

UNIVERSITY OF MICHIGAN HOSPITALS AND HEALTH CENTERS

Home Care Services

HomeMed • MedEQUIP • Michigan Visiting Care
Michigan Visiting Nurses • Wheelchair Seating Service

PROCEDURE

UMHHC-HCS: 253.017
First Approved Date: 8/1998
Current Approved Date: 1/18/16
Approval Signatures:
<i>Signature on File</i>

TITLE: Insertion of Non-coring Needle into Implanted Vascular Access Device (IVAD)

PROCEDURES:

- A. Obtain/review physician order, identify patient using a minimum of 2 identifiers, explain the procedure, check allergies, and assess potential access site. Inspect drug label, solution and equipment/supplies.
- B. If patient desires, a topical anesthetic cream may be applied to area of needle insertion. Apply anesthetic cream according to package insert. Remove the remaining cream and clean the entire area immediately before procedure.
- C. Wash hands and follow Standard Precautions.
- D. Prepare clean work surface and gather supplies.
- E. Open PICC dressing change kit using the sterile paper wrapping as sterile field.
- F. Open non-coring needle package and catheter cap, and drop onto sterile field.
- G. Place normal saline syringe on the edge of the sterile field.
- H. Open and apply sterile gloves.
- I. Attach catheter cap to the non-coring needle tubing. Place tubing to the side of the sterile field.
- J. Using the equipment packaged in the PICC dressing kit, cleanse the insertion site area with one chlorhexidine gluconate/isopropyl alcohol swabstick by using a back and forth motion. There must be 30 seconds of contact on the skin. If patient is intolerant or has an allergy to chlorhexidine gluconate/isopropyl alcohol, cleansing may be done with 3 alcohol swabs followed by 3 povidone iodine swabs using concentric circles moving from inside to outside. Allow to air dry.
- K. Attach normal saline syringe to catheter cap, and prime the needle and tubing keeping the dominant hand sterile.
- L. With left (or non-dominant) hand, palpate skin over the VAD to locate the port.
- M. Hold syringe and non-coring needle in right (or dominant) hand.
- N. Grasp the non-coring needle by the butterfly wings and remove needle cover.
- O. Insert non-coring needle into the skin over the center of the port. Continue to advance needle until resistance is felt.
- P. Draw back on syringe until blood is visible in the syringe. **Discard the syringe with its contents.**
- Q. Flush with 5 mL of normal saline using positive pressure. Close clamp on extension tubing and remove syringe.
- R. Apply skin prep on area around the skin to be covered by dressing. May place steri-strip over the non-coring needle or small gauze under butterfly wings if needed to secure needle.
- S. Peel the backing from the dressing.

- T. Apply the transparent dressing by placing the center of the dressing over the non-coring needle while holding the split side of the dressing off the skin. Then overlap the soft cloth tabs under the tubing.
- U. Press the dressing into place.
- V. Slowly remove the frame on the dressing while smoothing down the dressing edges. Smooth from the center toward the edges, using firm pressure.
- W. Take one steri-strip from the frame of the dressing. Criss-cross or butterfly it around the tubing and attach it over the dressing.
- X. Proceed to administration of medication, or flush with heparin as needed.
- Y. Discard syringe in sharps container.
- Z. Record the procedure and response to therapy in the patient's medical record.

UMHHC/HCS REFERENCES:

1. Infusion Nursing: An evidence-based approach. INS: 2010

APPROVAL AND REVISIONS:

1. August 1998, updated to new format.
2. August 2000, reviewed, trade names changed to generic. References updated.
3. September 2004, reviewed, minor changes.
4. September 2006, reviewed, changes made to reflect changes in type of port needle.
5. December 2009, reviewed, no changes.
6. March 2010, updated, changes made to discard the syringe used for blood return.
7. November 2012, reviewed; no changes.
8. January 2016, reviewed and removed reference to blunt cannulas.