Rapid Review: Removal of a PICC Line

Removal of a PICC
Once a PICC line is no longer needed, it will need to be removed to minimize the risk of infection and other complications.

To prevent air embolism, you must prevent air from entering the skin-to-vein tract by:

- Ensuring the insertion site is below the level of the heart during removal
- Having the individual hold his or her breath during removal
- Applying a petroleum-based ointment and an occlusive dressing after removal, and
- Instructing the individual to remain flat for 30 minutes after removal

To prevent catheter breakage:

- Use slow, intermittent traction when removing the catheter
- Apply warmth to relieve the vasospasm

If the catheter breaks or fragments of the catheter are retained after removal, apply a tourniquet near the axilla, making sure you can still feel the radial pulse. Transport the individual to an acute care setting.

Step-by-step procedure:

1) Verify the physician’s order for the procedure.

2) Cover a bedside table with a protective barrier.

3) Gather and assemble suture removal kit, sterile gauze, antiseptic cleansing agent, petroleum-based ointment, occlusive sterile dressing, and gloves.

4) Perform hand hygiene and put on gloves.

5) Ask the individual to extend his or her arm and turn his or her head away from the insertion site.

6) Remove the dressing in the direction of catheter insertion and remove any sutures that may be present.

7) Cleanse the insertion site with an antiseptic cleansing agent.

8) Ask the individual to take a deep breath and hold it.

9) Using slow, intermittent traction, remove the catheter.
10) Cover the insertion site with sterile gauze and have the individual breath normally. Apply pressure until bleeding has stopped.

11) Apply a small amount of petroleum-based ointment and an occlusive dressing.

12) Measure the actual length of the catheter and examine the tip of the catheter.

13) Dispose of the catheter in a biohazard container.

14) Document the date and time of the procedure, condition of the insertion site, condition and length of the catheter, individual’s tolerance of the procedure, and the signature and title of the clinician.