

Understanding your HICKMAN CATHETER

Patient Information

Dacron cuff

What is the purpose of this information sheet?

This information sheet has been written by patients, members of the public and health professionals. We hope it will be useful for you, your family/Whānau, friends and carers in providing all the information you will need about the Hickman® Catheter you are having inserted for treatment. It outlines:

- What is a Hickman® Catheter?
- Why do we use a Hickman® Catheter?
- Do I have alternative options to a Hickman® Catheter?
- Are there any risks if I have a Hickman® Catheter?
- How is my Hickman® Catheter inserted?
- Where is my Hickman® Catheter placed?
- What should I expect after insertion of my Hickman® Catheter?
- How do I care for my Hickman® Catheter?
- What are my responsibilities?
- Identifying and resolving problems with my Hickman® Catheter
- Important phone numbers



What is a Hickman® Catheter?

A Hickman® Catheter is an intravenous (IV) tube made of soft silicone.

It may have either two or three tubes (lumens) which lie inside a casing.

The ends of each lumen have a hub which is coloured either RED, WHITE and BLUE

Generally the RED lumen is used to take blood samples and give blood

products. The WHITE / BLUE lumens are used for medications and IV fluids. On the end of each lumen there is a positive displacement device (needless connector) this prevents any backflow of blood into the Hickman® tip causing it to block. The Hickman® catheter has a clamp to prevent air entering the catheter when your needless connectors are changed.

Why do we use a Hickman® Catheter?

- It allows us to give all your IV medications and to take your blood samples.
- It reduces the need to insert needles into your arm veins making treatments more comfortable for you.
- It can remain in place for up to a year or more.
- It gives you freedom to use your arms normally in all your daily activities.
- It allows us to give you more than one drug at a time without the drugs mixing before they reach your blood stream.



There are other types of intravenous catheters which can be used. Please feel free to discuss the choice of catheter with your doctor or nurse.

Clamps

Are there any risk if I have a Hickman® Catheter?

There are risks associated with any type of catheter we may need to use. The risks relating to the insertion of the Hickman® Catheter will be discussed with you on the day of insertion. This is because the specialist staff in the Radiology Department have the specialist knowledge about these risks. You still always have a choice to change your mind.

Risks with having a Hickman® Catheter include a change in the positions of the catheter, infection or blood clot. Addressing these risks is covered in this information sheet.

How is my Hickman® Catheter inserted?

Before having the Hickman® Catheter inserted, you need to drink 1-2 litres of fluids. Alternatively you may be given intravenous fluids through a small cannula which is placed in an arm vein. The reason for this is to increase the fluid in your blood making it easier to insert the catheter. You will be asked to put on a gown.

The Hickman® Catheter is inserted in the Radiology Department by a specialist doctor called a Radiologist. This may be done as a day procedure or as an inpatient.

The procedure will be explained to you before obtaining your written consent. It takes 20-30 minutes to insert the catheter. Once in place the Hickman® Catheter is flushed to make sure it is working properly.

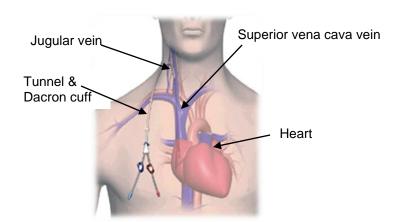
You will be asked to lie down on an x-ray table. The staff will wash their hands and dress in a sterile gown, hat, gloves and mask. The side of your chest where the Hickman® Catheter will be inserted and the neck area will be cleaned with an antiseptic solution then cover with sterile sheets.

Local anaesthetic will be injected to numb the area before the Hickman® Catheter is inserted. The Hickman® Catheter will have a stitch around it to hold it in place. You will also require 2-3 stitches at the side of your neck.

After the Hickman® Catheter is inserted the x-ray machine will be moved over your chest to take an x-ray. This is done to ensure the Hickman® Catheter tip is in the correct position in your chest vein. The correct tip position will be confirmed by a radiologist.

