

PATIENT AND FAMILY INFORMATION SHEET

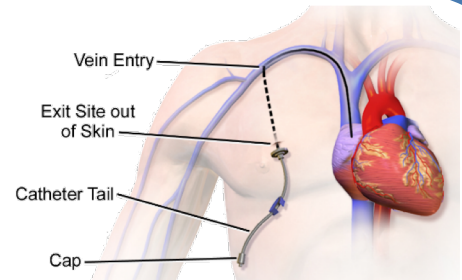
Central Venous Catheter/ Central Line

What is a central line?

A central line is a sterile device (tube) placed in a large vein in the neck, chest, or groin that goes to the heart. This line is used to give medications or fluids or to collect blood for medical tests. Central lines can remain in place for weeks, months or years. The type of central line used is based on your child's therapy needs.

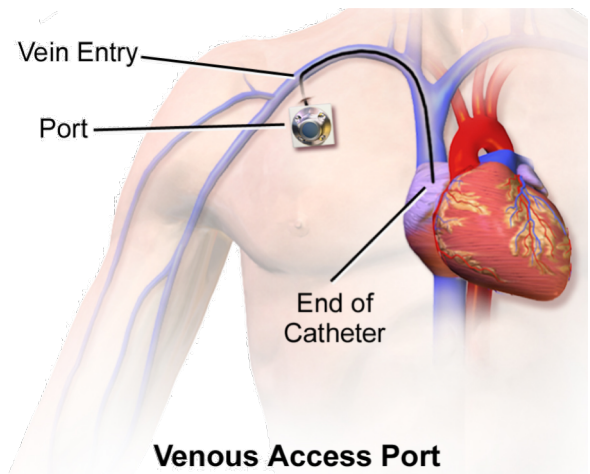
There are three types of central lines most commonly used.

- 1. Central Venous Catheter (Broviac®):** This is a special tube (line) that is tunneled under the skin of the chest and enters a large vein in the neck. Outside the body, usually the chest, your child will have one or two smaller tubes visible (called lumens) . This line is placed in the operating room.
- 2. Implanted Vascular Access Port (Port-a-Cath®):** This device is placed entirely under the skin of your child's chest. A small rubber dome sits under the skin attached to a flexible tube that goes to a large vein leading to the heart. The dome is entered by using a special needle that goes through your child's skin. Local numbing medicine is used before the needle is inserted. This device is placed in the operating room and may stay until your child is done with treatment, usually months or years. When not in use the device will look like a small bump on your child's chest.
- 3. Peripherally Inserted Central Catheter (PICC):** This is a long flexible tube that is placed into your child's arm by a specially trained nurse or health care provider. The tube goes to a large vein that goes to the heart. Outside the body, usually the arm, your child will have one or two smaller tubes visible (called lumens). This device may be placed by using sedation or local numbing medicine.



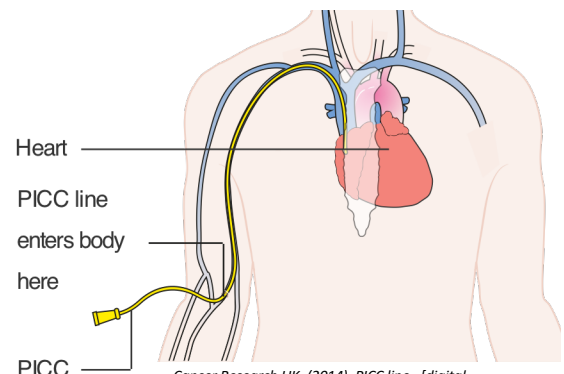
Tunneled Central Venous Access Device

Blaus, B. (2016). Central venous catheter -tunneled. [digital image]. Retrieved October 19, 2018. [https://commons.wikimedia.org/wiki/File:Central_Venous_Access_Device_\(Tunneled\).png](https://commons.wikimedia.org/wiki/File:Central_Venous_Access_Device_(Tunneled).png)



Venous Access Port

Blaus, B. (2016). Venous access port. [digital image]. Retrieved October 19, 2018. https://commons.wikimedia.org/wiki/File:Venous_Access_Port_Catheter.png



Cancer Research UK. (2014). PICC line. [digital image]. Retrieved October 19, 2018. https://commons.wikimedia.org/wiki/File:Diagram_showing_a_PICC_line_CRUK_071.svg



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Why does my child need a central line ?

The decision to place a central line is made by you, your family and the doctor based on the treatment course or therapy. Therapy may be needed for long period of time. Using a large vein means things can be given faster with less damage to the vein.

