

Caring for a Central Line at Home

Hohn, Hickman, and Pheresis/Dialysis Catheters

These are the instructions on how to change the dressing and catheter caps for a central line.

- **Follow these steps carefully to help avoid infection and other complications for a central line.**
- **Change dressing every 7 days or as needed if soiled or becomes loose.**

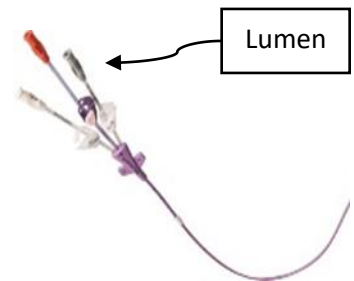
How to Prepare

1. **Wash your hands** with soap and water or an alcohol-based hand sanitizer.
2. Put on clean gloves.
3. Clean the workspace with disinfectant and wipe it dry.
4. Remove your gloves. Put them to the side and start a garbage pile, separate from your workspace.
5. **Wash your hands again.**
6. Gather and place supplies onto the clean workspace.

Tip: you may need more supplies if you have more than 2 catheter lumens.

A lumen is a hollow channel that runs the length of the central line catheter.

- Dressing kit
- Two alcohol wipes
- Two catheter caps
- Two saline flush syringes
- Two green alcohol covers (ex. CUROS™)



7. **Wash your hands again** and put on new, clean gloves.
8. Open the dressing kit, only touching the outside edges.
9. Remove each mask without touching anything else in the kit. 1 mask is for the patient and the other mask is for the person performing the dressing or catheter cap change.
10. Carefully, open the two catheter cap packages and drop them onto the dressing kit. Be sure not to touch the items as you open the package.

Remove the Old Dressing

11. Start at the bottom of dressing. **Be careful not to pull at the central line.**
 - First, remove the reinforcement tape (pants) that overlaps the main dressing.
 - To remove the rest of the dressing, gently pull, working in from the outer edge towards the insertion site (center).
 - Place the old dressing and the gloves in your garbage pile.

STOP - Important! Check the skin around your central line. If you have **redness, irritation, swelling, discharge, or missing or torn sutures (stitches)**, report it to your clinic after the dressing change is complete.

Cleaning the Site/Sterile Technique

1. **Wash hands** with soap and water or alcohol-based hand rub.
2. Put on the sterile gloves that came in the kit. **Remember: All items in the kit are sterile.**
 - a. Look to locate the thumbs on your gloves. Hold out your right hand palm side up.
 - b. With your left hand, pick up the right glove by the cuff. Do not touch the glove above this cuff.
 - c. Slide your right hand in, finding the holes for your fingers and thumb.
 - d. Pull the cuff back toward your wrist and tighten the glove onto your hand.
 - e. With your right hand, tuck your fingers into the cuff of the left glove.
 - f. Slide your left hand into the glove just as before to make sure it is a snug fit. Stay sterile. Avoid touching the table and any item or surface that is not sterile.
3. Remove and open the antiseptic applicator.
4. Clean the skin around the catheter with the antiseptic applicator.
 - Begin at the insertion site. Scrub back and forth, working your way outward in an outward spiral pattern for 30 seconds.
 - Note: be sure to gently scrub over and under your catheter.
 - Do not go over areas you have already cleaned with the same side of the swab.
 - Let the site air dry completely, for at least 2 minutes.
5. If applicable, use each antiseptic applicator included in your dressing kit following the steps above.

Apply the New Dressing

6. While wearing your sterile gloves, remove the dressing from the kit. Touch only the outer edge.
7. Peel the backing off the dressing and apply the dressing with gentle pressure, flattening it out.
8. Remove the paper frame from the top of new dressing.
 - Apply reinforcement tape (pants) to the bottom of the dressing to secure and stabilize the line.
 - Save the leftover tape to date the dressing after the catheter cap change.

Prepare for Catheter Cap Change

Caregiver: Leave your sterile gloves and mask on for the replacement of catheter caps.

Patient: Keep your mask on.

9. Open saline flush syringe and take the cap off the syringe. Do not allow the tip of the saline flush syringe to touch anything that is not sterile. If it does, throw it away and use a new syringe.
10. Pick up the catheter cap from the dressing kit area and carefully attach it to the saline flush syringe in a clockwise direction.
11. Once the catheter cap is on, hold the syringe straight up in the air. Make sure the plunger is pointing to the floor.
12. Push the plunger forward until fluid comes to the tip of the catheter cap. Avoid doing this over the dressing kit.
13. Lay the syringe, with the attached catheter cap, back onto the dressing kit area.
14. Repeat steps 9-13 with the other syringe.



