Infant/Child With a Central Venous Line Catheter (Broviac or Hickman)

Thank you for choosing the MCG Children’s Medical Center for your child's health care needs. This information is to help answer some of your questions and to give you instructions to follow. If you have any other questions, please ask your child’s doctor or nurse.

Your child has a catheter (a soft plastic tube placed under the skin) placed in a large vein near the entrance of the heart. This catheter is used to give intravenous fluids, intravenous nutrition, chemotherapy and other medications. It also allows blood samples to be drawn without repeated needle sticks. There may be one or two openings (lumens) to the catheter. The openings are closed to the outside by the injection cap. The injection cap is changed once a week. The catheter is flushed daily. Flushing will prevent clotting since even a small amount of blood can cause the catheter to clot. Dressings are changed every seven days (or more frequently if wet, soiled, or loose).

Dressing Changes

**Supplies:**
1. Central line dressing kit
2. Cover dressing with or without Biopatch®
3. Tape
4. Masks for anyone in the room during dressing change

**Procedure:**
1. Wash your hands.
2. Open dressing kit without touching the inside contents.
3. Open cover dressing and Biopatch, if appropriate. Drop into kit.
4. Put on mask.
5. Remove old dressing and throw away. Wash hands again.
6. Check the site for redness, swelling, pus or signs of catheter slipping (cuff should not be visible).
7. Carefully put on sterile gloves.
8. With the 4x4 gauze, lift the catheter up and away from the skin. Clean two times with Betadine swabs in a circular motion moving away from wound site. Let dry one to two minutes.
9. Using the third Betadine swab, wipe the catheter itself, moving away from the wound site for two inches.
10. Allow Betadine on skin to dry three minutes. For children less than 12 months or if using Biopatch, remove Betadine with an alcohol wipe. Make sure all Betadine is removed and skin is dry.

11. Place one sterile split 2x2 gauze under the catheter (optional). Or apply Biopatch grid side up, slit down.

12. Apply cover dressing over catheter at wound site.

13. Tape catheter to the skin below the dressing (optional, for security).

**Injection Cap Change (Every 7 days)**

**Supplies:**
1. Sterile injection cap (1 for each lumen)

**Procedure:**
1. Be sure the catheter is clamped.
2. Wash hands.
3. Open packages with new cap.
4. Unscrew old cap and throw away.
5. Screw on new cap.
6. Flush catheter.

**Fushing the Catheter (Every day)**

**Supplies:**
1. Normal saline 5cc
2. Heparin Flush 2cc
3. Alcohol wipes
4. 12cc syringes (2) with needles or cannulas

**Procedure:**
1. Wash hands.
2. Twist needle/cannula onto syringe.
3. Clean top of Heparin Flush bottle with alcohol wipe.
4. Draw back 2cc air into syringe.
5. Insert needle/cannula into bottle and inject air. This will make it easier to withdraw Heparin Flush.
6. Turn bottle upside down and withdraw 2cc Heparin solution.
7. Tap side of syringe to remove any air bubbles. Recap needle/cannula.
8. Repeat same procedure with normal saline 5cc.
10. Insert normal saline syringe into center of injection cap. Flush catheter. If flushing new injection cap draw back on syringe to remove air.
11. Insert Heparin syringe into center of cap and inject Heparin into catheter. Clamp catheter as last 1/2cc is being injected. Secure the catheter.
12. Discard needles/cannulas and syringes into covered, sturdy container. (For example, plastic milk jug or coffee can) When full, tape shut and place in garbage.
13. Secure catheter in place.

Call your doctor if
1. Catheter will not flush.
2. Catheter cuff is seen.
3. Leaking along catheter or at wound site.
4. Redness or drainage noted at site.
5. Temperature over 100°F (38.4°C or above)
6. If you are concerned about anything.

If you need to talk to your doctor, you can call: 706-721-_______ and ask to speak to your physician or the ______________ physician on call.