NURSING SERVICE GUIDELINES
GENERAL

Guideline: **Peripherally Inserted Central Catheters**

Policy Number Superseded: 3364-110-05-11

Responsibility: Chief Nursing Officer

Purpose of Guidelines: To establish a uniform procedure for insertion, maintenance, care, de-clotting, and removal of PICC lines.

Effective Date:
October 28, 2025

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Procedure:

Peripherally Inserted Central Catheters (PICC) offer an alternate method of vascular access for short- or long-term therapy to certain patient populations. Because of the complexity of the insertion procedure, only Registered Nurses (RNs) trained in PICC insertion technique are permitted to perform this procedure.

(A) The physician responsible should write an order for placement of PICC line per protocol. The physician or PICC RN may order a chest x-ray to confirm placement in the superior vena cava if needed. The order should also include 1% Lidocaine for local anesthesia. All PICC lines for renal patients must be approved by a nephrology attending. If blood cultures are drawn on a patient, there must be a 48-hour preliminary negative results prior to inserting the PICC line, unless Infectious Disease is consulted and approves line placement prior to preliminary results of blood cultures.

(B) Insertion or removal of PICC line may only be performed by a PICC qualified RN or physician.

(1) The inserter will have completed an 8-hour course and demonstrate competence.
(2) The inserter will be part of the PICC Line Team and demonstrate leadership skills.

(3) Removal of PICC line can be performed after demonstrating competency by a PICC qualified RN, physician or staff nurse who has completed the removal competency.

(C) PICC maintenance and care may be provided by any RN trained in the PICC line maintenance procedure.

(D) Patients may be selected for placement of a PICC line based on the following criteria:

(1) Intravenous therapy for (at least) 5 days to 12 months duration, or at physician discretion.
(2) Intravenous therapy requiring:
  (a) Continuous infusion of vesicant chemotherapy or irritating drugs.
  (b) T.P.N.
  (c) Antibiotics, antivirals, etc.
  (d) Frequent administration of blood products.
(3) Patients must have adequate antecubital or another upper arm vein to be accessed by qualified PICC RN.
(4) For patients with severe coagulopathies, such as hemophilia or thrombocytopenia, the qualified nurse and physician should thoroughly evaluate the patient's clinical condition and administer appropriate therapy before PICC line insertion

(E) Nursing Service practice guidelines must be followed for the insertion, maintenance, care, declotting and removal of a PICC line, which include guidelines for appropriate documentation.

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