

Information for patients and carers

Peripherally Inserted Central Catheter (PICC)

Central Venous Access Team

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This information leaflet aims to help answer some of the questions you may have about your Peripherally Inserted Central Catheter (PICC).

Why do I need a Peripherally Inserted Central Catheter (PICC)?

A PICC allows for medications, fluids and antibiotics to be given directly into the bloodstream (intravenous). It can be used for taking blood samples. Some medications can irritate and cause damage to the smaller veins found in the lower arms; therefore, a PICC is more suitable. Some medications may also be required for an extended period of a week or even longer. By giving these medications into a large vein, it reduces irritation as it enters the bloodstream.

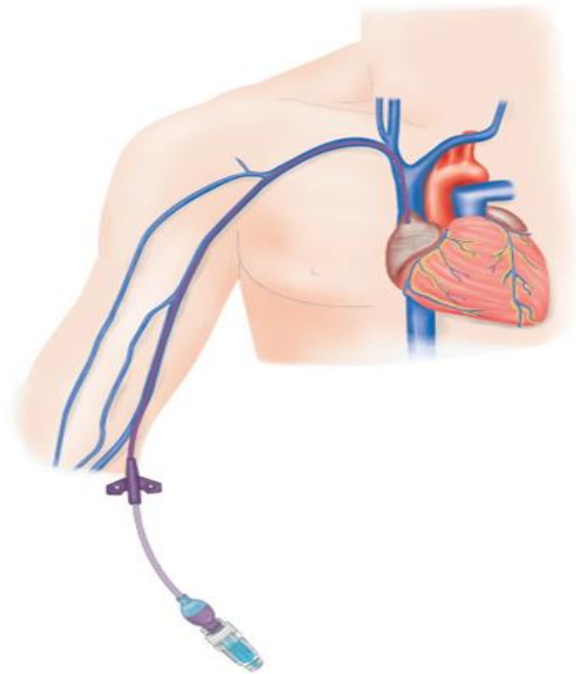
A PICC can be used for:

- Intravenous fluids and medications
- Intravenous feeding/nutrition
- Taking blood samples
- Giving blood or other blood products
- Chemotherapy

What is a PICC?

A PICC is a long, thin, hollow, flexible tube inserted into one of the veins of the upper arm and passed through to sit in a large vein just outside of your heart. The length depends on how tall you are and where the insertion site is. Usually, it is 38–52cms long and the nurse will take some measurements prior to starting the procedure. There will be an external length of line which comes out of your arm where your specific intravenous therapy will be connected. The space through which the fluid is infused is called a lumen.

You may have one or two lumens depending on the treatment you are receiving. Not all patients are suitable for a PICC, and a nurse specialist will assess you before inserting. If you are not suitable for a PICC, the nurse will discuss other options for intravenous access, including short-term cannulas and other long-term tunneled lines.



How is a PICC placed?

The specialist nurse will discuss any questions or concerns that you may have and ask you to sign a consent form if you have agreed to have a PICC placed. The procedure will be done using recommended equipment; it will be done at the bedside if you are an inpatient, or in a clinic room as an outpatient. The nurse will identify the most suitable veins in your arm using an ultrasound machine.

A sensor will be placed on your chest and an ECG sticker to your right

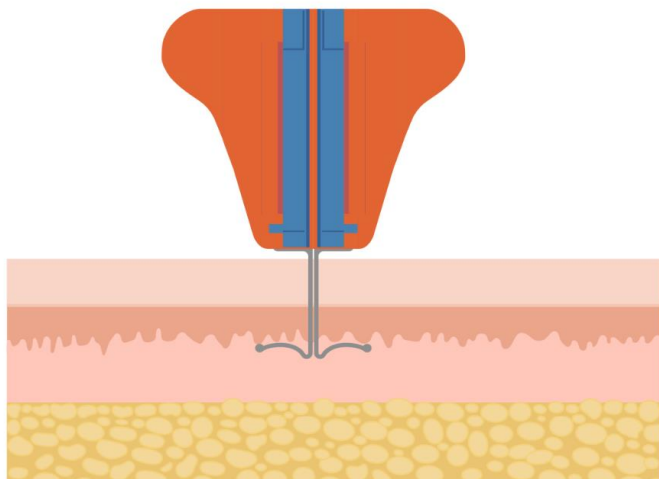
shoulder and left hip during the procedure (this is to allow the nurse to confirm the correct placement of the PICC).

