

# **PICC (Peripherally Inserted Central Catheter) Education Plan**

## **Getting Ready to Learn About PICCs**

Learning something new can be hard. It is even harder if you are not feeling well. The purpose of this education plan is for you and the staff to review the following information together. Here are some good things to tell the staff:

- Who you want to learn with you. We would like to have someone who will be helping you at home learn with you.
- The best way for you to learn. Do you learn best by reading a book or pamphlet, or by doing things yourself?
- If you are not feeling well, if you are in pain or you cannot focus on learning right now.

This information is important to your health. We may explain something more than once. We will be giving you information in small bits over several days. If there is something you don't understand, "It's OK to Ask" us to explain.

## **What I Need to Learn About PICCs**

By the time I leave the hospital; I will be able to tell the staff:

1. Why I need a PICC.
2. Things I should do differently because I have a PICC.
3. The purpose of the PICC dressing, the caps and the flushing of my PICC.
4. What I need to look for if there is something wrong with my PICC and what to do about it.
5. Who will be caring for my PICC at home.

**The staff will use three questions and answers to teach me about my PICC:**

- What is my main problem?
- What do I need to do?
- Why is this important to me?

The staff will ask me to repeat back important points in my own words, or ask me to show them what I have learned. They want to make sure that I know about my PICC and what to do if I have problems.

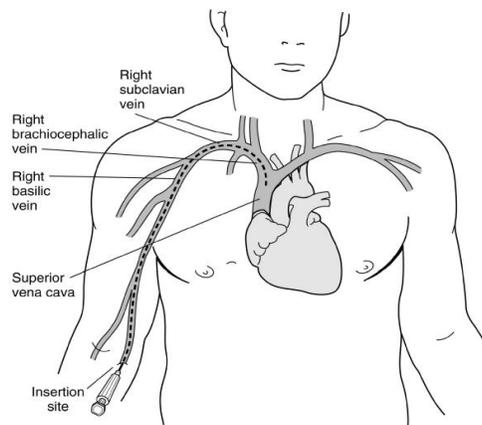
### **What is my main problem?**

I need to know what a PICC is, how to care for my PICC, and how to watch for complications.

### **What do I need to do?**

I will be able to tell the staff why I need a PICC.

- PICC stands for Peripherally Inserted Central Catheter. It is a special type of tube that is inserted in my arm near the elbow. It is used to give me medicine and fluid. The tube is inserted into a blood vessel (called a vein) and threaded so that the tip is in a large vein just above my heart.



Permission to use from MOSBY's Nursing Consult.

- Strong medicine, fluid and nutrients that need to be given into a vein can be given through a PICC.
- The PICC can last a long time (from weeks to several months).
- The PICC can be inserted by a nurse and doesn't require surgery (decreases the risk and the cost).
- The PICC can sometimes be used to draw blood samples.
- I won't have to have as many needle 'pokes' if I have a PICC.

I will be able to tell the staff what I need to do differently because I have a PICC.

#### General care

- Always wash my hands with soap and water or use a hand sanitizer before doing anything with my PICC. The area where I store my PICC supplies and do my PICC care should be free from dirt and dust.

#### Bathing

- I will be able to take a bath or shower with my PICC in. I need to cover the PICC dressing with plastic wrap then tape the top and bottom edges of the wrap. This should keep the dressing from getting wet. If the dressing does get wet, I should be sure to have the dressing changed as soon as possible.

#### Using the arm with the PICC

- Normal arm use is fine. I shouldn't do activities that will stress my arm such as playing sports or using the arm with the PICC to vacuum or mow the lawn. I should not lift more than about 10 pounds.
- If I need to use crutches, I shouldn't put pressure in my armpits with the crutches. This can put me at risk for a blood clot in the vein where the PICC is.

I will be able to tell the staff the purpose of the PICC dressing, the caps and the flushing of my PICC.

#### Dressings

- A dressing must always cover the area where the PICC goes into my skin. The dressing should be changed weekly. The dressing should be changed if the edges or parts of the dressing are no longer tightly sticking to my skin. The dressing should be changed if it becomes wet.
- I should never touch the area where the PICC enters my skin if the dressing is off.
- A nurse will change the dressing in the hospital, at my doctor's office, an infusion center or at home. I should call my nurse, infusion center or doctor's office if the dressing needs to be

changed early because it is no longer tightly sticking to my skin or if it is wet.

#### Changing the cap

- There is a cap at the end of the PICC. The caps may be different colors depending on what brand is used. The cap is changed once a week. The nurse will change the cap when they change the dressing.
- The cap keeps air and bacteria from going into my PICC.

#### Flushing my PICC

- The inside of my PICC has to be kept 'open' so that the medicines, fluid or nutrients can flow into the blood vessel. The PICC is kept open by filling it (called flushing) with normal saline or heparin when the PICC is not being used. The nurse will do this at first. Later the nurse may teach me, or someone in my home, to flush the PICC.

I will be able to tell the staff what I need to look for if there is something wrong with my PICC and what to do about it.

#### Bleeding

- It is normal to have a small amount of bleeding right after the PICC is put in. The dressing may need to be changed 1 to 2 days after it has been put in.
- I may be more prone to bleeding from my PICC site if I am taking blood thinning medicine.

#### What should I watch for?

Blood under the dressing bigger than the size of a quarter after the first dressing change. Pain or swelling in the elbow area could mean there is bleeding inside (under the skin).

- What should I do? I should press firmly with my fingertips, over the dressing, at the site, for 15 minutes. If the bleeding does not stop, I should call my nurse or doctor. I should also call if I notice pain or swelling in my elbow.

