

I-260 PICC Line Cannula Removal

Purpose

Safely remove cannula at termination of treatment or when indicated.

Applies To

Registered Nurses

Licensed Practical/Vocational Nurses

Other (*Identify*): _____

Equipment/Supplies

- One pair non-sterile gloves.
- Alcohol swabs.
- Povidone-iodine swabs.
- Povidone-iodine ointment.
- Sterile 2 x 2 transparent dressing.

Special Considerations

On occasion, the catheter may be difficult to remove. Apply a warm compress above the insertion site to facilitate vein dilation. If difficulty is still encountered, place gentle traction on catheter, tape in place on the client's arm, and attempt again in 20-30 minutes. If still unsuccessful, wait several hours and then continue to gently withdraw catheter.

If catheter breaks, immediately apply tourniquet to upper arm to avoid catheter embolism. Notify the physician.

Keep the exit site below the heart and be aware of signs of air embolism. If signs of air embolism are present, immediately position client on left side with feet elevated. Signs of air embolism: chest pain, dyspnea, hypoxia, apnea, tachycardia, hypotension, nausea, substernal pain, and confusion.

Procedure

1. Obtain physician order to remove catheter. Explain the procedure to the client.
2. Wash hands. Refer to Hand Washing Procedure.
3. Gather equipment and supplies.
4. Apply warm compress directly above the insertion site for 10 - 15 minutes prior to removal. This helps to distend the vein.
5. Position client with arm abducted, and assist him/her to lie flat.
6. Apply gloves and remove dressing.
7. Cleanse the skin with alcohol and then with Povidone-iodine (Betadine).

8. Pull catheter 1-2 inches at a time until entire length is out.
9. Apply pressure to the exit site with a sterile dressing. Hold pressure for 5 minutes.
10. Apply Betadine ointment at the exit site. Fold a 2 x 2 dressing and tape in place. Apply the transparent dressing over the site.
11. Assess the catheter integrity. Report any defect to the manufacturer.
12. Instruct the client to report any signs of bleeding, swelling, or pain. Instruct the client to leave the gauze dressing in place for 24 hours.
13. Dispose of used equipment and supplies according to the Agency Waste Disposal policy.
14. Wash hands. Refer to the Hand Washing procedure.

Documentation guidelines

Document in the clinical record

1. The procedure.
2. Condition of the site.
3. Client tolerance of the procedure.
4. Condition of the catheter and appearance of the tip.
5. Date and time sutures removed, if applicable.
6. Type of dressing applied.
7. Any complications or problems encountered in removing the catheter.
8. Physician notification.
9. Client/caregiver instructions given.

Related Procedures

None.

Policy History

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