The nurse will then clean the skin of your arm with an antiseptic sponge and cover you in a sterile drape. Local anaesthetic will be injected into your arm to numb the area; this may sting a little at first. A needle will be put into the vein; an introducer will widen the hole and the PICC tube inserted. You should only feel a little pressure on your arm during the procedure, which may feel a little uncomfortable.

Placement of the PICC is confirmed at the time of insertion using a navigational system and ECG technology, but sometimes a chest X-ray will be taken to confirm the PICC tip is in the correct position before the tube can be used.

Once the PICC has been placed, it is secured into position by a Securacath (see pictures below). A Securacath anchors the PICC in place at the insertion site; it has two small, blunt, metal securement feet that sit just beneath the skin. A dressing will be applied at the end of the procedure to secure the PICC in place.





How will my PICC be looked after?

If you are in hospital, the ward nurses will care for the PICC. The specialist nurses will also be available to discuss any concerns and will visit you during your stay.

Sometimes it is possible for your therapy to continue at home or as an outpatient. If this should happen, there will be a team of nurses involved who will look after the PICC and renew the dressing and needle-free bung on a weekly basis, or as needed. If your PICC is not being used, it will still need to be flushed once a week when the dressing is done to ensure it remains patent and usable.

How do I look after my PICC?

Most activities can be continued with care. It is best to avoid strenuous arm activities such as tennis and golf as these can dislodge the line. Swimming should also be avoided due to an increased risk of infection. It is possible to bathe and shower with care.

Try to keep the PICC dressing dry and avoid submerging your arm in water. This will reduce the risk of infection.

If your dressing becomes wet, dirty or loose it will need changing to prevent any infection and prevent the PICC from falling out. It is advisable to contact the nurses so that this can be renewed. Unless you have been taught to care for your PICC by the specialist nursing team, we would advise you not to attempt to change the dressing yourself or by a family member.

If you notice any redness, pain, swelling, or oozing around the PICC or in your arm, inform the nurses or doctor.

If you are at home and suddenly develop an unexplained temperature above 38°C and feel shivery and have flu-like symptoms, you should attend your local hospital emergency department immediately.

Are there any risks in having a PICC?

There are some risks and complications associated with having a PICC. These include:

- Infection - you may notice redness, tenderness or oozing around the insertion site or suffer from flu-like symptoms, shivering or a raised temperature. It is important to tell a nurse or doctor if this happens
- Bleeding and bruising - there may be some bleeding initially after insertion, but this should stop after some pressure is applied. Any bruising will disappear after a few days
- Thrombus or blood clot - If a blood clot forms, this will be noticeable by swelling and pain in the arm. It is important that you tell a nurse or doctor if this happens
- Sometimes the PICC can move from its original position. If there is doubt about where the PICC tip lies, then a chest x-ray will be performed to confirm the PICC tip position
- Sometimes the PICC cannot be inserted when the vein goes into spasm or there is an unusual vein structure

The specialist nurse will discuss these in more detail with you prior to insertion.

What will happen when I no longer need my PICC?

When your treatment is finished, the PICC and Securacath will be removed. A dry dressing will be applied which can be removed after 24 hours.

Contact details

Should you require further advice or information please contact:

The Central Venous Access Team Specialist Nurses:

(Ask for extension: 3057) or telephone direct on: 01772 523057

Monday - Friday: 08:30-16:30.

Sources of further information

www.lancsteachinghospitals.nhs.uk

www.nhs.uk

www.accessable.co.uk

www.patient.co.uk

www.lancsteachinghospitals.nhs.uk/veteran-aware

<https://bepartofresearch.nihr.ac.uk/>

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If you want to stop smoking, you can also contact Smokefree Lancashire on Freephone **08081962638**

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This information can be made available in large print, audio, Braille and in other languages.

Our patient information group review our leaflets regularly, if you feel you would like to feedback on this information or join our reading group please contact on email address:
patientexperienceandinvolve@LTHTR.nhs.uk

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