

Caring for Your Central Venous Access Device (CVAD) at Home

You are going home with a central venous access device (CVAD). It is often used when treatment requires medicines or nutrition for weeks or more. At home, you need to care for your CVAD to keep it working and help prevent the spread of germs. This sheet will help you remember how to care for your CVAD at home.

Caring for Your CVAD

Hand-Washing: Wash your hands and put on clean gloves when caring for your CVAD and touching any supplies. Follow these steps to help prevent infection:

- If hands do not look dirty, you can use an alcohol-based productsuch as Purell gel. Rub it well, all over your hands front and back, until dry.
- If hands look dirty, use soap and water. Wash well, for at least 15 seconds. Use a new, clean towel or paper towel to dry hands well.

Nails: Fake nails can increase the risk of infection. Keep your nails short, trimmed and clean.

Activity: Always protect your CVAD. Avoid rough activities.

Supplies: When you go home, supplies and equipment may be delivered by your home care agency. To order more supplies, contact your home care agency.

Flushing Your CVAD

If you get medicines while at home, your home care agency will teach you how to care for the CVAD.

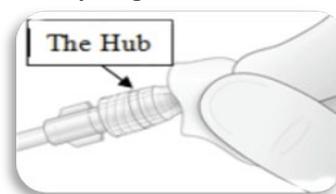
Flush your CVAD every day and after each use. Your nurse may tell you to flush more often if needed.

Supplies

- 1 – prefilled 5mL heparin syringe (10 units/ml) per lumen (if ordered)
- 1-prefilled 10ml saline syringe (if told to not use heparin)
- Alcohol wipes
- Gloves

Steps for Flushing Your CVAD

1. Clean work area.
2. Gather supplies.
3. Wash hands.
4. Put on gloves.
5. To prepare the flush, remove from the plastic wrapper. Remove the plastic cover from the tip of the syringe.
6. Scrub the hub of the needleless connector with an alcohol wipe for 15 seconds. Allow hub to dry and do not let it touch anything. Attach and flush syringe.



7. Connect the syringe filled with heparin or saline to the hub of the needleless connector. Twist on.
 - a. If anything touches the hub before you attach the flush syringe, stop and scrub the hub again for 15 seconds
 - b. If the tip of the syringe touches anything other than the end of the CVAD, stop, and replace the syringe.

8. Unclamp the CVAD.
9. Begin flushing using a “push-pause method” on the syringe plunger. Push the contents of the syringe into the CVAD, leaving a small amount of fluid in the syringe.
10. **Note:** the CVAD should flush easily. If you find it hard to push the fluid in, check to make sure the clamp is open and that the CVAD is not kinked. If it is still hard to push the fluid in, do not force the plunger. Call your home care agency.
11. Remove syringe.
12. Follow the instructions your clinic or home health nurse gave you to throw away the used supplies.
13. Clamp the CVAD.
14. Wash hands.
15. If you have more than one lumen, repeat steps 5-11 for each lumen.

Changing the Needleless Connector

Change the needleless connectors at least every week. A good time to change it is when you change the dressing.

Supplies

- Needleless connector
- Pre-filled normal saline (10mL syringe) or heparin 10 unit/1mL syringe (5mL in a 10mL syringe)
- Clean gloves
- Alcohol wipes
- Mask

Steps for Changing a Needleless Connector

1. Use soap and water or cleaning wipes to clean a table or counter. Dry with a clean towel or paper towel.
2. Wash hands.
3. Put on clean gloves.
4. Make sure the CVAD is clamped.
5. Remove plastic cover from the

- syringe. **Do not** touch end of the syringe.
6. Firmly insert and twist the syringe into the clean needleless connector. Be careful not to touch the end of the needleless connector to anything other than the syringe.
7. Push the syringe slowly until the saline or heparin comes out the end of the needleless connector. Keep syringe attached.
8. Remove the light blue tip from the end of the new needleless connector. **Do not** allow that end to touch anything.
9. Remove the old needleless connector from the CVAD. **Do not** touch the end of the lumen.
10. Place the new needleless connector on the end of the CVAD. Secure the needleless connector by twisting it on. Make sure it is secure and tight. **Do not** over-tighten.
11. Unclamp the CVAD.
12. Flush normal saline or heparin into the CVAD using a “push-pause method” 1 mL at a time.
13. Clamp the CVAD.
14. Remove the syringe from needleless connector.
15. Throw away the supplies.

