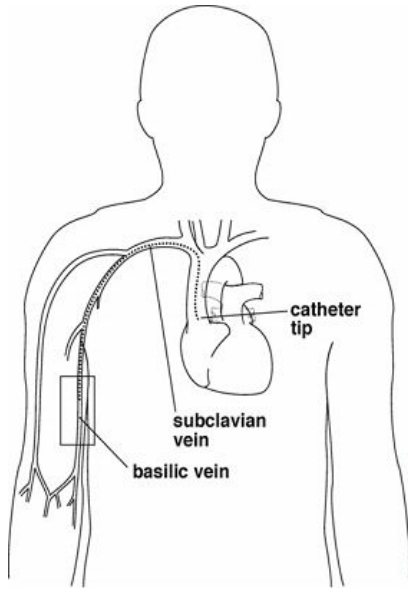


Understanding Your Central Venous Access Device (CVAD)

A CVAD, or “central line”, is a thin flexible tube that is placed into a vein in the neck, groin, arm, or chest. It can be used to give fluids, medicine, or nutrition. A central line can be used for weeks, months or longer.



Types of CVAD

- PICC
- Hickman®
- Implanted Port (Port-a-Cath)
- Tunneled line/catheter
- Powerline®
- Broviac®

Reasons for a CVAD

Common reasons for having a CVAD include:

- To give intravenous (IV) medicines over a long period of time. This could include antibiotics, or chemotherapy.
- 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.

Risk Factors

Some of the risks may include:

- **Bleeding:** Bleeding can happen when the CVAD is placed. There is often a small amount of bleeding that will stop by itself.
- **Blocking:** Blood clots may start to form in the catheter. Regular flushing of the CVAD generally keep the clots from blocking the tube. If the CVAD becomes blocked, contact your provider.
- **Infection:** Any tube going into the body can make it easier for germs from the skin to get into the bloodstream. A sterile procedure is followed when inserting the CVAD. This is followed by sterile cleaning and dressing changes.

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:** Where the catheter enters your skin, there is an antimicrobial gel. This gel helps to stop CVAD infection from germs on your skin.
- **Transparent dressing:** Your CVAD will be covered with a dressing to help prevent infection.



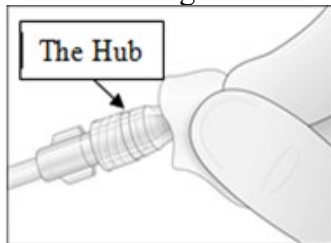
CVAD Care

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, dirty, 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.
- A special soap called chlorhexidine gluconate (CHG) will be used to lower the number of germs on your skin that can infect your line. This is a daily CHG treatment.
- Your CVAD will be taken out as soon as it is not needed. **The CVAD will not be kept in for only drawing blood.**
- **Dressing:** The dressing will be changed if it becomes loose or dirty.
- **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 your catheter gets caught or pulled.
- **Removal:** Ask when the CVAD can be taken out. The sooner it comes out, the less chance you have of getting an infection.

Ways to Help Protect Your CVAD

- **Hand washing.**
- **Disinfection:** Green disinfecting caps will be placed on your line. If there is not a green cap, the health care provider will scrub the hub for 15 seconds using an alcohol wipe.



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 © 9/2024 University of Wisconsin Hospitals and Clinics Authority. All rights reserved. Produced by the Department of Nursing. HF#5093