Changing Your Catheter Cap(s)

15. **Be sure the clamp is closed on each lumen of the central line.**

Central lines may have 1, 2, 3 or 5 lumens. This picture shows a triple lumen catheter (without any catheter caps on the end). Each lumen is a separate channel within the catheter so that the medicines and fluids can be given without getting mixed together.

16. Open an alcohol wipe. Clean the area where the lumen meets the catheter cap for 15 seconds. Then allow it to air dry for 15 seconds.
17. Continue to hold the end of the catheter cap with one hand. **Do not let go of it.**
18. Pick up the new catheter cap with the syringe attached. Remove any protective tip or covering from end of catheter cap.
19. Unscrew the old catheter cap from the lumen and place it in the garbage pile. **Important! If you cannot unscrew the catheter cap, STOP, and call your clinic. Do not proceed any further.**
20. Immediately attach the new catheter cap (with syringe attached) onto the lumen. **Be careful not to let the end of the lumen or the end of the catheter cap touch anything else.** Be sure the catheter cap is secure to the lumen.
21. Open the clamp on the lumen.
22. Position the plunger of the saline flush to point towards the ceiling. Using a push-pause technique, push 1 to 2 milliliters (ml) at a time, pausing in between to increase pressure and clean your line. Inject the saline until the syringe is empty.
23. Close the clamp. Leave the syringe attached.
24. Repeat steps 15-23 for any additional lumens.
25. Remove syringe(s) and place green alcohol cover(s) if available.
26. Write the date on the date tag and place on new dressing.

You're done!

What is the Difference Between Clean Gloves and Sterile Gloves?

- Clean gloves are the regular old “exam gloves.” Typically, they come in a box in sizes small, medium, large, and extra-large. These are the boxes you see in hospital rooms and doctor’s offices.
- Sterile gloves are always individually packaged. The packaging keeps the gloves completely free of any germs. There is 1 pair of sterile gloves in the dressing kit.

When to call Clinic/Provider

Contact your clinic/doctor if:

- you have difficulty flushing the line
- your sutures are loose or absent
- you have signs of infection: Fever of **100.4°F (38°C)** or higher, chills, cough, sore throat, pain or burning upon urination, pain, redness or unusual drainage, or swelling over/around the site.
- with any skin irritation beneath the dressing
- you have unusual bleeding
- the catheter breaks

If it is determined you need to be seen, you may be asked to come to our Assessment & Treatment Center (ATC), which is open 24/7. You need to be referred to the ATC by your Roswell Park provider (or the provider on-call); it is not a walk-in clinic. You can reach Roswell Park 24/7 at **716-845-2300** or toll free at **1-800-ROSWELL (1-800-767-9355)**.

Troubleshooting, Tips, and Tricks

If flushing the line is difficult:

1. Check to make sure clamp is open.
2. Check to make sure syringe is not crooked.
3. Then try again. Still hard to flush?
4. STOP. Close the clamp. Remove the syringe.
5. Call Home Care Nurse or Clinic if you were not assigned a Home Care Agency.

If bleeding from insertion site:

6. If blood is not contained within the dressing (example Oozing, blood on clothing near dressing); call Home Care Nurse or Clinic if you were not assigned to a Home Care Agency.
7. STAT Seal is a product that may be utilized on initial insertion by interventional radiology, or by nursing staff if line has active bleeding.
 - a. STAT Seal will remain under dressing and should be removed with the next scheduled dressing change. NOTE- During dressing change, dry loose powder, if noted, should be removed with a sterile gauze prior to cleaning site.

If using a CHG Impregnated Dressing

- Be sure to allow antiseptic to dry, before applying.
- Center the CHG gel pad over the line site.
- Removal: You can use a few drops from a saline syringe to moisten the CHG window dressing to loosen and remove dressing.

If using a Biopatch Dressing (has CHG in it)

- Be sure to allow antiseptic to dry, before applying.
- If applicable, apply printed side up. Blue side up.
- Place slit of Biopatch near or under the catheter. Ensure full contact with the skin.
- Make sure the edges of biopatch meet, to maximize effectiveness.
- Biopatch is good for 7 days, IF it is dry and intact.
 - Do not leave swollen, bloody or loose beneath dressing. Would need to change the dressing if this is noted.

TIPs to prevent irritation beneath the site:

- ALLOW antiseptic application to DRY completely before applying dressing- to avoid chemical related irritation to the site AND AVOID stretching the dressing when applying to the site- to avoid mechanical related irritation to the site.

***If Skin irritation is noted beneath the dressing, be sure to call your Home Care Nurse or Clinic if you were not assigned to a Home Care Agency for recommendations.**

Barrier Applicator (if available to use)

- AFTER you've cleaned the central line site with the antiseptic applicator and allowed it to air dry completely, apply the barrier to the area of skin where the edge of the dressing will go.
- Apply the barrier before the dressing goes onto the central line site and allow to air dry completely.