 <p>DR. PABLO O. TORRE MEMORIAL HOSPITAL</p> <p>B.S. Aquino Drive, Bacolod City, Negros Occidental, 6100</p>	Document Code:	DPOTMH-I-29-P01-S01
	Effective Date:	10-30-2021
	Document Type:	Standard Operating Procedure
	Page Number:	1 of 3
	Department/Section:	Neonatal Intensive Care Unit
	Document Title:	<b>ASSISTING IN PICC LINE INSERTION</b>

**PURPOSE:**

1. To provide the safety guidelines in the peripherally inserted central catheter (PICC) line insertion in the Neonatal Intensive Care Unit (NICU).
2. Reduce the risks associated with having a peripherally inserted central catheter (PICC) by identifying evidence based safe systems of work.

**SCOPE:**


Applies to all Neonatal Intensive Care Unit Staff of Dr. Pablo O. Torre Memorial Hospital

**PERSON RESPONSIBLE:**

Pediatric Consultants, Resident Physicians, Registered Nurses

**GENERAL GUIDELINES:**

1. The procedure shall have an order from attending Physician.
2. Signed consent shall be obtained before the procedure.
3. The staff on duty inform the consultant assigned to perform the procedure.
4. The patient's identity (2 patient identifiers) shall be verified before the procedure shall be verified as per hospital policy.
5. Staff nurse completes the documentation needed and corresponding charges encoded to HIS.

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### **PROCEDURE:**

1. Wash hands with soap and water.
2. Prepares materials as requested by consultant.
3. Consultant measures the approximate length of catheter to be inserted to the neonate.
4. Prepares the area for the procedure.
5. Positions the Infant – supine position, restrained, exposing only the site chosen by the consultant.
6. Consultant and Resident don sterile gown and sterile gloves.
7. Consultant cleanses the extremities using povidone iodine swab.
8. Consultant removes 1<sup>st</sup> set of gloves.
9. Consultant inserts the IV cannula in the chosen vein aseptically.
10. Once there is a back flow from the insertion the consultant breaks the cannula and advances the catheter until the desired approximate length is reached.
11. While the consultant is inserting the catheter, the resident flushes the line with premixed normal saline solution and heparin solution.
12. Consultant then checks the patency of the catheter and secures the line aseptically.
13. Nurse in charge hooks the premixed IVF with heparin as ordered.
14. Nurse in charge does after care.
15. Consultant orders Chest x-ray AP to include extremity to ensure the placement of the catheter, depending on the patient status.

### **REFERENCE:**






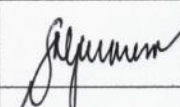
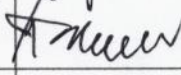


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