Insect infestation under PICC line dressing 2012.

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As intravenous nurses we strive to ensure that all our central catheter dressings are done in such a way that there is little chance of contamination of any kind.

Needless to say I was very worried to get the following call from a home care RN involved in a patient's care.

An elderly patient had been discharged home after 5 months hospital stay. He had a single lumen power injectable PICC line for antibiotic therapy. It was his second PICC line, as the first one had developed a weakness in one of the extension legs. This subsequently caused ballooning in the silicone and it eventually snapped and broke necessitating removal.

Both lines had been inserted by the Intravenous team at the patient's bedside with no complications noted.

Prior to discharge the dressing had been done using aseptic principles. The PICC line was covered with a regular clear occlusive dressing and a securement device.

A week later the home care RN went to the patient's home to change the dressing.

During the dressing change, as she removed the securement device she noticed movement on the skin and on the adhesive side of the device.

The site had not shown signs of infection, discharge or any other complication. She caught some of the moving "creatures" in a specimen bottle and completed the dressing – albeit rather flustered.

These "creatures" were sent for analysis at the laboratory the same day.

The laboratory consulted with infection control who then involved Environment Canada.

I was notified of the "alien" invasion and my first reaction was to get the line out! I consulted with the attending physician who was more surprised and intrigued than upset or worried.

My insistence at removing the PICC line was met with calm reasoning.

Was the patient symptomatic, was he showing signs of sepsis, what did the site and surrounding skin look like, had the experts identified the "alien"?

The physician was firm that the line did not need to be removed but I asked for an order to draw blood cultures from the line just in case. He was happy with this.

As all my information was second -hand from a home care RN, I went to see the patient myself.

The patient was as well as a recovering elderly patient could be. To satisfy my own anxiety I did a new dressing, and his PICC site was clean and dry with no signs of "life" at all under the dressing.

I attempted to draw aerobic and anaerobic blood cultures from the catheter, but could not draw blood back. I removed the positive fluid displacement cap and did the draw from the hub.

This worked perfectly.

On closer inspection I discovered a small tear in the top of the cap silicone seal. I replaced the cap.

This sparked a full investigation from Environment Canada, including examination of the supplies and equipment used to insert the PICC, our storage spaces, dressing supplies and techniques, the patient's home was visited and there were lots of questions asked.

I was notified 24 hours later that the "aliens" were in fact common household ants! How they got to be in the dressing is anyone's guess.

Forty-eight hours later I received confirmation that the blood cultures showed no growth at all.

At least we know the little creatures had clean feet!