Peripherally Inserted Central Venous Catheter (PICC)

Invasive Devices Clinical Nurse Specialist
Chief Nurse

This leaflet has been designed to give you important information about your condition / procedure, and to answer some common queries that you may have.
Introduction

It has been recommended that you have a Peripherally Inserted Central Catheter (PICC) inserted, as part of the care you are receiving. The practitioner inserting the device will explain the procedure and any potential problems to you. This leaflet aims to provide supporting information about the procedure and the future care of your device.

Additional information can be given to you from your doctor, or nurse or the Invasive Devices Specialist Nurse.

What is a PICC?

A PICC, is a long, thin flexible tube that is inserted into a vein usually just above the elbow. The tip of the PICC sits in a large vein just above the heart. This allows your medicines, antibiotics and other treatments to be administered directly into your bloodstream. The centre of the PICC is called the lumen and dependent on your treatment you may have a PICC that contains either a single or a double lumen.

You can go home with a PICC line in place, and it can be left in for weeks or months or for the duration of your treatment.

PICC’s are becoming more commonplace for patients, providing a safe and effective route for many treatments, potentially reducing the risk of infection and allowing many people to retain independence.

Staff have been trained to ensure that the ongoing care of your PICC is at a high standard.

How is a PICC Inserted?

A specialist nurse or doctor will insert the PICC in a designated clean room, for example a treatment room. An examination will be undertaken of your arms, preferably the right arm, to assess the quality of your veins. A special ultrasound machine will be used to undertake this.

After deciding on which vein is most suitable to insert a PICC, the area will be cleaned with antiseptic solution, and sterile drapes will be put in place covering you completely. An injection of local anaesthetic will be given to numb the skin, prior to inserting the PICC, this may cause a brief stinging sensation but you should feel no pain as the PICC is being threaded along the vein.

The healthcare professional placing the PICC will be wearing a surgical gown, mask, hat and sterile gloves with the work area prepared very carefully, this is to ensure that

The diagram (Fig 1.) shows you where a PICC line is inserted and ends.
everything remains sterile so do not be alarmed.
You will be required to lay flat if possible however pillows will be offered if this is not possible; your arm will be extended outwards at a right angle to your chest. This allows for easier access to the insertion site.
The PICC is threaded up in your arm towards a blood vessel called the superior vena cava. You may feel some pushing but should not feel any pain.
The tip of the PICC will lay in the lower part of this big blood vessel.
The insertion procedure usually takes approximately 30 minutes but can take over an hour.

What does a PICC look like?
This is an example of a PICC. They are covered with a transparent dressing and secured to your skin with a device called a Statlock.

While you have your PICC you will still be able to do most things but if you are unsure or have any worries please ask your nurse or doctor. If they are unable to answer your question ask them to contact the Invasive Devices Clinical Nurse Specialist for advice.

What happens after the PICC has been put in?
An X-ray will be performed to make sure that the PICC is in the correct place. The doctor or nurse will check the X-ray before the PICC is used.
There may be some oozing of blood from around the insertion site and/or a degree of tenderness. This is quite normal but should disappear after 24-48 hours.
The dressing and access ports will be changed using a sterile procedure, initially after 24 hours and then weekly, unless they are loose or dirty, when they should be changed immediately.
Anyone accessing your PICC must thoroughly wash their hands, use a recognized sterile procedure and clean the hub of your PICC for 30 seconds with a special swab and allow it to dry before using it – this is known as ‘scrubbing the hub’. You do have the right to refuse anyone accessing your PICC if any of the above are not undertaken.
Your PICC will be flushed either twice a day or once a week depending on the type of PICC inserted or its intended use.
It is important that if you notice the length of the tube is increasing, the nurse or carer must be informed as this could lead to the line slipping out.
If you go home with a PICC then you will either be taught how to look after the PICC or a district nurse will visit you at home.
A blood pressure cuff must not be used on the upper part of your arm in which the PICC is placed.
What will happen if I decide not to have a PICC line?

For some treatments it may be possible to have them administered into a vein in the hand or lower arm. However, some treatments can only be given via a central line (a line into a large neck or chest vein, close to the heart) you would need to discuss options with your nurse or doctor.

Are there any Risks?

