

Polyurethane PICC

Patient Guide



Preamble

Your doctor is giving you a **PowerPICC*** catheter so that you can easily get the intravenous (IV) medicines you need. This catheter is used to give you medications, to draw blood samples or to inject contrast media. You do not need surgery to have the **PowerPICC*** catheter put in your vein.

The **PowerPICC*** catheter lets your doctors and nurses give you medications without repeated needle sticks in your arms.

Introduction

This Patient Guide will help you better understand your **PowerPICC*** catheter. However, it is only a guide and should be used together with your doctor and/or IV nurses' directions.

If you need to go to a hospital or to a doctor other than your primary doctor, please take this booklet with you. It will help the doctor and nurses care for you and your catheter in the best way possible.

The catheter is normally put in one of the veins above the bend of the elbow. It may be put in either arm.

You may feel a little pain from the special needle used to help insert the catheter, but you should not feel anything while the catheter tubing is being placed in the vein.

Please talk to your doctor or nurse about how your **PowerPICC*** catheter may change your daily activities

Catheters are made of two kinds of materials: silicone or polyurethane. The **PowerPICC*** catheter that your doctor has given you is made of polyurethane. Polyurethane material can be damaged when some products are used to clean around them. See the following warning:

WARNING! When cleaning or changing the bandage (dressing) around your catheter, do not clean the catheter with ointment or with solutions that contain acetone or polyethylene glycol (check label for these ingredients). These can damage the polyurethane material if used over time.

Important information for your clinician:

- Contrast media should be warmed to body temperature prior to power injection.
 Warning: Failure to warm contrast media to body temperature prior to power injection may result in catheter failure.
- Vigorously flush the PowerPICC* catheter using a 10 ml or larger syringe and sterile
 normal saline prior to and immediately following the completion of power injection
 studies. In addition, lock each lumen of the catheter with heparinized saline. Usually,
 one ml per lumen is adequate. This will ensure the patency of the PowerPICC*
 catheter and prevent damage to the catheter. Resistance to flushing may indicate
 partial or complete catheter occlusion. Do not proceed with power injection study until
 occlusion has been cleared.
 - **Warning:** Failure to ensure patency of the catheter prior to power injection studies may result in catheter failure.
- Use only lumens marked "Power Injectable" for power injection of contrast media.
 Warning: Use of lumens not marked "Power Injectable" for power injection of contrast media may cause failure of the catheter.
- Do not exceed the maximum flow rate of 5 ml/sec and the maximum setting of 300 psi on the power injector machine.

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Warning: Power injector machine pressure limiting feature may not prevent over pressurization of an occluded catheter, which may cause catheter failure.

Warning: Exceeding the maximum flow rate of 5 ml/sec, and the maximum pressure of power injectors of 300 psi, may result in catheter failure and /or catheter tip displacement.

- Warning: PowerPICC* catheter indication for power injection of contrast media implies
 the catheter's ability to withstand the procedure, but does not imply appropriateness
 of the procedure for a particular patient. A suitably trained clinician is responsible for
 evaluating the health status of a patient as it pertains to a power injection procedure.
- Warning: When using alcohol or alcohol containing antiseptics with polyurethane PICCs, care should be taken to avoid prolonged or excessive contact. Solutions should be allowed to completely dry before applying an occlusive dressing. Chlorhexidine gluconate and/or povidone iodine are the suggested antiseptics to use.
- Warning: Alcohol should not be used to lock, soak or declot polyurethane PICCs because alcohol is known to degrade polyurethane catheters over time with repeated and prolonged exposure.
- · Catheter does not require "s" curve for dressing and securement.

Power Injection Procedure

- 1. Remove the injection/needleless cap from the **PowerPICC*** catheter.
- 2. Attach a 10 ml or larger syringe filled with sterile normal saline.
- Aspirate for adequate blood return and vigorously flush the catheter with the full 10 ml of sterile normal saline.

Warning: Failure to ensure patency of the catheter prior to power injection studies may result in catheter failure.

- 4. Detach syringe.
- Attach the power injection device to the PowerPICC* catheter per manufacturer's recommendations.
- Contrast media should be warmed to body temperature prior to power injection.
 Warning: Failure to warm contrast media to body temperature prior to power injection may result in catheter failure.
- Use only lumens marked "Power Injectable" for power injection of contrast media.
 Warning: Use of lumens not marked "Power Injectable" for power injection of contrast media may cause failure of the catheter.
- 8. Complete power injection study taking care not to exceed the flow rate limits. Do not exceed the maximum flow rate of 5 ml/sec.

Warning: Power Injector machine pressure limiting feature may not prevent overpressurization of an occluded catheter, which may lead to catheter failure. **Warning:** Exceeding the maximum flow rate of 5 ml/sec or the maximum pressure of power injectors of 300 psi may result in catheter failure and/or catheter tip displacement.

- Disconnect the power injection device.
- 10. Replace the injection/needleless cap on the **PowerPICC*** catheter.
- 11. Flush the **PowerPICC*** catheter with 10 ml of sterile normal saline, using a 10 ml or larger syringe. In addition, lock each lumen of the catheter with heparinized saline. Usually one ml per lumen is adequate.

Bandage (Dressing) Change

Your bandage has two important jobs.

- 1. It provides a germ-free (sterile) environment for the catheter.
- It helps keep the catheter from moving or breaking.

