

PHERESIS CATHETER CARE

Section: Nursing Compliance: ACHC Infusion Pharmacy

ACHC Standards: Policy ID: NUR120 Effective: 1/1/21 Reviewed: 5/1/21 Revised:

Approved by, Title and Date Approved: Kathleen Patrick, President 1/1/21, 5/1/21

I. POLICY

To ensure safe and effective care, use and maintenance of pheresis catheters, only nurse clinicians with experience and/or training in the use of pheresis catheters shall perform heparinization of catheter, blood draw, and/or administration of infusion therapies through the pheresis catheter.

II. PROCEDURES

- A. The pheresis catheter is a central venous catheter tunneled under the skin and positioned in the superior vena cava. The catheter is used for therapeutic pheresis, stem cell harvest, lab draws and infusions once pheresis is completed
- B. Lumens will be flushed after each use. Lumens will be flushed every 72 hours with normal saline and instilled with 5000u/ml heparin when not in use. With a physician's order the nurse clinician may instruct the patient to flush/heparinize the catheter
- C. Lumens will be clamped when not in use.
- D. Strict aseptic technique and universal precautions are to be observed.
- E. Dressing changes will be completed every 72 hours and/or prn.
- F. Caps will be changed weekly and/or after each lab draw and prn.
- G. Heparinization Procedure:
 - 1. Gather Supplies
 - a. Gloves
 - b. (2) 10ml normal saline solution flush
 - c. (1) 10ml syringes
 - d. (2) 3ml syringes
 - e. Heparin 5000u/ml

- 2. Don gloves.
- 3. Withdraw prescribed amount of heparin into 3ml syringe.
- 4. Unclamp red (distal) port of catheter.
- 5. Wipe injection cap with alcohol swab using friction for 30 seconds.
- 6. Attach syringe and withdraw 5 ml of blood and dispose in appropriate container.
- 7. Clamp catheter. Cleanse junction and injection/end cap with alcohol for 30 seconds. Change injection/end cap and unclamp catheter.
- 8. Wipe injection cap with alcohol swab for 30 seconds.
- 9. Flush lumen with 10ml saline for routine flushing and 20ml following blood draws.
- 10. Wipe injection cap with alcohol swab for 30 seconds.
- 11. Instill prescribed Heparin 5000u/ml into the red port. Instill quickly to ensure it reaches the distal end of the lumen.
- 12. Clamp red port.
- 13. Repeat steps 2-9 for remaining lumens

Catheter	Size	Heparin Flush 5000u/ml
Vas-Cath	19cm	red 1.6ml blue 1.7ml
	23cm	red 1.8ml blue 1.9ml
Hickman Hemodialysis/ Plasmapheresis Catheter	13.5Fr/36cm	red 1.6ml blue 1.6ml
	13.5Fr/40cm	red 1.7ml blue 1.7ml
Quinton Mahurkar Catheter	11.5Fr/19cm	red 1.3 ml blue 1.4ml

- H. Procedure for drawing blood sample.
 - 1. Gather Supplies
 - a. (2) 10ml syringe

- b. (2) 10 ml normal saline solution flush
- c. Alcohol swabs
- d. Vacutainer
- 2. Don gloves.
- 3. Cleanse port with alcohol swab using friction for 30 seconds and attach vacutainer.
- 4. Withdraw 5 ml of blood and discard into sharps container.
- 5. Draw blood sample.
- 6. Clamp catheter. Cleanse junction and injection/end cap with alcohol swab for 30 seconds. Change injection/end cap, unclamp catheter.
- 7. Wipe port with alcohol swab for 30 seconds then flush with 10-20 ml normal saline solution.
- 8. Instill prescribed volume of Heparin 5000 u/ml into port with 3ml syringe, flushing quickly to ensure it reaches the distal end of the lumen
- I. Documentation in the patient's clinical record should include:
 - 1. Patient vital signs as applicable
 - 2. Access site condition location and type
 - 3. Procedure(s) performed
 - 4. Patient response to procedure
 - 5. Any assessment/observations and actions taken
 - 6. Communication with physician and/or other health care providers, if applicable
 - 7. Patient education