Showering with a CVAD

Tap water has germs that can cause infection and should not touch your CVAD. The site must remain dry when you shower.

- Always cover your CVAD, even if you plan to change the dressing after.
- Use extra plastic to cover the CVAD. You can use Glad Press’n Seal® or a plastic bag.
- Keep your back facing the water to keep soap and water away from the CVAD and lumens.

Supplies

- Clear plastic cover
- Waterproof tape

Steps to Cover CVAD During Shower

1. Remove a piece of plastic cover or bag to cover your CVAD.
2. Apply the plastic cover over the entire dressing, lumens and any tubing.
3. Use the tape to help seal any edges and make sure it is sticking well to your skin.
4. When you are done with the shower or bath, gently remove tape and plastic cover off skin.
5. Make sure dressing is dry and intact.
6. If dressing is wet or loose, contact your home care agency or call your doctor.

Problems with the CVAD

Break in the Line: Clamp the line above the break and cover with a sterile dressing. Never use scissors or sharp objects near the CVAD. Only use padded rubber-tipped hemostats, blue plastic hemostats, or the clamp that comes attached to the CVAD.

Comes Out: If the CVAD comes out, apply pressure with a sterile gauze pad right away to the exit site for about five minutes. Then place a transparent dressing over the gauze on the exit site. If the CVAD comes out a bit from the body, do **not** push it back in.

Leaks: If the CVAD is leaking, clamp the CVAD with a hemostat between you and the leak.

When to Call

Call your doctor right away if you have any of these issues:

- Fever of 100.4° F (38.0° C) or higher.
- Swelling of chest, neck, face or arm.
- CVAD will not flush or draw blood.
- Pain, redness, or swelling at the site.
- CVAD breaks, comes out or is leaking.

Terms to Know

Peripherally Inserted Central Catheter (PICC): A PICC is a thin, flexible, hollow tube placed in a vein. A vein above the elbow is usually used. The PICC is 18-24 inches long. It ends in the large vein near your heart. There may be one, two, or three lumens (IV access lines) at the end of the PICC. This is where your medicine will be given and blood for lab tests may be drawn.

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. Examples of a tunneled catheter include a Hickman[®], PowerLine[®] or Broviac[®].

Needleless Connector: The needleless connector (also called the hub) is the one-inch clear plastic piece. You can see this part at the end of the CVAD. The needleless connector keeps the CVAD closed and helps keep air and germs out of your body. Your CVAD should always have a needleless connector on each lumen.

Scrub the Hub: This refers to cleaning the needleless connector. Use an alcohol swab and wipe the hub for 15 seconds. When finished, let it dry for 15 seconds before use.

Flushing: Flushing the CVAD refers to using saline to clear anything that still may be in the CVAD such as blood, medicine or nutrition.

Locking: Locking the CVAD refers to putting heparin or saline in the CVAD when it is not being used. The CVAD should also be clamped when it is not being used.

Push-Pause Method: This a method you can use to flush your CVAD to keep it clear of any blood, extra medicine or nutrition. Instead of a steady push, you should start (push) and stop using the push-pause method.

SASH: SASH stands for saline-administer (medicine)-saline-heparin. This helps you remember the order of giving medicine as well as flushing guidelines for your CVAD.

SAS: SAS stands for saline-administer (medicine)-saline. Some patients may be told to not use heparin. This will help you remember the order of giving medicine as well as flushing guidelines for your CVAD.

Securement Device: Your CVAD is held in place by a special device. This locks the CVAD in place to keep it from coming out. A common device is called a StatLock[®].

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#8113.