I			STAT/NOW	
DATE	TIME			
POST PLACEMENT:				
Chest x-ray to confirm catheter tip position				
ROUTINE CATHETER CARE:				
Use only 10ml syringes to aspirate, flush, or administer medication through PICC/Midline catheter				
Flush PICC/Midline catheter with heparin unless patient is allergic to heparin				
Routine heparin flush: 10ml 0.9% NS followed by 3ml heparin (100 units/1ml) every 8 hours and PRN				
unless continuous IV Fluids are infusing				
Increase flush to 20ml 0.9% NS followed by 3ml of 100 units/1 ml heparin after blood transfusion, blood				
draw, or TPN infusion				
Dressing: Please change every 7 days or as needed using transparent dressing, Biopatch, and locking				
device (Stat lock, etc.)				
Assess and document site for redness, swelling, or leaking each time PICC/Midline catheter is used.				
Please notify primary MD if any of these signs are present.				
CATHETER OCCLUSION / MALFUNCTION:				
Inject Alteplase 2mg/2ml into each lumen of catheter. Let dwell for 1 hour, then aspirate. May repeat if				
necessary. If second dose of Alteplase fails to open the occluded catheter, please notify the primary MD				
Chest x-ray if catheter becomes dislodged to confirm catheter tip position				
RESTRICTIONS:				
No blood pressure cuff on arm with PICC/Midline catheter				
Do not remove PICC/Midline catheter without an order				
				1
			Pharmacy	
	NURSE SIGNAT	TURE	Scan Time:	Name Stamp Signature STAMP/PHYSICIAN SIGNATURE/BEEPER #
Date:	Tin	ne:		Required for countersignature on telephone/verbal orders
				Date: Time:
Patient Label				

POST PLACEMENT PICC/MIDLINE ORDERS