

PICC Monitoring Chart

Ward / Unit

(A Central line surveillance form should be filled in for each adult in addition to the care plan)



B

Reason for insertion <i>tick</i>	
Surgery	<input type="checkbox"/>
Chemotherapy	<input type="checkbox"/>
Dialysis	<input type="checkbox"/>
Antimicrobial	<input type="checkbox"/>
TPN	<input type="checkbox"/>
Other, <i>please specify</i>	<input type="checkbox"/>

CHART TO BE FILLED IN ONCE PER SHIFT MINIMUM OR UPON EACH ACCESS OF LINE.	
PICC CARE GUIDANCE CAN BE OBTAINED FROM POLICY Trustdocs Id: 16619	
Placement confirmation by:	Type of PICC:
Chest Xray <input type="checkbox"/>	Valved <input type="checkbox"/>
ECG Guidance <input type="checkbox"/>	Clamped <input type="checkbox"/>
Position Correct Y/N	
Sign & designation:	

Patient label / Addressograph

Site of PICC (L/R)		
Date (dd/mm/yyyy) Time		
Inserted by <i>print name</i>		
Total length (in cm)		
Length outside (in cm)		
Department		
Removed by		
Date (dd/mm/yyyy)		
Types of line		
Single Lumen <input type="checkbox"/>	Double Lumen <input type="checkbox"/>	
Triple Lumen <input type="checkbox"/>	Quadruple Lumen <input type="checkbox"/>	
PICC <input type="checkbox"/>	Other <input type="checkbox"/>	
Visual Infusion Phlebitis (VIP) score		
0	Site appears healthy	No phlebitis observed.
1	One of the following is evident: - slight pain at access site - slight redness around access site	Possible mild phlebitis OBSERVE SITE
2	Two of the following is evident: - pain at access site - redness - erythema - swelling	Not to use the site and liaise with medical team or nurse specialist

Date (dd/mm/yyyy) and Time	Age of PICC in days	Length of line visible outside (in cm)	Is line still require Y/N? If not liaise with medical team for removal	VIP Score	Is the dressing clean, dry, intact and insertion site visible? If not replace	Any signs of infection noted Y/N? (Document action, blood culture, swabs, surveillance form filled in, Dr informed in the patient care redord.)	Catheter Accessed Y/N	Sani-cloth CHG used? Y/N	Bloods Taken Y/N	Admin set labelled with date and time? Y/N	Bionector changed? Y/N	Sign, Print Name and Designation

PICC Monitoring Chart – Continuation Sheet

Ward / Unit

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B

Visual Infusion Phlebitis score (VIP Score)

0	Site appears healthy	No signs of phlebitis
1	One of the following is evident – slight pain on the access site, slight redness around the access site.	Possible mild phlebitis – Observe.
2	Two of the following is evident – pain on the access site, erythema, swelling around the access site.	Liaise with medical team or nurse specialist

Patient Label / Addressograph

Date (dd/mm/yyyy) and time	Age of PICC in days	Length of line visible outside (in cm)	Is line still required Y/N? If not liaise with medical team for removal	VIP score	Is the dressing clean, dry, intact and insertion site visible? If not replace	Any signs of infection noted Y/N? (Document action blood cultures, swabs, surveillance form filled in, Dr informed, in the patient care record.)	Catheter accessed Y/N?	Sani-cloth CHG used?	Bloods taken	Admin set labelled with date and time.	Bioconnector changed Y / N	Signature and discipline