Accessing Central Lines

PROCEDURE

STEPS

1. Use clean gloves with every access attempt
2. Clean the port carefully with chlorhexidine
3. ALWAYS aspirate and waste at least 10 cc of fluid from the device
4. Difficulty withdrawing fluid: use the pulse / push-pause method
5. After any medication administration, flush with 10 cc of Normal Saline

IF IT GOES WRONG

- Cannot easily aspirate 10 cc: do not use the line
- Line types on the page: PICC (arm to SVC); Hickman (tunneled, long-term/chemo); Groshong (valved tip); Broviac (smaller, mainly children); IJ (neck, rapid fluids/CVP)

BEFORE YOU START

- Paramedics: patient has a central line (PICC, Hickman, Groshong, Broviac, IJ) — excluding Portacaths
- Peripheral IVs cannot be established in a timely fashion, or not at all
- Prevents EZ-IO insertion in an awake, critically ill patient needing emergent medication or fluids
- Contraindications: a peripheral IV can be established; inability to easily aspirate 10 cc from the line
- NEVER access dialysis ports — blue and red ports, usually labeled TRIALYSIS

KIT YOU NEED

- Clean gloves; chlorhexidine
- Syringes for the 10 cc aspirate/waste and 10 cc NS flush

Take Home Message:

Central lines are a paramedic backup when peripheral access fails: clean gloves, chlorhexidine, always aspirate and waste 10 cc first — and never touch a dialysis port.