Home Intravenous Therapy Team - PICC and Midline

An information guide
**Home Intravenous Therapy Team - PICC and Midline**

**What is intravenous therapy?**

The terms intravenous, IV or parental are used when medicine is given straight into your blood, in a vein. This is done by using different devices such as an IV cannula, Hickman line, PICC line or midline. The device that is used will depend on the treatment you are having and how long you need the treatment for.

**What is a Midline?**

A midline is a short fine hollow tube that is put into one of the large veins in your arm, usually in the bend of your elbow. It is put into a vein and goes no higher than your armpit. It can stay there for a few weeks.

**What is a PICC line?**

A PICC (peripherally inserted central catheter) is a long hollow plastic tube that is inserted with a needle through the skin, into one of your large veins and the end sits near your heart. The needle is then removed so only the plastic is left in your vein. This is inserted in a very clean way (sometimes in theatre) and can stay in for up to six months.
Why do I need a PICC line or Midline in?

The type of treatment you are having needs to be put into your vein for a period of time. The veins in your arm are the best veins to use. A midline or PICC line should mean you will have fewer needles for the length of time you are having the treatment as the lines can stay in for several weeks.

How is the midline put in?

You will be positioned on your bed or chair with your arm out to the side. A specialist trained nurse or doctor who has had special training will put the line in.

They will put a needle into your arm to where the arm bends. After this, they will put the midline into your vein. This will take approximately 30-45 minutes in total.

A midline will be ready to use straight away.

Following insertion of a PICC, you will have a chest x-ray to ensure the line is in the correct position. The tip of the line should lie in the superior vena cava which is a large vessel leading to the heart. If the
line is put in too far, it may cause your heart to flutter and the line will need to be repositioned. This will not be painful and takes only a few minutes. When the x-ray shows the line is in the right place then it is ready to use.

How is the midline or PICC kept in place?
Both the Midline and PICC are kept in place with steristrips (sticky strips of plaster) and a clear dressing over the top. The dressing helps prevent infection getting into the vein. To prevent infection entering the line, there is a plastic cap called a ‘bung’ attached to the end of the line. The bung and the clear dressing are changed weekly by the nurse or earlier if dirty, wet or loose. Please keep your dressing clean and dry.

Will I be able to move my arm?
You will be able to feel the line in your arm but it should not stop you carrying out your usual activities. Excessive exercise should be avoided as this may make the line move. If you notice any redness or pus around the entry site that is new to you, then you should contact the helpline number and arrangements will be made for you to be reviewed. This may mean attending the hospital for review.

You should avoid heavy lifting and excessive movement of the limb.
Some people may return to work with a peripheral cannula or a midline, but it must be light duties.
What will the line look like?
Can my treatment be given any other way?

Cannula – If you have a cannula in your hand and arms, you may find you need a new one often as they must be changed every 3 days. Over a period of time you may find your veins start to get sore with cannulas being put in so often.

Central line – There are other more invasive ways of delivering your treatment. This involves inserting a central line into your chest and is generally used for patients on long term treatments.

Are there any risks with having a Midline or PICC?
The risks are the same when the line is in, for both midline and PICC line. The main risks are:

**Infection.** The nurses will care for your line while wearing sterile gloves. This is one of the main ways to prevent infection. If the dressing over the line gets wet it must be changed as soon as possible as bacteria grow in damp environments.

**Mechanical phlebitis.** The midline and PICC are slightly smaller than the size of the vein, so the vein can take time to get used to it. This usually settles down and gives no further problems. To try to stop this happening, apply a warm dry compress (e.g. a warm dry towel) 4 times daily for 20 minutes each time for the first 3 days after it is put in. This helps the vein to open and lets blood flow around the line.

**Thrombus (blood clot).** The insertion of any line into a vein causes damage to the vein wall. This damage can occasionally cause a clot to break off and block a large vein. Over time when a line is in a patient, a clot can attach to the end of the line.

**Burst line.** The nurses must ALWAYS use a 10ml syringe as a bigger or smaller one may damage the line.
What happens if my line bursts or breaks?
The part of the line most like to burst or break is at the end of the tubing near where the treatment is given. This can happen when too much pressure is put on the line. If this should happen the nurse should arrange for the line to be checked.

Can I have a bath or shower?
You can still shower or bath as long as the line is kept clean and dry. The midline or PICC line should not be immersed in water. If the dressing does become wet, inform the nurse as the dressing needs to be changed as soon as possible.

Can I eat and drink before a midline or PICC are inserted?
Yes you can eat and drink as normal.

What are the signs of an infection?
If you experience any of the following symptoms please inform the nurse as soon as possible as these could be signs of infection:

• pain
• swelling
• chills or sweats
• feeling generally unwell
• heat or redness around the cannula or up your arm
• raised temperature
How to take care of your line?

- try to keep your dressing **clean and dry**. A rubber glove or cling film can help with this when washing
- only touch the line when you need to
- do not pull the line or anything that may be attached to it
- take care especially when changing clothing
- report any problems as soon as possible.

If your line falls out completely:

- apply pressure over the entry site into your skin for 5 minutes using a clean tissue or swab
- elevate your arm
- make sure you put the cannula in the bin safely
- when the bleeding has stopped, apply a plaster
- contact the nurse as you may need a new cannula or IV device in before your next treatment

What does IV therapy at home involve?

This means a nurse visiting your home to give the intravenous medication. The time will be agreed between you and the nurse. You will be given written information and contact numbers as help is available 24 hours a day.

Additional Information

Your general practitioner (GP) will be aware that you are at home having your IV therapy. If you have been sent home from hospital then all the medication will be given to you before you go home. All your other medications will be dealt with by your GP.
Contact us:

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(7 days a week 8am-8pm)
Late call district nurses: 01706 766363 (8pm-8am)

Comments, compliments or complaints
We welcome any suggestions you have about the quality of our care and our services.
If English is not your first language and you need help, please contact the Ethnic Health Team on 0161 627 8770

For general enquiries please contact the Patient Advice and Liaison Service (PALS) on 0161 604 5897

For enquiries regarding clinic appointments, clinical care and treatment please contact 0161 624 0420 and the Switchboard Operator will put you through to the correct department / service

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