Bandages will hold your catheter in place so fluids and air can pass through without any blocking or clogging. Your nurse may call the bandage a moisture-vapor permeable, non-occlusive dressing.

If you or your family have been told how to change the bandages, please follow the instructions carefully. Properly changing your bandage using germ-free (sterile) methods will help reduce the chance of catheter problems.

When cleaning around your catheter:

DO:

- Follow all instructions you are given by your hospital or home health facility.
- Use chlorhexidine gluconate or povidone iodine to clean around the catheter. Always remember the following warning when cleaning and caring for your catheter:

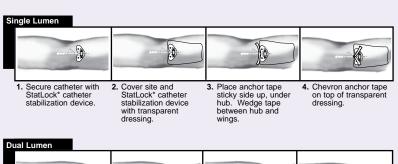
WARNING! When cleaning or changing the bandage (dressing) around your catheter, do not clean the catheter with ointment or with solutions that contain acetone or polyethylene glycol (check label for these ingredients). These can damage the polyurethane material if used over time.

Allow all cleaning materials and antiseptics to dry completely before putting on a clean bandage.

Important

- Never use anything sharp near the catheter, such as scissors.
- Be sure the catheter does not move in or out of its place in your arm.
- If your bandage becomes loose, dirty, wet, or if spotting can be seen through bandage, change it right away. See pictures.
- Your catheter should always be held in place as shown.

StatLock* Catheter Stabilization Device Procedure



- 1. Secure catheter with StatLock* catheter stabilization device
- 2. Cover site and Statl ock* catheter stabilization device with transparent dressing.
- 3. Place 1st anchor tape 4. Place 2nd anchor sticky side up, under one extension leg. Wedge tape between hub and wings. Chevron anchor tape on top of transparent dressing.
 - tape sticky side up under hub. Wedge tape between hub and wings. Chevron anchor tape on top of transparent dressing.

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Triple Lumen



 Secure catheter with the StatLock* catheter stabilization device.



 Cover site and the StatLock* catheter stabilization device with transparent dressing.



 Place 1st anchor tape sticky side up, under one extension leg.
 Wedge tape between hub and wings.
 Chevron anchor tape on top of transparent dressing.



Place 2nd and 3rd anchor tapes sticky side up under remaining hubs. Wedge tape between hubs and wings. Chevron anchor tape on top of transparent dressing.

Tape Strip Securement Procedure

Single Lumen









Dual Lumen



 Place 1st anchor tape over wings or bifurcation



2. Cover site and 1st anchor tape with transparent dressing up to hub, but not over hub.



 Place 2nd anchor tape sticky side up under hub and close to transparent dressing. Wedge tape between hub and wings. Anchor only one hub of dual lumen catheter.



 Chevron 2nd anchor tape on top of transparent dressing and place 3rd anchor tape over hub.

Triple Lumen



 Place 1st anchor tape over wings or trifurcation.



Cover site and 1st anchor tape with transparent dressing up to hub, but not over hub.



 Place 2nd anchor tape sticky side up under hub and close to transparent dressing. Wedge tape between hub and wings. Chevron anchor tape on top of transparent dressing.



 Place 2nd and 3rd anchor tapes sticky side up under remaining hubs. Wedge tape between hubs and wings. Chevron anchor tape on top of transparent dressing.

Flushing the Catheter

If you are caring for your catheter, you will be taught the right way to flush your catheter.

Your catheter should be flushed______.

It should be flushed with ______.

Catheter Information

Patient Name:				_	
Your (patient's) Phone Number:				_	
Primary Doctor's Name:				_	
Primary Doctor's Phone Number:				_	
IV Nurse Name:				_	
IV Nurse Phone Number:				_	
Hospital:				_	
Hospital Phone Number:				_	
Home Care Agency:				_	
Home Care Agency Phone Number:				_	
Date Inserted:				_	
Inserted By:				_	
Catheter Lot Number:				_	
Catheter Length (after trimming):	cm	French Size	4 5	6	
Your catheter was threaded approximately		cn	า		
thevein.					
By external measurement, the tip of the cathete	er is in the				
Your doctor may request an x-ray to check the e	exact location	of the tip of the	cathet	er.	
X-Ray Done Yes No					
You will be receiving the following medications	through your	PowerPICC* ca	athete	r.	

Catheter Maintenance Schedule

Directions: List the date below and check off the action performed.

Date	Catheter Bandage Change	Extension Tubing Change	Injection Cap Change	Flushing Amount
	Х	X	Х	

Catheter Problems

You may notice a small red bump at the place where your catheter was inserted. This is normal, however, you should feel no pain or see any drainage after the first bandage change.

Call your doctor or nurse right away if you notice:

- 1. A lot of bleeding or drainage where the catheter comes out of your arm.
- Redness or swelling where the catheter comes out of your arm.
- 3. Pain, soreness or swelling of the arm with the catheter.
- 4. Pain or discomfort when IV solution fluids are put into your catheter.
- 5. Chest pain or discomfort while your catheter is in place.
- 6. Catheter movement either in or out of its place in your arm.
- If you have a catheter leak or accidentally break or damage the catheter, fold and tape the catheter between the break or leak and where the catheter comes out of your arm.

Any of these changes in or around your catheter could be very serious. You should contact your doctor or nurse as soon as you see any problems like those described above.

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