



COHESIVE HEALTHCARE MANAGEMENT & CONSULTING
MANGUM REGIONAL MEDICAL CENTER

TITLE		POLICY	
Intravascular Line Assessment		NUR-013	
MANUAL	EFFECTIVE DATE	REVIEW DATE	
Nursing	02/2020		
DEPARTMENT	REFERENCE		
Nursing			

SCOPE

This policy applies to all patients of Mangum Regional Medical Center.

PURPOSE

To establish evidenced-based practice guidelines for the prevention of central line associated infections (CLABSI's) for patients in need of either short- or long-term central line devices.

DEFINITIONS

NA

POLICY

Each patient with a central venous catheter, midline catheter, picc line, or implantable port will be assessed daily by a qualified and trained clinical staff member (RN, LPN, Medical Provider) for insertion or continued need for such device based on established indicators for intravenous lines. After a thorough assessment and based upon the indications, a RN or LPN will consult daily with the medical provider for continued need for the intravenous line.

PROCEDURE

Maintain intravascular catheter devices only for appropriate indications (see protocol).

REFERENCES

CDC 2018 National Healthcare Safety Network (NHSN) Patient Safety Component Manual, Guidelines for the Prevention of Intravascular Catheter-Related Infections, 2011, Drewett, S. Central venous catheter removal: Procedures and rationale. *British Journal of Nursing*, 9(22).

ATTACHMENTS

NUR-013A Intravascular Catheter Protocol

REVISIONS/UPDATES

Date	Brief Description of Revision/Change



COHESIVE HEALTHCARE MANAGEMENT & CONSULTING
HOSPITAL NAME

Intravascular Catheter Protocol
Mangum Regional Medical Center

Date of Review: _____ **Nurse:** _____

1. Does patient meet criteria to justify insertion or continuing intravascular catheter?

a) If **YES**, check indications below:

PIV: Short term access (up to 96 hours) Indications: IV fluids, IVP medications, short-term antibiotics < 7 days.

The lines listed below must be checked daily for continued necessity:

Midline: Short term access (used for 1-4 weeks) Indications: IV fluids, IVP medications, antibiotics

PICC: Medium term access (up to 6 months) Indications: antibiotics, parenteral nutrition, chemotherapy, transfusions, medications, critically ill, hemodynamic monitoring, vasoactive drips

Central Venous Line (CVL): Emergent (remove as soon as possible) Indications: IV fluids, medications, blood products, irritating/vesicant agents, inaccessible peripheral venous access, parenteral nutrition, critically ill, hemodynamic monitoring, vasoactive drips

b) If **NO**, obtain order for line removal.

c) Discontinued: Date: _____ Time: _____

Removed By: _____

d) If patient admits with femoral or jugular site central venous line (CVL) notify medical provider to as soon as possible. Continue or discontinue as ordered by medical provider.

e) Discontinued: Date: _____ Time: _____

f) If line site exhibits any of the following signs: warmth, tenderness, redness, positive blood cultures, fracture/fault in the line, immediately notify medical provider.

1) Provider Notified: Date: _____ Time: _____

2) Nurse: _____