

PICC/Midline Insertion Record

Patient label _____

Prescribed By _____

Indication(s) for catheter: Anti-infectives Pain control Chemo/Biotherapy
 Hydration/IV fluids Parenteral nutrition

Medical records assessed for Medical diagnosis Current medications Current lab values

History of Mastectomy on ___side Broken clavicle _____side
 Paralysis _____side Dialysis shunt _____side
 Vasovagal reaction Previous central venous catheters Other _____

Allergies _____

Dominant hand Right Left Patient education and Information Booklet given Yes No

Consent Form signed Yes No (If education or signed consent is not possible, DO NOT proceed with insertion.)

Insertion Procedure

Date prescribed ____/____/____ Date inserted ____/____/____ Inserter _____

Time Out performed to verify Patient identification Correct side and site Signed consent
 Agreement on procedure to be performed Patient position

Pre-procedure medication _____

Upper arm circumference (3 inches above insertion site) _____

Check all that apply PICC Midline Single lumen Dual lumen 3 F 4 F 5 F 6 F

Basilic vein Cephalic vein Median cubital Brachial vein Right arm Left arm

Peel-away sheath Modified Seldinger Seldinger Ultrasound used Yes No

Anesthetic used Lidocaine 1% sq EMLA Cream Iontophoresis

_____ CM Manufactured length _____ CM trimmed off

_____ CM inserted into vein _____ CM left external (do not include catheter hub)

Catheter Brand _____ Lot # _____

Number of attempts: To access _____ To thread _____

Placed without difficulty Placed with difficult access Placed with difficulty threading Unable to place

Blood return Yes No Flushes easily Yes No

Comments _____

Initial catheter tip location Superior Vena Cava Brachiocephalic (Innominate) Subclavian Rt atrium
 Rt ventricle Other (describe) _____

Catheter repositioning required Yes No

Repositioning techniques _____

Repeat Chest xray Yes No Final tip location _____

External length after repositioning _____ Securement method Statlock Sterile tape Sterile wound closure strips

Dressing applied Gauze with tape Gauze with transparent membrane Hemostasis gel Transparent membrane only

Signs posted about no venipuncture or blood pressure on arm with catheter Yes No

Information sheet completed and given to patient including baseline arm circumference, external catheter length, and flush status

Yes No

Signature of Inserter _____