

Understanding Your Central Venous Access Device (CVAD)

A central venous access device (CVAD), or central line, is a tube that is placed into your vein. This vein can be found in the neck, groin, arm, or chest. The purpose of the tube is to give medicine or nutrition. It can also be used to draw blood. Some patients will have a central line for a few weeks. Others may have one for months or even years.

What kind of CVAD do I have?

- **Non-tunneled:** A non-tunneled catheter is for short-term use. This line can be placed in your arm, neck, groin or leg.
- **PICC:** A peripherally inserted central catheter, or PICC line, is the most common type of non-tunneled CVAD. This line is most often placed in the arm.
- **Tunneled:** A tunneled catheter is for long term use. The catheter is a line that rests on the outside of the body at the chest area. The line itself runs up through the neck veins and then sits near the heart. Types of tunneled catheters include Hickman[®], PowerLine[®] or Broviac[®].
- **Port:** A port is an implantable vascular access device. It is a small rigid disc. The center is raised to allow a needle to be inserted. You can feel the raised center under the skin.

Why do I need a CVAD?

Common reasons for having a CVAD include:

- To give IV medicines over a long period of time. An IV catheter can be in a large vein for a longer time than in a small vein. This would be for medicines such as antibiotics and chemotherapy.

- To give IV medicines after you go home. You can be more active and get IV medicines at home.
- To quickly give large amounts of fluid or blood.
- To give nutrition directly into the blood when food or liquids cannot be given through the mouth, stomach, or intestine.

What are the risks of a CVAD?

Some of the risks may include:

- **Bleeding:** Bleeding can happen when the CVAD is placed. There is often a small amount of bleeding that should stop by itself.
- **Blocking:** Blood clots may start to form in the catheter. Regular flushing of the CVAD should keep the clots from blocking the tube. If the CVAD becomes blocked, it must be cleaned out by your health care provider.
- **Infection:** Any tube going into the body can make it easier for germs from the skin to get into the bloodstream. A strict sterile protocol (procedure) is followed when inserting the CVAD. This is followed by strict care in cleaning and bandaging.

CVAD Dressing

- **Securement:** Your catheter is held in place by a special device. This device locks the catheter in place to keep it from coming out.
- **Antimicrobial gel:** Around where the catheter enters your skin, there is an antimicrobial gel. This gel helps to keep your line from getting infected from bacteria on your skin.

- **Transparent Dressing:** Your CVAD will be covered with a protective dressing to help prevent infection.

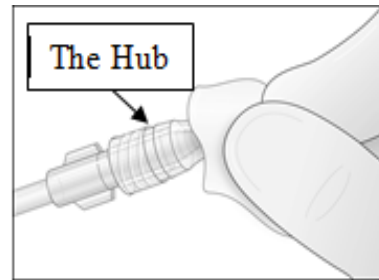
CVAD Care

How your CVAD will be cared for in the hospital:

- Anything that touches or goes into your CVAD will be sterile.
- If your CVAD is in your arm, blood pressures will not be taken on the arm with the CVAD.
- The nurse will change your dressing every 7 days or more often if it becomes wet, soiled, or loose.
- The nurse will look at your CVAD every 8 hours to check the dressing. The nurse will also look for signs of infection such as: redness, tenderness or swelling.
- You will be able to shower. The CVAD will have to be covered with plastic to make sure it does not get wet. If the dressing becomes wet, tell your nurse right away so it can be changed.
- Your CVAD will be taken out as soon as it is not needed. **The CVAD will not be kept in for convenience.**

Ways You Can Help Protect Your CVAD

- **Hand washing:** If your nurse or health care staff does not wash their hands and use gloves when handling your CVAD, please ask them to do so.
- **Disinfection:** If your nurse or health care staff does not “scrub the hub” (see diagram below) with an alcohol wipe for 15 seconds before attaching a syringe or other tubing, please ask them to do so.



- **Dressing:** If the bandage comes off, the edges of the dressing curl, or it gets wet or dirty, tell your nurse or doctor right away.
- **Clamp:** When not in use, the CVAD clamp must be in the closed position.
- **Signs of infection:** Let your nurse or doctor know if the area around your catheter is sore or red.
- **Displacement:** Let your nurse or doctor know if the length of catheter outside the skin is getting longer.
- **Removal:** Ask when the CVAD can be taken out. The sooner it comes out, the less chance you have of getting an infection.

If you are a patient receiving care at UnityPoint – Meriter, Swedish American or a health system outside of UW Health, please use the phone numbers provided in your discharge instructions for any questions or concerns.

Your health care team may have given you this information as part of your care. If so, please use it and call if you have any questions. If this information was not given to you as part of your care, please check with your doctor. This is not medical advice. This is not to be used for diagnosis or treatment of any medical condition. Because each person's health needs are different, you should talk with your doctor or others on your health care team when using this information. If you have an emergency, please call 911. Copyright © 4/2021 University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#5093