#### PICC movement

- The PICC could slide in or out of my skin. I don't want it to slide in because it can cause infection. I don't want it to slide out because the end of the PICC will be in the wrong place. This will cause the medicine, fluid or nutrients to go into the wrong place.
- What should I watch for? If my PICC seems to be longer or shorter than it was when it was put in.
- What should I do? I should make sure the dressing is stuck to my skin well and the end is taped down. I should avoid activities that need more than normal arm movement. I should call my nurse or doctor if I notice the PICC length seems to have changed.

### Infection

- This is when germs get into the skin around my PICC or into my bloodstream.
- What should I watch for? If there is an infection where the PICC goes into the skin I might see redness, swelling or drainage. It may also become painful or tender. If germs get into my bloodstream I could get chills, a fever or feel tired.
- What should I do? To prevent infection, I or anyone who uses my PICC, should always wash our hands or use hand sanitizer before doing anything with my PICC. I should follow the plan for dressing and cap changes. I should call my nurse or doctor if the dressing needs to be changed early because it is no longer tightly sticking to my skin. I should clean the end of the PICC with an antiseptic pad for at least 30 seconds before putting anything into my PICC. I should never touch the bare skin where my PICC goes in. I should never push the PICC back into my skin. I should call my nurse or doctor if I have any signs of infection.

### Clogged PICC

- The PICC can be clogged by a blood clot or a clump of the fluid that is running into the PICC.
- What should I watch for? If my PICC is clogged I may find it is hard to flush. My medicine or fluid may drip very slowly.
- What should I do? I should never push hard when trying to flush my PICC. I don't want to push too hard because it can

make the clog go into my body or cause the PICC to break. I should call my nurse or doctor if the PICC is clogged. The nurse may be able to put in a special medicine that will open the PICC.

#### Blood Clot

- Sometimes a blood clot can block the flow of blood in the vein.
- What should I watch for? A blood clot can cause pain or swelling in my hand, arm, shoulder, chest, or back.
- What should I do? Call my nurse or doctor if I have any signs of a clot.

#### Tears or Breaks in the PICC

- The PICC is soft and stretches easily. Stretching the PICC or pushing too hard to get the fluid in can cause tears or breaks in the catheter.
- What should I watch for? I should watch for a break in the PICC. I should watch for fluid leaking from the PICC or under the PICC dressing when I flush it.
- What should I do? If the PICC tears or breaks, I should fold the PICC over on itself and tape it down. I should make sure the fold is between where the break or tear is and where the PICC enters the skin. I should call my nurse or doctor right away.
- To keep the PICC from a tear or break I need to make sure the PICC dressing is stuck on well and that the end is taped to the skin. I should never push hard to flush the PICC. I should never use scissors or sharp things near the PICC. I should not allow pets near my PICC.

#### Air in the bloodstream

- Air can get into the bloodstream if the PICC is broken or if any of the parts become loose. This is a very **rare**, but **serious** problem.
- What should I watch for? I should watch for sudden shortness of breath, dizziness, chest pain, or cough.
- What should I do? If this happens I need to quickly fold the PICC tubing over on itself and tape it so that no more air can enter. I should then lie down on my left side with my hips

higher than my shoulders. I should call or have someone call 911.

- To prevent this, I should make sure there is always a cap on the end of the PICC. I should keep the PICC dressing secure. I should never use scissors or sharp things around my PICC.

I will be able to tell the staff who will be caring for my PICC at home

Care may be provided by:

- A home health care nurse.
- My primary care doctor.
- An infusion center.

**Why is this important to me?**

- To keep PICC complications from happening
- To know what to do if a complication is seen

As part of my care and to help me understand my PICC, I may receive:

- PICC Education Plan

## Personal PICC Information

I have a \_\_\_\_\_ brand PICC line inserted by:

\_\_\_\_\_ Bronson Vascular Access Specialist Team

\_\_\_\_\_ Bronson Interventional Radiology

\_\_\_\_\_ Other \_\_\_\_\_

My PICC is:

\_\_\_\_\_ a Power PICC

\_\_\_\_\_ **not** a Power PICC

My PICC has been trimmed at the \_\_\_\_\_ cm mark.

The mark at my skin is \_\_\_\_\_ cm.

My PICC is in the \_\_\_\_\_ vein.

My PICC is placed in a:

\_\_\_\_\_ Deep peripheral vein

\_\_\_\_\_ Central vein

\_\_\_\_\_ Other: \_\_\_\_\_

If I have any questions or problems, I may call the following:

\_\_\_\_\_ My home-care agency: \_\_\_\_\_

\_\_\_\_\_ My doctor: \_\_\_\_\_

\_\_\_\_\_ My infusion center: \_\_\_\_\_

\_\_\_\_\_ Vascular Access Specialist Team (VAST) at Bronson

Call the Bronson operator at 269-341-7654. Ask the operator to page the VAST nurse. The team is available 24 hours a day, 7 days a week.

Post this page in an easy to remember place such as on your refrigerator

## **PICC (Peripherally Inserted Central Catheter) Education Plan**

### **Resources for Staff**

- INS (Intravenous Nurse Society) Manual

### **Teaching Tools**

- PICC Education Plan

### **References**

- INS (Intravenous Nurse Society) Manual

Always close each teaching session with the question, “What questions do you have for me?”

**Approved by:** Patient Education Council

**Authored by:** Wendy Douglas BS, RN, VAST  
Tina Keeler, RN, VAST

**Last revision date:** September 25, 2017

\*This page is intended for staff use only. Do not give to the patient.  
This document is not a part of the permanent medical record.