
Vascath Management Checklist

1. PURPOSE

This work instruction is a summary of actions describing Vascath insertion, care and removal as required for collection of Haemopoietic Progenitor Cells by Apheresis, (HPC-A).

2. ACTIONS

2.1 Vascath Insertion

- Confirm Theatre booking, note Hospital Consent Form for procedure to be completed by Treating Doctor in Theatre.
- Ward Doctor assesses patient to ensure they are haemodynamically stable with;
 - Hb >80g/L, WBC >0.5x10⁹/L, Plt >40 x10⁹/L, consult HSCT Physician if patient does not meet **ANY** of these criteria.
- Ensure correct Vascath size goes with the patient to Theatre:
 - Newborn - <10Kg (6.5Fr, blood flow 25-40ml/min)
 - Child 10 – 40 Kg (8.5Fr, blood flow 30-60ml/min)
 - Adolescent / Adult (11Fr, blood flow 50-100ml/min) / (14Fr, blood flow >100ml/min)
- Use **FEMORAL VEIN ONLY**, suture in place & fix with Opsite / Tegaderm

2.2 Vascath Care

- Medication Order;
 - 250IU of Heparin diluted to a total volume of 50mls with 0.9% Normal Saline (5IU/ml), run at rate of 2ml/hr down each Vascath Lumen.
- If delay in commencing infusion **OR** patient must be disconnected for any reason, Vascath must be strong-heparin locked with 1000IU Heparin diluted to 10mls with 0.9% Normal Saline (100IU/ml), volume to be instilled is located on each Vascath lumen.
 - Clearly label Vascath with "medication added label" to ensure removal of Heparin upon accessing line.
- Bed rest only until apheresis procedures are completed, frequently observe site according to age and level of function of patient.

2.3 Vascath Removal

- Ward Doctor reviews patient, if **plt <40**, consult HSCT Physician prior to removing Vascath.
- Using aseptic technique remove dressing, consider comfort first techniques using analgesia as required.
- Cut and remove stitches using stitch cutter.
- Apply consistent increasing pressure with gauze as you firmly remove the Vascath at a smooth steady pace. Increase pressure with gauze as vascath leaves the site, apply firm pressure for a minimum of 5minutes before checking the site, ensure there is no ooze and secure gauze with tegaderm.
- Minimum of 4hrs bed rest post removal of Vascath.

3. REFERENCE DOCUMENT

Central Venous Access Device Management. Royal Children's Hospital Policies and Procedures Manual. Policy Number: RCH0332. Version0. 2005.