Central lines are used to:

- Give medications, fluids, nutrition, and blood transfusions into a large vein.
- Decrease the amount of times your child is stuck with a needle
- Give sedation/ anesthesia and pain medicine
- Collect blood for medical tests.

How are central lines placed?

Central venous catheters and implanted ports are placed in the operating room using general anesthesia. PICC lines may be placed with sedation or local numbing medicine depending on your child's age.

What happens before surgery?

- Before surgery you and your child's health care team will determine the best central line for your child's needs.

What happens during surgery?

- Your child will be taken to the operating room and given anesthesia.
- The skin over the area where the central is placed will be cleaned in a sterile manner.
- The surgeon will make sure the line is in the correct position before leaving the operating room.

When can I be with my child again?

- As soon as your child wakes up after surgery, someone from the recovery room will call you so you can be with your child again.

What happens after surgery?

- After surgery your child may feel sore or have some swelling at the catheter site. The implanted device (PORT) will have a needle inserted "accessed" with a sterile bandage covering the needle. The tunneled catheter (Broviac) and PICC line will have a sterile bandage covering part of the outside tubes.

What care is needed for the central line?

The care of the line will depend on the type your child gets. Your health care provider will give you detailed instructions on its care. All central lines need to stay clean and dry.

In general:

- Bandage must remain dry, do not soak or get wet.
- Bandage must remain attached to the skin, if any peeling it must be changed.
- Bandage changes must be done with sterile form by a nurse or trained health care provider.
- All central lines will need to be flushed with special medication (heparin and saline) to prevent clogging the line.
- Central lines must be protected with a sterile bandage and covered, to prevent from being accidentally pulled out.
- Teaching on home care will be provided by your nurse or health care provider before your child goes home.



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How do I care for my child at home?

Care of the central line at home will depend on the type of line your child gets. You will be given specific instructions before your child is discharged home.

- **For central lines that have lumens outside the body (Broviac® and PICC) you will need to:**
 - Learn how to flush the line daily or after each use.
 - Learn how to change the special cap on the ends of the lumens.
 - Look at the bandage regularly to make sure it is dry and clean.
 - Keep bandage attached to your child's skin, contact your doctor if it peels off or becomes wet.
 - Cover the entire bandage with plastic wrap before taking a shower.
 - Protect the lumens with bandage and clothing to keep the lumens out of the way and protect them from being accidentally pulled out.
 - Do not allow the lumens to touch the floor.
 - Do not allow your child to touch, play with or chew the lumens.
 - Do not place the lumens inside your child's diaper.
 - No swimming or soaking in bathtub.

- **For central lines that have implanted ports:**
 - The needle will be removed before your child is discharged home
 - Your child will have a bump completely under the skin on the chest that you can see and feel.
 - The device will need to be accessed and flushed once a month with special medicine (heparin) to keep the port from clogging. This will be done by a nurse or trained health care provider.
 - When not in use your child may take a bath and go swimming.

Special Considerations for all central lines:

- Always pay attention to the bandage over the central line area. Make sure it is always dry, clean and is not coming off the skin.
- Pay attention for any redness, swelling, pain, or bruising around the catheter site.
- Notify your child's school, teacher, and school nurse of your child's central line.
- No contact sports.
- Avoid direct hit to the catheter site.
- Do not allow visitors to touch the line.
- Everyone visiting your child must wash their hands before and after visit.



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When should I call the office?

If your child experiences any of the following, please call our office:

- Fever and/or chills – this may be a sign of infection.
- Drainage, pain, redness, swelling, or bruising around the catheter site.
- If bandage is coming off, wet, or dirty.
- If you are unable to flush the catheter or it is harder to flush than usual.
- Pain or discomfort when your having any fluids or medications put into the central line.
- If there is any trauma to the central line site.
- With any questions or concerns.

Your child will need to follow up with the surgeon. You will receive specific instructions for follow up when your child is discharged.

Please don't hesitate to call our office if you have any problems or concerns.

Surgical provider: _____

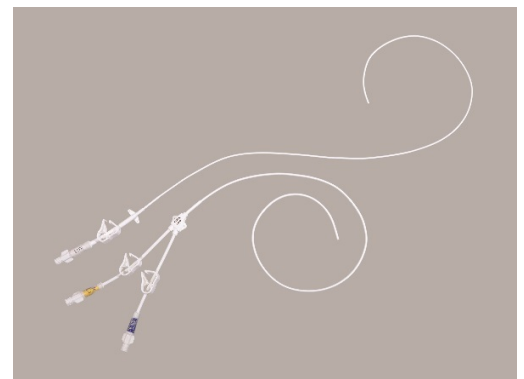
Office Number: _____

After hours number, if applicable: _____

Thank you for allowing us to care for your child.



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