## **PICC Monitoring Chart**

В

## Ward / Unit

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

Reason for insertion tick					CHART TO												
Surgery D			OR UPON EACH ACCESS OF LINE. PICC CARE GUIDANCE CAN BE OBTAINED FROM POLICY <u>Trustdocs Id: 16619</u>														
			Placement confirmation by:					Type of PICC:		1							
			Chest Xray					Valved 🛛		Patient label / Addressograph							
			ECG Guidance					Clamped									
			Position Correct Y/N				Y/N										
			Sign & designation:					L									
Site	of PICC (L/R)														N		
Date (dd/mm/yyyyy) Time						outside (in cm)					z			Admin set labelled with date and time? Y/N			
Inserted by print name				]								Υ'N		d tin	Ę		
Total length (in cm)					of PICC in days	side	Is line still require			Any signs of infection	/Х р	, ¿p	Ň	ano	λί		
Length outside (in cm)				Date	in	e out	Y/N?	Score	Is the dressing clean, dry, intact	noted Y/N? (Document action,	esse	nse	en /	date	Jgec		
Department				(dd/mm/yyyy)	00	visible	If not liaise with		and insertion site	blood culture, swabs,	Acce	E HO	Tak	vith	char	Sign, Print Name and Designation	
Removed by				and Time	of P	e vi	medical	<p></p>	visible? <b>If not</b> replace	surveillance form filled in, Dr informed in the	ter /	Sani-cloth CHG used? Y/N	Bloods Taken Y/N	led v	tor	and Boolghallon	
Date (dd/mm/yyyy)						Age	of line	team for removal		Toplaco	patient care redord.)	Catheter Accessed Y/N	i-clo	Blo	abell	Bionector changed? Y/N	
Types of line						1	Jth o	removal				ő	San		set la	Bio	
Single Lumen  Double Lumen							Length								in s		
Triple Lumen  Quadruple Lumen														Adm			
PICC D Other D										<u> </u>					<u> </u>		
Visual Infusion Phlebitis (VIP) score						1	<b>-</b>		1 1		T		1	1 1			
0	Site appears healthy	No phlebitis observed.															
	One of the following																
	is evident:	Dessible mild															
1	<ul> <li>slight pain at access site</li> </ul>	Possible mild phlebitis OBSERVE SITE															
	- slight redness		. –														
	around access site																
	Two of the following																
2	is evident:	Not to use the site and liaise with medical															
	- pain at access site																
	- redness - erythema	team or nurse specialist															
	- swelling	specialist															
	Midline Monitoring cha	rt		Author/s: Rachelle Garcia Author/s title: Clinical Educator													
Approved by: NMCP Forum					Date approved:					Review	date: August 2025						
Available via Trust Docs Version: 1			Trust Docs ID: Page 1 of 2														

## **PICC Monitoring Chart – Continuation Sheet**

Ward / Unit

## Our Vision The best care for every patient

• •																
(A	Central line surveil	llance form sh	ould be filled in for	r each adult	in addit	ition to the c	are plan)									
			Visu	al Infusion (VIP Scor		bitis 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.         2       Two of the following is evident – pain on the access site, site, erythema, swelling around the access site.						sible mild p	phlebitis – Observe			Patient Label / Addressograph						
						Liaise with medical team or nurse specialist										
	Date <i>(dd/mm/yyyy)</i> and time	Age of PICC in days	Length of line visible outside (in cm)	Is line s require Y/N? If not lia with med team f remov	ed aise dical or	VIP score	Is the dressing clean, dry, intact and insertion site visible? If not replace	infection (Docum blood cult surveillan in, Dr info	signs of noted Y/N? ent action ures, swabs, ce form filled rmed, in the are record.)	Catheter accessed Y/N?	Sani-cloth CHG used?	Bloods taken	Admin set labelled with date and time.	Bioconnector changed Y / N	Signature and disciplin	

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