

**Peripherally Inserted Central Catheter (PICC)  
PICC Team**

**Purpose:** To delineate guidelines for the placement of Peripherally Inserted Central Catheter (PICC) by the PICC Team

**Definition:** A percutaneous peripherally inserted central catheter (PICC) is one that is placed via a peripheral vein or a vein under ultrasound with the tip of the catheter lying in the superior vena cava.

**Policy:**

1. A PICC line may be peripherally inserted by a team effort of one nurse and one radiology technologist-provided the requirements listed below are met.
  - a. The procedure has been ordered by a MD.
  - b. The team of one RN and one Tech have completed minimum contact hours of formal education. This education is addressed in credentialing and initial competency.
  - c. Team members have documented annual competency.
  - d. Verification of catheter tip by a physician prior to initiation of therapy.
  - e. Documented length of the catheter placed. Length is documented at removal to assure complete catheter removal.
2. Initial competency requirements:
  - a. Both RN and Tech have the hospital IV therapy course.
    - i. This will be evidence of competence in peripheral IV insertion and blood drawing.
    - ii. Evidence of experience in venous line management.
  - b. Both RN and Tech to have previous experience in interventional Radiology or heart catheterization setting and be able to demonstrate a knowledge of both cath's and guidelines, be able to demonstrate knowledge in the Seldinger and Modified Seldinger technique
  - c. Both RN and Tech have attended a formal PICC course with a minimum of 8 CEU points.
3. Annual competency
  - a. A minimum of 12 successful PICC insertions during the previous year. If less than 12 the RN or Tech will have a preceptor observe a minimum of 3 successful PICC insertions.

- b. Review of clinicians' complication rate.
- c. Demonstrate knowledge of any new technology and or information related to PICC lines.

4. Indications

For this policy a PICC is a **PLANNED** access procedure. If emergency access is needed, the ordering staff shall notify the physician assigned to the Interventional Radiology Department.

- a. Indication include: therapy requiring venous access for longer than 6 days.
- b. For use with hyperosmolarity or irritating meds or solutions.

5. Contraindications

- a. Lack of access
- b. Near by pacemaker, implantable defibrillation, AVM or other central lines
- c. Skin infections
- d. History or occlusion or thrombosis
- e. Surgeries or trauma to head, neck or arm
- f. Suspected bacteremia or septicemia
- g. Allergy to catheterization material

6. Care and Maintenance

To be followed by the appropriate floor nursing staff (see Nursing Policy page 36)

7. Scheduling of patient/procedure

Once the procedure has been ordered by a physician, the floor will call the nursing staff of Interventional Radiology and the PICC will be scheduled. The RN will require that the floor order be placed through RMS, once done the floor will be notified as to the time the procedure will be performed.

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