

SECTION 8C: VASCULAR ACCESS DEVICES	POLICY: 8C.10
POLICY: VAD FLUSHING & MAINTENANCE	PAGE: 1 OF: 2

PURPOSE:

- To establish guidelines and provisions for safely maintaining and flushing vascular access devices in the home.

POLICY:

- It is the responsibility of the Agency, the Clinical Supervisor, and the Director of Nursing to coordinate and communicate with the attending Pharmacist and/or attending MD to assess the appropriateness of line care and maintenance in the home setting utilizing the guidelines established.

GENERAL INFORMATION:

- Vascular Access Devices must be flushed to keep them clear of blood and prevent clotting.
- **Orders from a client’s physician, orders from a client’s pharmacy, and/or pharmacy protocols *always supersede Agency flushing protocols.***
- Normal saline is used to flush fluids through; Heparin is used to maintain patency while maintaining access or to discontinue access unless another medication is specified in the order.
- For medications that are ordered to “dwell” only as opposed to being flushed (i.e, Ethanol lock, Vancomycin lock, Gentamicin lock), the nurse will follow the specific instructions in the MD order.

PROTOCOLS:

See Chart

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CATHETER	STANDARD FLUSH w/ MED ADMINISTRATION	MAINTENANCE FLUSH	BLOOD DRAW	CAP CHANGE	OTHER
SQ	None	N/A	N/A	With Site Rotation	Rotate site Q3-5 days if continuous infusion
PERIPHERAL	5 - 10ml NS, before & after infusion	5 - 10ml NS Q12 hrs.	5 -10 ml saline before & after	Weekly, after Blood Draws, and prn.	Assess Q7 Days apn, rotate site as needed
PICC LINE	10ml NS 5ml Heparin (100u/ml) <2yo: 5ml Saline/2ml Heparin (10u/ml)	Daily: 10ml NS; 5ml Heparin (100u/ml) <2yo: Daily: 5ml Saline/2ml Heparin (10u/ml)	Flush line w/ 10ml NS. Waste 5ml blood. Withdraw blood specimen. Flush w/10ml NS & 5ml Heparin (100u/ml) <2yo: Flush with 5ml NS. Waste 2-3ml blood. Withdraw specimen. Flush with 5ml NS & 2ml Heparin (10u/ml)	Weekly, after Blood Draws, and prn.	Check MD orders from infusion pharmacy for specifics
BROVIAC/HICKMAN/ APHERESIS CATH (POWERLINE)	10ml NS 5ml Heparin (100u/ml) <2yo: 5ml Saline/2ml Heparin (10u/ml)	Daily: 10ml NS; 5ml Heparin (100u/ml) <2yo: Daily: 5ml NS; 2ml Heparin (10u/ml)	Flush line w/ 10ml NS. Waste 5ml blood. Withdraw blood for test. Flush w/10ml NS & 5ml Heparin (100u/ml) <2yo: Flush with 5ml NS. Waste 2-3ml blood. Withdraw specimen. Flush with 5ml NS & 2ml Heparin (10u/ml)	Weekly, after Blood Draws, and prn.	Check MD orders from infusion pharmacy for specifics
GROSHONG CATH	5ml NS only	Weekly: 10ml NS	Flush line w/ 10ml NS. Waste 5ml blood. Withdraw blood for test. Flush w/10ml NS <2yo: 5ml NS	Weekly, after Blood Draws, and prn.	Check MD orders from infusion pharmacy for specifics
PORT-A-CATH	10ml NS 5ml Heparin <2yo: 5ml NS & 5ml Heparin (10u/ml)	Monthly 10ml NS & 5ml Heparin (100u/ml) <2yo: 5ml NS & 5ml Heparin (10u/ml)	Flush line w/ 10ml NS. Waste 5ml blood. Withdraw blood for test. Flush w/10ml NS & 5ml Heparin (100u/ml) <2yo: 5ml NS & 5ml Heparin (10u/ml)	Weekly with needle change	If dual port, flush both sides at least monthly