Your chest will be cleaned and a sterile dressing placed over the insertion site and the lumens secured with a securement device. A sand bag may be placed on top of the insertion area to put pressure on the site. This helps reduce any bleeding. This remains in place for a least an hour following the procedure.

Where the Hickman® Catheter is placed:



This is the room in Radiology where your Hickman® Catheter is inserted:



What should I expect after insertion of my Hickman® Catheter?

You may have some bruising around the insertion area and mild discomfort once the local anaesthetic has worn off.

Pain relief will help relieve any discomfort.

Blood may ooze from the insertion site. The nursing staff will monitor this.

Your Hickman® Catheter will be assessed 24 hours following the insertion for any bleeding or bruising at the insertion site. It will be redressed if necessary. The area above the insertion site will be checked for swelling, redness or pain.

The stitches on your neck are removed 10 days following the insertion of your Hickman® Catheter and the stitches at the catheter insertion site on your chest are removed three weeks after insertion.

Your Hickman® Catheter will be redressed weekly, the positive displacement devices are changed and the catheter flushed. This will often coincide with a visit to the hospital.

This is important and is done to help prevent infection and to keep your Hickman® Catheter working properly.

Women only- you may continue to wear a bras or a supportive camisole. Either of these will not interfere with the function of the catheter.

How do I care for my Hickman® Catheter?

Protecting your Hickman® Catheter from getting an infection is important

- Always wash your hands before touching your Hickman® Catheter.
- Try not to get water directly onto the dressing. Always keep the catheter lumens above your waist line.
- Do not bath or swim while you have your Hickman® Catheter in place.
- Avoid pulling on your catheter or doing activities that could damage or dislodge it.
- Ensure your Hickman® Catheter is always well secured and protected.
- Never use scissors, pins or needles around your catheter.
- Make sure your Hickman® Catheter is clamped at all times when not in use.
- Always keep your appointments for your catheter dressing.
- Let us know if you are unable to make appointments.

Your Responsibility

Each day, check your Hickman® Catheter site for any problems such as pain, redness or leaking. If you feel unwell or a problem arises and you are concerned, contact your treatment centre immediately (refer to contact numbers on back page).

Report anything you feel is not right with your catheter.

Remember: it's a team effort when managing your Hickman® Catheter.

Always wash your hands before touching your Hickman® Catheter.





Identifying and resolving issues with my Hickman® Catheter

Problem	Possible Cause	Action				
Catheter Site						
Pain or oozing Redness Swelling	Could be infection	Contact your treatment centre				
Feeling unwell						
□Temperature, cough Increased heart rate Chills and shaking	Sign of infection	Contact your treatment centre				
Swelling						
☐ Of the upper arm Pain in the neck and shoulder Neck Hand mottled	Sign of clot in vein	Contact your treatment centre				
Catheter						
Abnormal feeling at insertion site Cuff seen at insertion site Tingling and pain	Catheter may have come out of position	Contact your treatment centre				
Catheter falls out	<u> </u>					
		Hold breath and place fingers over the incision on your neck, press firmly 5-10 minutes with head turned towards that side. Contact your treatment centre				
Break or cut in catheter						
		Clamp or tie your catheter immediately between split and where your catheter comes out of your body. Contact your treatment centre.				
Breathing problems						
Shortness of breath Chest pain	May have clot in lung Air may have entered the vein	GO IMMEDIATELY TO THE EMERGENCY DEPARTMENT OR YOUR COMMUNITY HOSPITAL				
If your catheter doesn't feel or look right, please contact your treatment centre.						

IMPORTANT PHONE NUMBERS

For advice or help, contact your treatment centre by calling one of the numbers below:

Your ward/department Nursing Staff must complete this section for you.				
Ward/Department:	_ Contact phone number:			
Additional Information:				

Always keep this information sheet with you and bring it to any emergency appointment
