# Vascular Access Chart—Patients >2.3 kg (5 lbs)

**Catheter Type** | **Flush & Concentration** | **AMT** | **Frequency** | **Dressing Change Frequency** | **Positive Pressure Cap Change** | **Comments**
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1. **Peripheral IV**
   - 16-24 Gauge Angiocath
     - Normal Saline
     - 3ml
     - Every 8H
     - PRN if wet, loose, or soiled
     - n/a
     - Use positive pressure to lock
2. **PICC/Midline**
   - L-Cath
     - 1.2 FR (28 Gauge)
     - 1.9 FR (24 Gauge)
     - Kendall Argyle
     - 1.9FR dual lumen (24G)
     - Continuous heparinized solution (1unit/ml)
     - 1ml/hr Continuous infusion only
     - Change clear occlusive dressings weekly.
     - Change gauze and tape dressings every 2 days.
     - Change immediately.
3. **Non-Tunneled Catheters**
   - (Short-term CVCs)
     - e.g., Arrow/Cook
     - 3FR/4FR/5FR/7FR
     - Continuous heparinized solution (1unit/ml)
     - 1.5ml/hr in NICU
     - Change clear occlusive dressings weekly.
     - Change gauze and tape dressings every 2 days.
     - Change immediately.
     - Change Statlock with dressing.
     - Change positive pressure device every 72 hours.
   - Change positive pressure cap change every 24H
   - Change clear occlusive dressings weekly.
   - Change gauze and tape dressings every 2 days.
   - Change immediately.
   - Change Statlock with dressing.
   - Change positive pressure device every 72 hours.
   - Continuous infusions do not need positive pressure caps.
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   - Continuous infusions do not need positive pressure caps.
3. **Implanted Vascular Access Port**
   - Bard, Mediport, Port-A- Cath
   - P.A.S.-Port, Groshong Port
   - Heparinized Saline 10units/ml
   - 3ml
   - Every 24H
   - Change clear occlusive dressings weekly.
   - Change gauze and tape dressings every 2 days.
   - Change immediately.
   - Change Statlock with dressing.
   - Change positive pressure device every 72 hours.
   - Continuous infusions do not need positive pressure caps.
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   - Continuous infusions do not need positive pressure caps.
   - Continuous infusions do not need positive pressure caps.
4. **Tunneled Central Catheter**
   - Hickman, Broviac Single or Double Lumen
   - Heparinized Saline 10units/ml
   - 3ml
   - Every 24H
   - Change clear occlusive dressings weekly.
   - Change gauze and tape dressings every 2 days.
   - Change immediately.
   - Change Statlock with dressing.
   - Change positive pressure device every 72 hours.
   - Continuous infusions do not need positive pressure caps.
   - Continuous infusions do not need positive pressure caps.
   - Continuous infusions do not need positive pressure caps.
   - Continuous infusions do not need positive pressure caps.
   - Continuous infusions do not need positive pressure caps.

*SASH technique (S-Saline, A-Administer therapy, S-Saline, H-Heparin) and START/STOP technique (creates turbulence in lumen for improved clearance) should be used for all lines, except PIVs and Groshongs are not heparinized.

**Flush volumes may be as little as 3 times the priming volume of the catheter and add-on devices for fluid-sensitive patients. See specific policies for details.

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