Positioning the peripherally inserted central catheter (PICC)

Background: The advancement of technology and practice of vascular access demand knowledge of nurses. The professionals performing this procedure and those in charge of full care of patients regularly face situations in which clinical rationale should support the decision-making. The final positioning of the PICC tip is crucial and should be preferably in the superior vena cava. Very often it is necessary to intervene and pull it back after assessment by chest radiography. Although this recommendation is well established in the literature, sometimes, as occurred in the present patient, the catheter migrates, particularly when the tip is in the jugular vein, which is a position not suggested to administer medicines. The PICC was pulled back for approximately 2 centimeters and another X-ray was performed after 48 hours. The catheter migration to a central position was visualized, and the patient received maintenance saline solution during this period. The PICC is made of a flexible material (silicone) that may move inside the vessel, usually following the blood flow. Incorrect positioning may occur and requires monitoring by the nurse who inserted it in order to solve possible intercurrent events. In the case reported, the catheter flexibility was fundamental for its migration up to the vena cava, making its use safe.

REFERENCES