Intravenous (IV) Line and Tubes



Because most babies in the NICU are too small or sick to take full milk feedings, medicines and fluids are often given through their veins or arteries. Babies may also need frequent lab tests and measurements of blood oxygen levels. There are several ways a baby may get fluids and medicines and have blood drawn. These include the following:

- IV (intravenous) line. Babies may have an IV line placed in a hand, arm, foot, or scalp, where veins are easily accessed. Tubing connects the IV line to a bag of fluids that are carefully given to the baby with a pump.
- Umbilical catheter (UVC or UAC). After the umbilical cord is cut at birth, a newborn baby has the short stump of the cord still in place. Because the umbilical cord stump is still connected to their blood and circulatory system, a catheter (small, flexible tube) can be inserted into one of the two arteries or the vein of the umbilical cord. Medicines, fluids, and blood can be given through this catheter. Sometimes blood may be drawn from it as well. After placement of the umbilical catheter, X-rays are taken to check that it's in the right place. This can be kept in for 1 to 2 weeks, and then will be replaced with a different type of line if needed.
- Central line. This is sometimes called a PICC line. A catheter is placed in a deep vein or artery in the baby's arm or leg. It is used instead of an IV in the hand or scalp if a baby has longer-term needs.

A baby may need lines or catheters for just a short time or for many days. Once a baby is well enough to take milk feedings and is gaining weight, lines or catheters may be removed. In some cases, a line or catheter may be needed for giving a baby antibiotics or other medicine even when the baby can be fed normally.

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