

ACCESSING A CENTRAL VENOUS ACCESS DEVICE (CVAD):

- Tunneled
- Non-Tunneled
- Peripherally Inserted Central Catheters (PICC lines)

What you need

- Sterile 4 X 4 gauze
- (1) 10 ml prefilled 0.9% Sodium Chloride syringe
- (1) Alcohol swabs
- New primed tubing
- Non-sterile gloves

Steps

1. Assemble equipment and wash hands.
2. Apply non-sterile gloves.
3. Remove the pre-filled 0.9% Sodium Chloride syringe from the package. Remove the white cap and remove all air bubbles from syringe. Recap syringe.
4. Open the package of sterile gauze and alcohol swab. Place swab on sterile gauze.
5. Use 4 X 4 sterile gauze to grasp IV needleless connector cap. Scrub the Hub of the IV connector cap with an alcohol swab for 15 seconds. Allow to dry 15 seconds.
 - Alcohol needs at least 15 seconds cleaning time to be most effective. Air drying prevents the cleaning solution from getting into the valve.
 - If CURO is being used, simply remove. No need to Scrub the Hub unless the end gets touched or contaminated.
6. Remove the white cap from the pre-filled 10 ml 0.9% Sodium Chloride syringe. Attach the syringe to the needleless connector cap. Unclamp the CVAD line. Using light pressure pull back on the plunger to check for blood return. Then flush remainder of the 0.9% Sodium Chloride to clear the line using turbulent flush.
 - Watch for any resistance, pain, discomfort or leakage of fluid around the CVAD.
 - Turbulent flush will help to clear the CVAD of any fibrin or debris that may be sticking to the wall of the catheter.
 - If there is no blood return, heparinize the CVAD with the required amount of heparin. Contact your organization or health care team.

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7. Remove the syringe and connect new primed tubing.
8. Start the pump.
9. Dispose of equipment in appropriate receptacles.



CHEO uses needleless connector caps which are designed to help reduce the risk of occlusions and infections.

Caution! Curo, caps from syringes, and packaging are choking hazards for children. Please ensure you remove these items from your work area immediately upon completion.