle and syringe from another vein.

If you are receiving Parenteral Nutrition (TPN, PN) blood samples cannot be taken from your line as the risk of infection is greatly increased.

## Dislodged PICC (Migration)

Check at least daily how much of the PICC is visible on your arm.

If this changes, please inform us immediately.

The practitioner ensures that the line is securely fixed and care must be taken to make sure that it doesn't get tugged.

## Frequently asked questions

### Can I have a bath / shower?

You may bath or shower as normal as long as your line is protected by a waterproof cover. Do not submerge your arm under water when bathing.

There are commercial waterproof covers available upon request.

If the dressing is loose or wet after your bath/shower, it will need to be replaced.

## What if my PICC falls out?

If the PICC has only partly fallen out, fix it in place with some tape and contact your nurse immediately. If the PICC has completely fallen out then press with a dressing over the hole for few minutes and apply a small dressing or plaster. Inform your nurse and keep the PICC for inspection.

## Can I play sports?

Sports such as tennis or golf or vigorous gym exercises are discouraged. This is because there is a risk of your PICC becoming dislodged because of excessive upper body movement. You must not go swimming.

## Can I go home with my line?

If the medical team are happy for you to go home sometimes it is possible for your line to be cared for by the community nursing team. The ward staff will provide you with some supplies for the weekly dressing change and contact details of the Vascular Access Team.

## Recommendations/Top Tips

- We would recommend that you use your arm as normal.
- Drink plenty.
- Keep your dressing dry.

We will contact you or a member of staff at intervals during your treatment to monitor you and your line.

*If you have any questions during your treatment and your doctor/nurse is unable to help, please contact:*

**Vascular Access Team**

**01392 406427**

and leave a message

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