VETERANS HEALTH CARE SYSTEM
OF THE OZARKS

Patient Guide: Preventing Central Line Infections

We care about your health and strive to provide all of our patients with excellent care.

This brochure describes the measures we are taking to prevent our patients from developing central line infections and the things that you can do to help prevent this type of infection.

A central line is needed to provide fluids or medicine into your circulatory system. Your central line will help us provide care to you, but central lines can also act as a pathway for germs to enter your body. Central line infections can come from the germs living on your own skin. Below you will learn about the methods we use to prevent your central line from getting infected.

What is a central line?

A central line is a small, soft tube that is placed in a large vein – usually in the chest, but it can also be placed in the neck, arm, or groin. It is used to give medicines, fluids, blood, and for dialysis. It can also be used to draw blood for lab testing. Central lines are temporary and are usually removed before you are discharged. Sometimes patients are discharged with a central line or one may be placed for out-patients who need IV therapy at home. If you go home with your central line your healthcare provider will teach you, or your caretaker, how to care for your central line at home.

Types of Central Lines

There are several types of central lines, but all lines end in the large blood vessel leading to your heart called the Superior Vena Cava or SVC for short. There are many types of central lines and below is a short description of some of them.

Peripherally Inserted Central Lines or PICC lines: This type of central line is placed into a vein in your arm and ends in the SVC. It is small and very flexible so you can bend your arm. This catheter has the lowest risk of infection.

Subclavian line: This central line is placed through the skin into a vein in your chest. It is the most common type of central line. These central lines can have one or more lumens so multiple medications can infuse at the same time.

Femoral line: This type of central line is placed in a large vein in the groin. It has the highest risk for becoming infected.

Implanted Venous Access Device or IVAD: This type of central line has a device, or port, that is placed under the skin on the arm or chest. The port is connected to a catheter that runs into the large vein near the heart. A special needle is used to access the port when the central line needs to be

used. When it is not in use all you will see is a bump under the skin. These are used for patients who need long-term central lines.

How do we prevent a central line infection?

- Choose a vein where the catheter can be safely inserted and where the risk for infection is low.
- Clean our hands with soap and water, or an alcohol-based hand rub prior to placing your central line.
- Wear a mask, cap, sterile gown, and sterile gloves when putting in the catheter. You will be covered with a large sterile sheet.
- Clean your skin with an antiseptic cleanser before putting in the catheter.
- Clean our hands, wear gloves, and clean the catheter opening before drawing blood or giving medications.
- Clean our hands, wear gloves, and a mask when changing the bandage that covers the area where the catheter enters the skin.
- Remove the catheter as soon as it is no longer needed for your treatment.

What can YOU do to help prevent a central line infection?

- If the bandage comes off, or gets wet or dirty tell your nurse or doctor.
- Tell your nurse or doctor if the area around your catheter becomes red or painful.
- Do not touch the catheter or tubing.
- Do not let family or friends who visit touch the catheter or tubing.
- Make sure family and friends clean their hands with soap and water, or an alcohol-based hand rub, before and after visiting you.
- Remind your healthcare provider to clean their hands before caring for you.

What does a central line infection look like?

- Redness, swelling, warmth or pain at the catheter entry site.
- Drainage, pus, or bleeding from the catheter site.
- Fever of 100.4 or higher, or shaking chills.
- Shortness of breath or chest pain.

If you have further questions, please talk to your doctor.

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