Pediatric Vascular Access Devices

Catheter Type	Description	Placement	Indications	Comments	Special Considerations
Peripheral catheters (PIV)	Teflon or polyurethane catheters 3/4"-1.5" in length Pediatric gauge sizes: Small infant: 24, 26 gauge Large infant or school age child: 22, 24 gauge Adolescent: 20, 22, 24 gauge	Percutaneous insertion Insertion sites: Superficial veins of the hand, forearm, feet or scalp	Intravenous fluids, intravenous drugs, PPN, blood, blood products	 Mean dwell time to complication: ≈ 48 hours Change site at first sign of phlebitis or infiltration Consider CVC if IV therapy is required for >1 week, especially for administration of hypertonic drug solutions i.e. >600 mOsm/L or vesicant drugs 	 Select catheter diameter size smaller than selected vein: Consider use of topical anesthetic to reduce insertion pain and anxiety Determine best location for insertion (i.e. patient's room or treatment room) dependent on patient/family considerations
Midline catheter	Polyurethane or silastic catheters 3"-8" in length	 Percutaneous insertion Insertion sites: Medial cubital, cephalic, basilic, brachial veins at or above the antecubital space. Tip location: Cephalic, basilic, brachial or axillary vein 	Intravenous fluids, intravenous drugs of isotonic or near isotonic admixtures for up to 4 weeks	Not recommended for administration of parenteral nutrition due to risk of upper extremity thrombosis	

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Catheter Type	Description	Placement	Indications	Comments	Special Considerations
Peripherally inserted central catheter (PICC)	 Polyurethane or silicone catheter Single or double lumen 20 cm or longer depending on patient size 	 Percutaneous insertion Insertion sites: Medial cubital, cephalic, basilic, brachial veins at or above the antecubital space, external jugular or saphenous vein. Tip location: Distal SVC or above the diaphragm in the IVC 	 All IV drugs, solutions, blood or blood products Short-term IV therapy (<30 days) or long-term therapy (>30 days) Acute, alternate or home care settings 	 Placed at bedside, special procedure room, operating room, or interventional radiology suite Requires local anesthesia or conscious sedation X-ray confirmation of appropriate tip position required before use 	Lowest insertion complication risk of CVCs Lowest infection risk of CVCs
Non-tunneled central venous catheter	 Polyurethane or silicone catheter Single, double, triple lumen Antibiotic or antiseptic coated catheter available 8 cm or longer depending on patient size 	 Percutaneous insertion Insertion sites: Subclavian, internal jugular or femoral vein. Tip location: Distal SVC or above the diaphragm in the IVC 	 All IV drugs, solutions, blood or blood products Short-term IV therapy (<30 days) Acute care settings 	 Placed in special procedure room, operating room, or interventional radiology suite Requires local anesthesia or conscious sedation X-ray confirmation of appropriate tip position required before use 	 Antibiotic or antiseptic coated catheter recommended Higher risk of insertion complication than PICC Highest infection risk of CVCs

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Catheter Type	Description	Placement	Indications	Comments	Special Considerations
Tunneled central venous catheter	Silicone catheter Single and double lumen	Surgically implanted Insertion site: Percutaneous insertion into the subclavian, internal jugular, or femoral vein. Extended catheter segment tunneled subcutaneously with dacron cuff positioned within ≈ 2 cm of the exit site Tip location: Distal SVC or above the diaphragm in the IVC	All IV drugs, solutions, blood or blood products Long-term IV therapy (>30 days) Acute, alternate or home care settings	 Placed in special procedure room, operating room, or interventional radiology suite Subcutaneous cuff secures catheter in place and inhibits migration of organisms when ingrown Fibrotic tissue growth around cuff complete after ≈2 weeks Repairable Requires minor surgical procedure for removal 	Sterile dressing changes recommended until cuff is ingrown to reduce risk of tunnel infection Higher risk of insertion complication than PICC Lower rate of infection than non-tunneled CVC
Implanted port	 Metal or plastic reservoir with self-sealing septum implanted into subcutaneous pocket on upper torso or arm Single and double lumen Accessed by needle through intact skin 	 Insertion site: Percutaneous insertion into the subclavian, internal jugular, antecubital or brachial vein Septum placed over rib or muscle in arm so that septum can be stabilized for needle access Tip location: Distal SVC or above the diaphragm in the IVC 	Long-term IV therapies Acute care or home care setting	 Placed in special procedure room, operating room, or interventional radiology suite No external segment for breakage Requires minor surgical procedure for removal 	 Non-coring needle required for access May not be appropriate for long term PN access due to needle access requirement Higher risk of insertion complication than PICC Lower rate of infection than non-tunneled CVC or tunneled catheter

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For Further Reading

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