

## Checklist for Daily Maintenance of Central Vascular Catheters

Hospital  Unit No  Ward / Bed no.

Surname  Other names

NID  Date of insertion  Site

Inserted by Dr  Ultrasound guidance: YES / NO

Indication:  Inadequate peripheral venous access  
 Use of vasopressors, hyperosmolar solutions, chemotherapy agents, and/or TPN  
 Hemodynamic monitoring  
 Procedures like hemodialysis, plasmapheresis, ECMO and/or thrombolysis

Type:  Temporary CVC  Non-tunneled temporary hemodialysis catheters  Tunneled catheter  
 Port-A-Cath  UAC / UVC  Hickman  PICC

Date							
Day	1	2	3	4	5	6	7
Is the indication for CVC still maintained? YES / NO							
Type of sterile dressing: GAUZE / CLEAR							
Date is present on dressing: YES / NO							
Dressing has been changed as per SOP (i.e., every 48h if gauze, every 7d if transparent and more frequently only if soiled)							
Are there any signs of local infection (redness / purulence / pain)? YES / NO							
Is the dressing soiled or loose? YES / NO							
IV tubing / administration set is labeled with date: YES / NO							
IV tubing / administration set is changed every 24 hours for TPN / lipid infusion / blood products or at least every 4 days for other fluids given to immunosuppressed patients (including NICU) or at least every 7 days in other cases: YES / NO							
All IV tubing / stopcock ports have a sterile, dead-end cap in place when not in use: YES / NO							

- *If CLABSI is suspected, take 2 blood cultures, one through the central line and one through periphery, and consider removing the CVC and sending tip for culture if clinical situation allows.*
- *If CVC has been placed in emergency, line should be changed within 48hrs.*
- *Remember to scrub the hub for 15-30 seconds and dry for 30 seconds before access.*
- *Use the right PPE during dressing changes or access (check the corresponding SOP for type of PPE).*