Emergencies Involving Indwelling Central Lines

History
- Central Venous Catheter Type
  - Tunneled Catheter (Broviac / Hickman)
  - PICC (peripherally inserted central catheter)
  - Implanted catheter (Mediport / Hickman)
- Occlusion of line
- Complete or partial dislodge
- Complete or partial disruption

Signs and Symptoms
- External catheter dislodgement
- Complete catheter dislodgement
- Damaged catheter
- Bleeding at catheter site
- Internal bleeding
- Blood clot
- Air embolus
- Erythema, warmth or drainage about catheter site indicating infection

Differential
- Fever
- Hemorrhage
- Reactions from home nutrient or medication
- Respiratory distress
- Shock

Pearls
- Always talk to family / caregivers as they have specific knowledge and skills.
- Use strict sterile technique when accessing / manipulating an indwelling catheter.
- Do not place a tourniquet or BP cuff on the same side where a PICC line is located.
- Do not attempt to force catheter open if occlusion evident.
- Some infusions may be detrimental to stop. Ask family or caregiver if it is appropriate to stop or change infusion.
- Cardiac arrest: Access central catheter and utilize if functioning properly.
- Hyperalimentation infusions (IV nutrition): If stopped for any reason monitor for hypoglycemia.

Protocol 74
Any local EMS System changes to this document must follow the NC OEMS Protocol Change Policy and be approved by OEMS