You will need to give written or verbal consent before the team can insert a PICC line. We will explain all risks associated with a PICC so that you can make a fully informed decision. Risks however, do include:

- **Infection** – the PICC is a direct route into your body, and sometimes it can become infected. This may result in additional medical treatment, and possible removal of the PICC. If you have fever or chills please inform us immediately

- **The catheter tip in the vein may not be in the correct position, this will not harm you. The PICC will not be used during this time. We will need to readjust it into a better position and another X-ray will be required to confirm its position**

- **Bleeding and bruising** – as with any procedure that involves the insertion of a needle into the vein, some bruising or bleeding may occur. The amount of bruising or bleeding may be affected by your medical condition, or the medication you are taking

- **Accidental puncture of the artery which may cause bleeding (may require a tight bandage for 1-2 hours)**

- **Nerve damage** – during the procedure you may feel a shooting pain down your arm if the needle touches a nerve

- **Unable to get PICC into the vein** – on rare occasions it may be difficult to insert the PICC. This may result in multiple attempts, or failure to place the PICC into your vein. If this happens we will advise on alternative methods of venous access

- **Blood clot** – on rare occasions a blood clot can collect around the PICC. This would normally result in additional medical treatment. If your arm or hand with the PICC becomes swollen, red or tender please inform us immediately

- **Blocked PICC** – sometimes your PICC may block which will prevent it from being used. We may be able to unblock it, but if it cannot be unblocked, it will need to be removed. If you are receiving drugs via a drip please inform staff immediately when the bag / bottle is empty. When drips are disconnected the PICC must always be flushed

It is important to highlight that these risks are relatively rare.

If you experience any swelling of the arm, especially above the insertion site, ongoing pain in the upper arm or chills / rigors (shivering) / pyrexia (fever / high temperature) especially within two hours of the line being flushed you must contact your Ward / Specialist Nurse or the Invasive Devices Nurse straight away for further advice.

How is it removed?

When your treatment has finished the PICC will most likely be removed straight away by one of your health care team. It is a painless procedure and done by gently pulling the
PICC out of your arm, either in the ward, as an outpatient or even at home. A small dressing will be applied that you can remove after 48 hours.

**I am a little anxious**

Many people are but we can show you a PICC beforehand so that you can see what it is and looks like. The nurse/doctor will answer any questions that you may have and often other patients on the wards would be delighted to show and discuss their PICC lines.

We will not proceed until you are fully informed and happy to go ahead.

**How will I know if something is wrong?**

Sometimes problems can occur while you have a PICC line. If you suspect something is wrong, or if you have any of the following, and are an inpatient inform the nurse who is looking after you, if you have been discharged home with the PICC in place, contact either your district nurse or the hospital straightaway:

- If you have a temperature above 37.5°C, fever, chills or feeling generally unwell. This could be the beginning of an infection
- Oozing from around the line
- Cracks or leaks in the line
- Pain, redness or swelling around the site, in your neck or arm – this could be a sign that the tip has moved and a blood clot has formed in one of the veins
- If your PICC becomes dislodged

**Frequently asked questions:**

**Can I eat and drink before having my PICC inserted?**

We recommend a light diet before having your PICC inserted.

**Can I have a bath or shower and swim?**

As a general rule, we encourage people with PICCs to take a shower rather than a bath because of the risk of infection if the PICC is submerged in bathwater. However, you may be able to purchase a waterproof protective sleeve. Wrapping cling film around the dressing will help keep the PICC dry whilst showering.

**Can I lead a normal social life?**

Having a PICC in place should not interfere with your social life. However, if having chemotherapy this may mean that you do not feel like taking part in certain social activities immediately after treatment, or if your blood counts are low. Your nurse or doctor will give you more specific information.

**Can I play sports?**

Sports such as tennis and golf or vigorous gym exercises are discouraged. There is a risk that your PICC could become dislodged because of excessive upper body movement. However, there are many other pursuits which are acceptable. If in doubt ask your nurse or doctor.

**Will my PICC affect my sex life?**

Having a PICC in place should not interfere with your sex life. To minimize the risk of damage to your PICC, ensure it is secure before making love. However, sometimes while you are feeling unwell or having cancer treatment you may lose interest in sex. Adequate barrier contraception is essential.
during cancer treatment to avoid pregnancy because of the risk of damage to the baby.

What if my PICC falls out?
If the PICC has only partly fallen out, fix it in place with some tape and contact your nurse immediately. If the PICC has completely fallen out press on the hole in your skin for a few minutes, then apply a small sterile dressing. If it continues to bleed apply pressure for a further three minutes. Inform your nurse and keep the PICC for him/her to inspect.

Reference section
www.picclinenursing.com/picc
www.macmillan.org.uk

Contact details within the Trust for patients to obtain additional information
Invasive Devices Clinical Nurse Specialist
Scunthorpe General Hospital – 01724 282282 ext 3022
Diana, Princess of Wales Hospital – 01472 874111 ext 1131
Or both can be bleeped via switchboard.

Concerns and Queries
If you have any concerns / queries about any of the services offered by the Trust, in the first instance, please speak to the person providing your care.

For Diana, Princess of Wales Hospital
Alternatively you can contact the Patient Advice and Liaison Service (PALS) on (01472) 875403 or at the PALS office which is situated near the main entrance.

For Scunthorpe General Hospital
Alternatively you can contact the Patient Advice and Liaison Service (PALS) on (01724) 290132 or at the PALS office which is situated on C Floor.
Alternatively you can email: nlg-tr.PALS@nhs.net

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