

Patient Information Leaflet: Insertion of a PICC

Brief description

- A peripherally inserted central catheter (PICC) is a long hollow tube that is inserted into one of the large veins in your arm. One end of the tube sits in a vein (usually just above the heart) and the other end comes out from underneath the skin in your arm. The catheters are usually recommended for patients who need certain types of medicine or treatments that may irritate or damage smaller veins; or for patients who need injections over a long period of time. Insertion of the catheter requires a sterile operation, which is usually performed under local anaesthetic. More information on PICCs is given in the further information below.
- Here we explain some of the aims, benefits, risks and alternatives to this procedure. We want you to be informed about your choices to help you to be fully involved in making any decisions.
- Please ask about anything you do not fully understand or wish to have explained in more detail.

Please bring this leaflet with you to hospital

- You will be asked to read this leaflet carefully and afterwards you and your doctor (or another member of the vascular access team) will sign a procedure specific consent form to document your consent.
- Remember, you can change your mind about having the procedure at any time.

About insertion of a PICC

- A PICC is a long hollow tube made of silicon rubber which is placed into one of the large veins in the arm. One end of the line comes out from the arm and can be used for injections and the other end is positioned inside a large vein, usually near the heart. There are a number of veins into which the catheter can be placed; the most common being on the upper arm or at the elbow. The particular vein that we use and the side of the body will depend on how large the veins are when we examine them with an ultrasound machine during the insertion. The best position and site for you will be discussed before the procedure; however, it is sometimes impossible to decide until during the procedure. We try to make sure that the entry site is in a comfortable position for you.
- PICCs are usually recommended for patients who need injections or drugs over a long period of time or for patients who need feeding into their veins. The need and reasons for the catheter will have been discussed with you by the doctors looking after your condition.

For staff use:

Does the patient have any special requirements? (For example, requires an interpreter or other additional communication method)

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Before your procedure

- Before the PICC is inserted the reason for it will have been discussed with you by the doctors looking after you. You will meet a member of the Vascular Access Team before you have the procedure but this is not usually until the day of the procedure.
- This procedure involves the use of local anaesthesia. See below for further details about the type of anaesthesia we shall use.
- Most people who have this type of procedure can have it done as a day-case procedure and only need to stay in hospital for thirty minutes after the insertion. However there may be another reason why you have to stay in hospital for longer and your doctor will discuss this with you before you decide to have the procedure.

After the procedure

- **Eating and drinking:** You may eat and drink normally before and after the procedure.
- **Getting around and about:** After this procedure you may get up as soon as you feel able.
- **When you can leave hospital:** Most people who have had this type of procedure under local anaesthetic will be able to leave hospital after thirty minutes. You would be able to drive yourself home. The actual time that you stay in hospital will depend on your general health, how quickly you recover from the procedure and your doctor's opinion.
- **When you can resume normal activities including work:** Most people who have had this procedure can resume normal activities by the next day but you may have a little discomfort in your arm. You might need to wait before resuming more vigorous activity. When you will be ready to return to work will depend on your usual health, how fast you recover and what type of work you do. Please ask your doctor for his/her opinion.
- **Special measures you need to take after the procedure:** If any other measures are required you will be told at the insertion of the PICC. You will also be given information about things to watch for that might be early signs of problems (for example, infection, redness.). You will be given a leaflet explaining how to look after your catheter.

Intended benefits of the procedure

- The benefits of having a PICC will have been explained to you by your doctors and nurses. The main benefits are that the catheter is a secure and safe method for administering drugs and medicines that cannot be given through smaller veins. Some practitioners may also be able to take blood samples through the PICC.

Who will perform my procedure?

- This procedure will be performed by a member of the Vascular Access Team; either a specialist doctor or nurse who has been specially trained to perform the procedure. The

Vascular Access Team is medically supervised by two consultants in Interventional Radiology.

Alternative procedures that are available

- The alternative to a PICC is to place a small plastic tube (cannula) in a small vein in your arm or to place a catheter into one of the veins in your neck. The reasons you need a PICC will have been discussed with you by your doctors and nurses. You can decide not to have this procedure or to wait until you have had time to think about it but your treatment may be delayed if you do not have a PICC.

Serious or frequently occurring risks

Risks associated with this procedure:

Infection. The procedure is carried out using a full aseptic technique – this means that strict procedures are used by staff to minimise the risks of infection. However there are still risks of the catheter getting infected – this may be local infection at the skin or a more general bloodstream infection. Sometimes the infection can be treated with antibiotics but sometimes the line has to be removed. To reduce the incidence of infections the catheter will need to be looked after very carefully and you will receive more information about this.

Local bruising or pain at the site of insertion. This usually settles over a few days; you may require some simple pain relief such as paracetamol.

Thrombosis. When a catheter sits in a vein there is an increased chance of a blood clot forming in the vein. You may be asked to take regular blood thinning medication. (for example, warfarin) to reduce this risk.

Stenosis. If you need the catheter for a long period of time there is a risk that the vein becomes narrowed or stenosed and this may make further PICCS more difficult to insert. If this happens then we may need to put the catheter into a different vein.

Malpositioning of the PICC. We usually try and position the PICC so that the internal end sits in one of the major veins near to the heart; however, sometimes this is not possible. If this is the case then we may need to manipulate the PICC or replace it with a different type of catheter. In this instance an X-ray may be required to help us find out where the end of the PICC lies.

Failure to insert. The veins in the arm are sometimes very small and it may not be possible to insert a PICC. If this is the case then we will discuss alternative options with you.

Phlebitis. This is inflammation of the vein. This results in a painful red swelling in the line of the vein and can be caused by movement of the catheter within the vein. The catheter can irritate the vein causing the arm to become hard and red, therefore you need to drink plenty and keep your arm warm. Sometimes anti-inflammatory drugs, such as ibuprofen, may be prescribed to help with this.

Your anaesthesia

- Local anaesthetic. In local anaesthetic procedures the local anaesthetic drug is injected into the skin and tissues at the site of the procedure to produce an area of numbness. This may sting slightly or you may feel a sensation of pressure for a minute when it is inserted, but you should not feel any pain.

Risks associated with this procedure under this type of anaesthesia

- Local anaesthetic is a commonly used and generally safe drug.

Information and support

- You will be given some additional patient information before or after the procedure, for example, leaflets that explain what to do after the procedure and what problems to look out for. If you have any questions or anxieties, please feel free to ask a member of the Vascular Access Team.
- The Vascular Access Team can be contacted through 01603 286088 or through the hospital switch board 01603 286286.

Further information on central lines can be found at this website:

<http://www.macmillan.org.uk/information-and-support/treating/chemotherapy/being-treated-with-chemotherapy/picc-lines.html>.

Hospital Transport:	If you are eligible for hospital transport, please telephone 0333 240 4100
Contact details:	Telephone 01603 286088 Monday to Friday, 8am to 4pm Email: radiology@nnuh.nhs.uk

If you have any questions outside of these hours, or develop any problems needing medical advice, please do the following:

- If you are an oncology patient, please call the helpline number provided to you by your Oncologist.
- If you are an outpatient, please contact your GP or attend A&E if appropriate.

If you have any comments or suggestions about this letter, please feel free to contact us.

The Trust has to submit information to national registers monitoring imaging tests and scans. All information is stored securely and confidentially. Your anonymised images may also be used for teaching and research purposes. The Trust is a teaching hospital so students may perform or observe procedures.

If you do not want your anonymised data to be submitted to national registers, or a student involved in your procedure, please speak to a member of staff when you come to your appointment. Please be reassured that this will not prejudice your care in any way.

