

Vascular Access Team

## **My child needs a PICC line**

Information for parents and carers

### **What is a PICC line?**

PICC stands for **P**eripherally **I**nserted **C**entral **C**atheter. It is a central line and is a long thin tube usually inserted into your child's upper arm, it is longer than a normal cannula, or longline. The end of the tube sits in a larger blood vessel close to the heart in the centre of the body. The other end of the tube has small white wings and a white tube with a plastic clamp on it. This is what you will see coming out of the skin at the exit site.

### **Why does my child need a PICC line?**

A PICC line is needed when it is expected that the treatment your child requires through their veins (intravenously) could continue for more than 2 weeks up to several weeks/months. It may also be required for other treatment durations dependant on several other factors including the type of treatment being given down it. This could include blood products, medications, fluids or intravenous nutrition (TPN).

### **Do I have to give my permission for it to be put in?**

Yes, permission is usually obtained and the reason why a PICC line is needed, and any potential complications, will have been explained before it is inserted. The person with parental responsibility will be asked to sign a consent form before the procedure commences.

### **Will it hurt?**

The procedure can be done whilst asleep under a general anaesthetic, or in some circumstances whilst awake in the ward environment. This will be discussed with you and your child beforehand.

If the procedure is done under general anaesthetic it won't hurt, as they will be asleep. When your child wakes up the insertion site may be a little sore and pain relief can be provided, if it is required.

If the procedure is done whilst your child is awake, they will have a local anaesthetic injection to completely numb the area. 'Magic cream' will be applied prior to this to help to minimize pain and discomfort from the injection of the local anaesthetic. After the local anaesthetic is administered they should not feel any pain or discomfort, they may just feel some pressure/pushing during the procedure.

### **How can my child be prepared?**

A play specialist can be present before and during the procedure to provide preparation and distraction therapies.

### **How long will it take to put in?**

This can vary from child to child and the team inserting the line will discuss this with you when the reasons it is needed are explained.



## Side effects and complications

Any complications will be discussed with you during the consent process before the procedure is undertaken.

Needles can hurt however, the 'magic cream' helps to minimize pain and discomfort during the procedure. The cream may be applied to several areas to give the doctor or nurse a choice of the best vein to use.

The site where the PICC enters the vein and along the vein the PICC is in will be checked regularly by your child's nurse so any potential complications will be picked up early. These can include redness, swelling or tenderness, having a temperature.

If you are concerned please speak to a member of the nursing staff.

## What are the benefits?

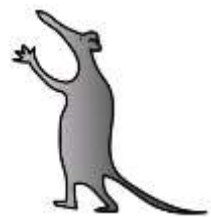
Having a PICC may mean your child will not need as many needles over the course of their treatment. If there are no problems with the line it can stay in place throughout your child's treatment. This may be up to several weeks if required. A PICC can also be used to take bloods from, if required.

## Is there any other treatment my child could have?

Your child needs to have a PICC put in because it is expected that they need to have medication or fluids. If a PICC is not put in, then your child could need a number of cannula depending on their treatment plan. Also, a cannula may not be a suitable line to be used for their treatment. A PICC will make treatment easier and more comfortable for your child.

## What will it look like?

Once the PICC is in, it will be secured with a special dressing  
The picture below shows what it will look like.



It may also be covered with an extra covering called tubifast, which is a soft cotton covering (alternative to a bandage).

## Can my child go home with a PICC line?

Your child could go home with the PICC still in, if the medical team responsible for your child's care feel it is appropriate and safe for them to continue their treatment at home.

## What support will I get at home?

The community nursing team will support you at home.

## Aseptic Non-Touch Technique (ANTT)

Your child's long line will be accessed in order to deliver medication, blood products or fluids via a trained nurse or doctor. The technique used to access your child's long line is called ANTT (Aseptic Non-Touch Technique). This is an evidence based clinical practice for preparation and administration of intravenous therapy. Research shows that using ANTT is best clinical practice for accessing intravenous lines and reducing risk of infection. Department of Health and the Royal College of Nursing (2010).

You should see:

- The nurse / doctor cleans their hands with soap and water or alcohol gel.
- Put on a pair of gloves prior to accessing your child's line.
- Scrub the end of the intravenous line device for 20 seconds with a large wipe and allow it to dry for 20 seconds.
- Gather all equipment safely and remove it from your child's bed space once the medication has been administered.

This leaflet only gives general information. You must always discuss the individual treatment of your child with the appropriate member of staff. Do not rely on this leaflet alone for information about your child's treatment.

This information can be made available in other languages and formats if requested.

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