



Maintenance of a peripherally inserted central catheter (PICC) and midline catheter

P a t i e n t I n f o r m a t i o n

Flush each lumen weekly with a physiological salt solution (NaCl 0.9%) during a period when it is not being used.

WEEKLY FLUSHING REPLACING THE CAPS

Procedure (home care information):



- Wash your hands and disinfect them using hand alcohol.
- Wear non-sterile gloves if necessary.
- Check whether the catheter clamp is closed.
- Place a sterile compress soaked in an alcohol solution underneath the connection site.
- Remove the old cap.
- Disinfect and clean the open end if it is visibly contaminated.
- X With needleless connector: install a new needleless cap before flushing the catheter.
- Place the syringe with 10 ml* NaCl 0.9% on the open catheter hub or on the new needleless connector.
- Open the clamp but do not aspirate.
- Inject the NaCl 0.9% in a pulsating motion.
- Lock the catheter under positive pressure: close the clamp whilst the final 3 ml is slowly injected.
- X With conventional caps: install a new cap to seal the catheter after flushing.
- Flush the other lumens in the same way.

* 5 ml for an infant or child weighing less than 10 kg

WEEKLY DRESSING CHANGE

DISINFECTION WHEN CHANGING THE DRESSING AND STATLOCK®

Procedure (home care information):



Gather the necessary materials and disinfect your hands.



Remove the dressing.



Disinfect the insertion site and wider area around it with chlorhexidine $\geq 0.5\%$ in 70% alcohol for 15 seconds.



Take the sterile adhesive strip out of the Statlock® packaging.



Attach the adhesive strip and apply an extra adhesive strip over the catheter ends if necessary.



Release the Statlock® using an alcohol compress.



Open the Statlock® ports at the bottom rather than in the centre: take the catheter out of the Statlock®.



Disinfect and degrease the skin where the new Statlock® will be applied using the degreasing wipe in the Statlock® packaging.



Fix the catheter in the new Statlock®: blue pins in the holes in the catheter wing and close the ports, push until they 'click'.



Attach the new Statlock® to the patient's skin.



Remove the temporary adhesive strip.



Disinfect the insertion site again with chlorhexidine $\geq 0.5\%$ in alcohol for 15 seconds and leave it to air dry completely.



Apply a polyurethane dressing and mould it around the catheter.



Use a dressing that is large enough, at least 2 cm around the insertion site and record the date on the dressing.

WEEKLY DRESSING CHANGE DISINFECTION WITH CHANGE OF DRESSING, SECUREMENT WITH SecurAcath® Procedure (home care information):



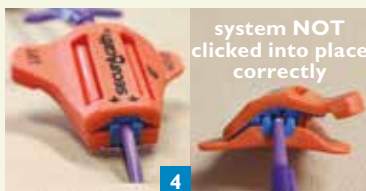
Gather the necessary materials. Make sure your hands are clean, disinfect them and wear gloves.



Remove the dressing. Remove the gloves and disinfect your hands again. Wear new gloves if necessary.



Check if the catheter is still correctly secured in the SecurAcath® and that the system has been closed properly (clicked into place). (a)



Check if the catheter is still correctly secured in the SecurAcath® and that the system has been closed properly (clicked into place). (b)



Disinfect the insertion site with Chlorhexidine \geq 0.5% in 70% alcohol.



Disinfect the SecurAcath® (top and bottom).



Disinfect the skin under the SecurAcath®.



Disinfect the wider area around the insertion site. Always allow the disinfectant to dry properly.



Apply a polyurethane or anti-allergic dressing: minimum 2 cm around the insertion site and mould the dressing around the catheter.



Record the date on the dressing.

What is a SecurAcath®?

A SecurAcath® is a subcutaneous anchored securement device that secures the catheter with two metal hooks (made of Nitilon) into the subcutaneous tissue.

SecurAcath® versus StatLock®?

- ✓ A SecurAcath® remains in place until the catheter is removed. No need for weekly replacements of the securement device, only weekly disinfection whilst changing the dressing (see photographs).
- ✓ No risk of accidental migration or removal of the catheter during weekly dressing change.
- ✓ No longer a need to use a StatLock® as the SecurAcath® replaces the StatLock®.

How is a SecurAcath® removed?

The SecurAcath® is removed when the catheter is removed.

The UZ Leuven Vascular Access Specialty Team or a doctor/nurse who is familiar with this securement device will take care of it.

THINGS TO REMEMBER

FOR CARE PROVIDERS AND HOME CARE PATIENTS

- X Change the dressing at least once a week or more frequently if it is moist, has become loose or is visibly soiled.
- X Don't place the catheter clamp in exactly the same position each time.
- X Always place a sterile compress soaked in an alcohol solution underneath the connection site when disconnecting.
- X Make sure you obtain the necessary materials from the hospital pharmacy in time:

- ✓ dressing:
 - transparent catheter dressing (e.g. Tegaderm® IV)
- ✓ disinfectant:
 - chlorhexidine \geq 0.5% in alcohol
- ✓ Adhesive securement device (e.g. Statlock®) – if an adhesive securement device is being used

CONTACT DATA

If you have problems with the catheter (problem with infusion and/or blood sampling, infection, migration, etc.) or you require additional information, you can contact the following services during office hours:

- Vascular Access Specialty Team nurses,
tel. 016 34 08 64,
katheterzorg@uzleuven.be
- secretariat, tel. 016 34 68 29

NOTES

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Design and implementation

This text was written by the nurses and doctors of the Vascular Access Specialty Team, in cooperation with the hospital hygiene and communications department.

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