Summary and Measures to Prevent, Detect and Treat Complications of Central Lines for Neonates

NEWBORN < 1kg

Potential Problems	Possible Causes	Practice Recommendations				
Difficulty in successfully	Clamped or kinked line.	Secure and tape the line carefully after the insertion. Check integrity of catheter prior to use.				
flushing catheter	Occluded line.	Identify incompatible solutions or blood clot. Clear clotted or sluggish lines in accordance with hospital policy for catheter maintenance.				
	Flushing with a small syringe against resistance.	Use 10ml syringes only in order to avoid excessive pressure. However use the volume of flush in accordance with hospital policy.				
Catheter damage	Heat from storage causing degradation of catheter material.	Store in accordance with manufacturer's recommendations.				
	Accidental damage e.g. stretching or during taping.	Handle catheter carefully when fixing or taping.				
Sepsis	Insertion site infection. Line sepsis.	Use a strict aseptic technique during placement. If dressing changes are needed use a strict aseptic technique. Limit access to line.				
	• Poor site care.	Observe the catheter insertion site for signs of inflammation, phlebitis, erythema, induration. Treat in accordance with hospital policy.				
Malposition pericardial tamponade	The catheter may migrate either inwardly or outwards.	 Confirmation of correct tip positioning into superior vena cava, (upper portion of the distal third) or inferior vena cava prior to the An X-ray or ultrasound may be used in accordance with hospit policy, to diagnose the problem before treatment. Treat in accordance with hospital policy. 				
	Catheter tip is not in central position after placement.	Extravasation treatment in accordance with local guideline.				
Extravasation	Damaged catheter. Thrombosis blocking flow and adding pressure at the terminal tip. Phlebitis with swelling, creating added pressure.	Remove the line or treat in accordance with hospital policy.				
Difficulty in removing catheter	Venospasm.	Remove slowly and do not apply pressure to the vein wall. The use of a warm compress may help.				







Neonatal & Paediatric Catheters

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NEWBORN < 1kg 24G Nutriline

Peripherally inserted catheter with Split Needle

NEWBORN < 1kg

CHILD

> 1yr

24G ECCManufactured from soft traditional silicone

NEWBORN < 1kg

CHILD > 1yr

28G Premicath has been designed specifically for use with babies under 1kg who require the smallest catheters. As with our other polyurethane catheters Premicath utilises thin-wall technology to enable optimum flow rates to be achieved.

Clinicians have the choice of either a small breakaway needle introducer, which is ideal for use in the tiniest of veins, or the slightly larger Neocath Split peelable cannula which provides the added safety and security of advancing the catheter through plastic, and the ability to completely remove the cannula after line insertion.

Features and Benefits

Polyurethane catheter

remains firm during insertion but softens at body temperature, minimising vessel trauma and enhancing stay time.

X-ray opaque

for accurate tip location without additional contrast medium.

Catheter graduations every cm aid accurate tip placement.

Small 28G catheter

for the smallest veins.

One-piece catheter construction simplifies insertion.

Integral extension with wing

permits secure catheter fixation, reducing the risk of mechanical phlebitis.

Choice of introducer:

visibility of flashback.

- Neocath Split introducer unique split cannula, allows easy removal from the PICC line, and eyelet gives rapid
- Small 24G breakaway needle for small veins.



Ordering Information									
Product Codes	Description	Catheter				Introducer		Unit	
		Size (Fr)	Length (cm)	Priming Volume (ml)	Flow Rate (ml/min)	Туре	Size	of Sales	
1261.203	Premicath (28G) with Split Needle	1	20	0.09	0.7	Split Needle	24G/ 19mm	10	
1261.205	Premicath (28G) with Neocath Split	1	20	0.09	0.7	Neocath Split	22G/ 20mm	10	

24G Nutriline's one-piece catheter construction provides clinicians with a high degree of safety. The peelable introducer cannula enables the catheter to be safely advanced through plastic. Additional security is provided by a small primary wing to help minimise the risk of catheter movement and kinking. As with our other polyurethane catheters Nutriline utilises thin-wall technology to enable optimum

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Features and Benefits

Polyurethane catheter

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X-ray opaque

for accurate tip location without additional contrast medium.

Catheter graduations every cm aid accurate tip placement.

One-piece construction simplifies insertion.

Integral extension with wing permits secure catheter fixation, reducing

Slide clamp

for line management and safety.

the risk of mechanical phlebitis.

Split Needle

VYGON

20G break needle for vein.



Ordering Information								
Product Codes	Description	Catheter				Introducer		Unit
		Size (Fr)	Length (cm)	Priming Volume (ml)	Flow Rate (ml/min)	Туре	Size	of Sales
1252.30	Nutriline (24G) with Split Needle	2	30	0.12	5.0	Split Needle	20G/ 25mm	10



24G ECC was Vygon's first purpose-designed neonatal PICC line. The soft silicone catheter has depth graduations to aid insertion, and sits comfortably in the vessel during use. Its two-part design allows the use and safe removal of the introducer winged needle.

The ECC catheter is probably the most well recognised paediatric catheter in the world today, enjoying over 25 years of unrivalled success.

Features and Benefits

Soft biocompatible silicone biocompatible silicone

X-ray opaque

for accurate tip location without additional

contrast medium.

Catheter graduations every cm aid accurate tip placement.

Integral extension with wing

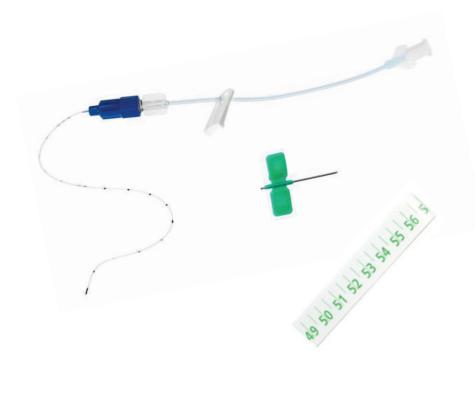
permits secure catheter fixation, reducing the risk of mechanical phlebitis.

Detachable hub

allows complete removal of introducing needle.

Different length catheters

ensure accurate tip placement.



ordering Information									
Product Codes	Description	Catheter				Introducer		Unit	
		Size (Fr)	Length (cm)	Priming Volume (ml)	Flow Rate (ml/min)	Туре	Size	of Sales	
2184.00	E.C.C (24G) with Wing Needle	2	30	0.12	3.0	Wing Needle	19G/ 27mm	30	
2184.005	E.C.C (24G) with Wing Needle	2	50	0.16	2.0	Wing Needle	19G/ 27mm	30	

