



Section 14: Appendix 2: Medical Procedures

SECTION 14: SPECIALIZED INTRAVASCULAR (IV) PROCEDURES

FOR PARAMEDICS TRAINED IN THESE PROCEDURES ONLY

LONG - TERM IV CATHETERS

P PARAMEDIC P

INDICATIONS	SIGNS AND SYMPTOMS	CONTRAINDICATIONS
<ul style="list-style-type: none">• Patients with indwelling catheters used for IV therapy• Central lines are Port-a-Caths, Infuse-a-Ports, Broviac & Hickman Catheters• A PICC line is a peripheral line	<ul style="list-style-type: none">• Patient is unresponsive or full arrest• Emergent medication administration• Emergent fluid administration	<ul style="list-style-type: none">• Use of a Port-a-Cath requires a special needle• Catheter appears infected at site• Catheter seems clotted and will not flow• Prehospital IV not critical

PROCEDURE

1. Prepare IV solution for connection to catheter with connecting device.
2. Identify a pigtail with cap on end, or locate center of Port-a-Cath injection site.
3. Cleanse end cap or site with alcohol.
4. Using 5 ml of normal saline, access the port with sterile technique and gently attempt to flush the saline.
5. If there is no resistance, no evidence of infiltration (e.g., no subcutaneous collection of fluid), and no pain experienced by the patient, and then proceed to step 4. If there is resistance, evidence of infiltration, pain experienced by the patient, or any concern that the catheter may be clotted or dislodged, do not use the catheter.
6. Insert connecting device and begin infusion.
7. Begin administration of medications or IV fluids slowly and observe for any signs of infiltration. If difficulties are encountered, stop the infusion and reassess.
8. Give IVP drugs via side port of IV tubing.
9. Secure using appropriate measures to insure stability of the line.
10. Record procedure, any complications, and fluids / medications administered in the patient care report (PCR).

KEY POINTS

- In the setting of cardiac arrest, any preexisting dialysis shunt or external central venous catheter may be used.
- Patients must be hemodynamically unstable or in extremis to require use of dialysis catheters or external central venous catheters. Blue ends on the catheter is venous access, red is arterial access. Use only the venous (Blue) catheters.