Universal Protocol Section

Emergencies Involving Indwelling Central Lines



History

- Central Venous Catheter Type
 - **Tunneled Catheter** (Broviac / Hickman)
 - PICC (peripherally inserted central catheter
 - Implanted catheter (Mediport / Hickman)
- Occlusion of line
- Complete or partial dislodge
- Complete or partial disruption

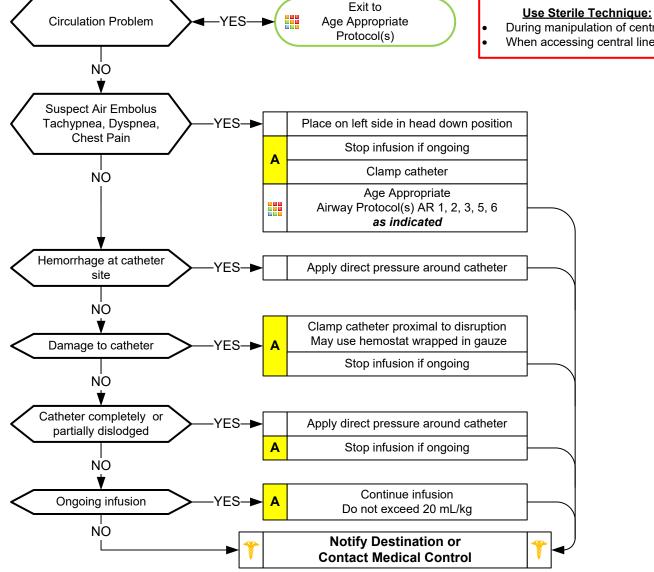
Signs and Symptoms

- External catheter dislodgement
- Complete catheter dislodgement
- Damaged catheter
- Bleeding at catheter site
- Internal bleeding
- Blood clot
- Air embolus
- Erythema, warmth or drainage about catheter site indicating infection

Differential

- * Fever
- Hemorrhage
- Reactions from home nutrient or medication
- Respiratory distress
- Shock

During manipulation of central line Protocol(s) When accessing central line



Pearls

- Always involve family/ caregivers as they may have specific knowledge and skills related to catheter device.
- Use strict sterile technique when accessing / manipulating an indwelling catheter.
- Cardiac arrest: May access central catheter and utilize if functioning properly. *
- Do not attempt to force catheter open if occlusion evident.
- Some infusions may be detrimental to stop. Ask family or caregiver if it is appropriate to stop or change infusion.
- Hyperalimentation infusions (IV nutrition): If stopped for any reason monitor for hypoglycemia.