PATIENT NAME: _____

DOB: _____

HRN: _____

MEDICAL DIRECTIVE: Administration of Heparin for the Purpose of Maintaining Patency of Dormant Central Vascular Access Devices

DEPT. Hospital Wide   **SUPERCEDES:** Aug. 03 / undated update

ADMINISTRATIVE AUTHORITY: Medical Advisory Committee   **DATE: SEPT 12, 2019**

NAME AND DESCRIPTION OF TREATMENT:

Nurses and/or Medical Radiation Technologists (MRT) in CT, MRI, IR and Radiation Department may identify the need for and administer Heparin 100 units/mL to flush a central vascular access device (CVAD) to maintain patency as outline below.

NEONATES AND CHILDREN (up to 18 years of age)

Type of Line Catheter	Weight	Dose of Heparin	Heparin (100units/mL)	Total Volume	Minimum Frequency	Maximum Frequency
Tunneled and non-tunneled Central venous catheter (CVC) **Peripherally inserted central catheter (PICC)**	Less than or equal to 10 kg	10 units/kg	Dilute required amount of heparin 100 units/mL with 0.9% sodium chloride (NS) to total volume of 1 mL (eg. Patient weight = 5 kg Using a 1 mL syringe for accuracy, draw up 50 units heparin (0.5 mL) and dilute with 0.5 mL of NS to equal a total volume of 1 mL then transfer to 5 mL syringe)	1 mL each lumen	Every 24 hours	Three times per day if less than or equal to 10 kg
	Greater than 10 kg	100 units	100 units/mL	1 mL each lumen	Every 24 hours	Three times a day if receiving systemic anti-coagulation
Subcutaneous Port	Less than or equal to 30 kg	10 units/kg	Dilute heparin 100 units/mL with 0.9% sodium chloride (NS) to a total volume of 3 mL (eg. Patient weight = 5 kg Using a 1 mL syringe for accuracy draw up 50 units heparin (0.5 mL) transfer to 5 mL syringe and dilute with 2.5 mL of NS to equal a total volume of 3 mL)	3 mL each lumen	Every 4 to 6 weeks	
	Greater than 30 kg	300 units	100 units/mL	3 mL each lumen	Every 4 to 6 weeks	

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ADULT (18 years of age and older)

Heparin Flush 100 units/mL	Frequency of Flush for Dormant Line
PICC lines - 3 mL (300 units) or - 5 mL (500 units) with extension tubes)	PICC - Weekly
Tunneled - 3 mL (300 units)	Tunneled weekly
Implanted - 5 mL (500 units)	Implanted monthly
Percutaneous - 2 mL (200 units)	Percutaneous - weekly

INDICATIONS FOR USE OF DIRECTIVE:

- Post insertion of CVAD in Imaging Services
- Unused lumens of CVAD to be routinely flushed (frequency as above).
- After intermittent use of CVAD port of otherwise dormant lumens.

CONTRAINDICATIONS:

- Allergy to heparin
- CVAD not patent
- History of heparin induced thrombocytopenia (HIT)

PERSONNEL APPROVED FOR IMPLEMENTATION OF DIRECTIVE:

- All Nurses and CT, MRI, IR and Radiation MRTs

CO-IMPLEMENTERS:

- None

EDUCATIONAL REQUIREMENTS FOR PERSONNEL APPROVED TO INITIATE DIRECTIVE:
1. Attendance at a CVAD education session specific for your designation
2. Completion of advanced practice skills requirements for Central Vascular Access Devices.
3. Attainment of 90% on yearly competency quiz regarding the use of medical directives on LMS
4. Attainment of 100% on yearly competency quiz on LMS that is specific to your designation, regarding the use of CVADs.

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Regional Health Centre

Medical Directive

Page 3 of 3

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DOCUMENTATION AND COMMUNICATION:

- A copy of the Medical Directive # HW- 7 will be placed in the Physician's Order section on the patient chart with the name, status, and signature of the implementer, the name of the authorizing physician, the date and time of implementation.
- Documentation of the assessment of the patient and the CVAD.
- Documentation of time, route and dosage of administration by implementer on Medication Administration Record.
- Documentation of assessment and flushing of CVAD on the Interdisciplinary Progress Record or via electronic health record (EMR).
- Document the notification of physician in the Patient's health record.

PHYSICIANS TO WHOM DIRECTIVE APPLIES:

All physicians with privileges at Royal Victoria Regional Health Centre

Name: _____Signature: _____Date: _____Time: _____