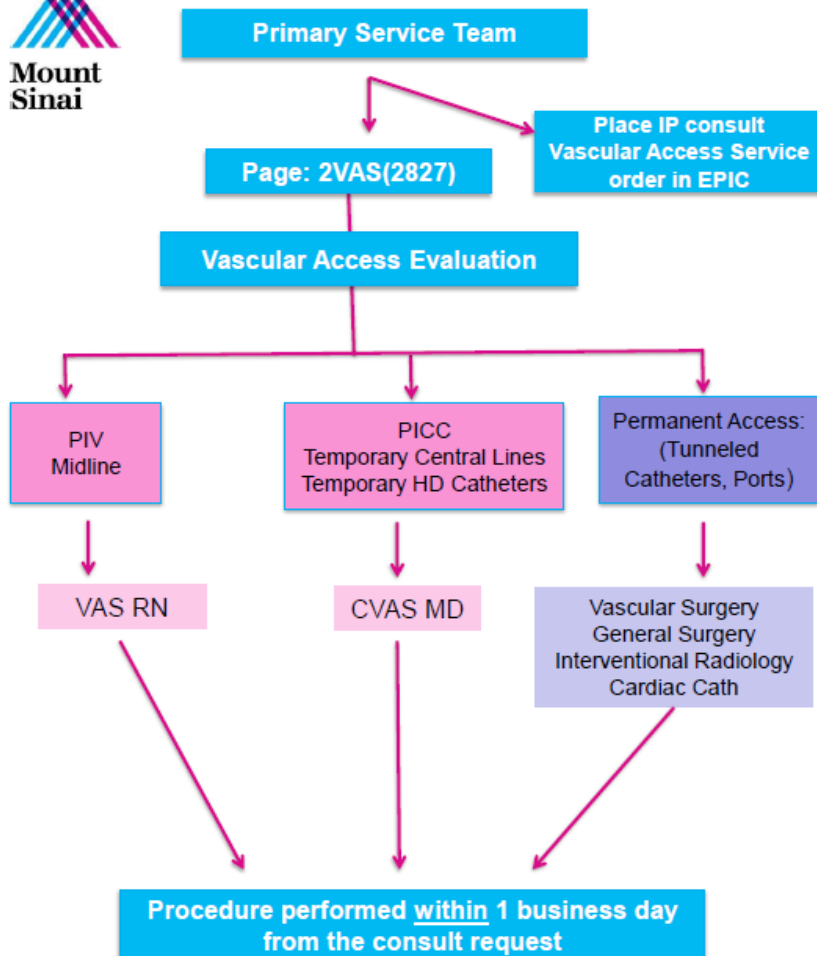


## Mount Sinai Hospital Vascular Access Service (VAS)

March, 2017



## Mount Sinai Hospital Vascular Access Guidelines

March, 2017

| Location                                  | Device Type                                                                                                                                                                                                                                                | ≤ 4 days | 5-28 days                                                             | ≥ 31 days                                                                                     |
|-------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------|-----------------------------------------------------------------------|-----------------------------------------------------------------------------------------------|
| Bedside, Line Team Room, ED or Outpatient | Peripheral IV Catheter<br>(U/S guided as needed)<br>Not to be used for routine blood drawing                                                                                                                                                               |          |                                                                       |                                                                                               |
|                                           | Midline Catheter<br>(Non-vesicant, GFR >45, platelets >50, not to be used on same arm as special precaution i.e., fistula, mastectomy)                                                                                                                     |          | Preferred to PICC if proposed duration ≤ 28 days                      |                                                                                               |
|                                           | Non-tunneled / Acute Central Venous Catheter<br>(all infusions, blood and blood products and vesicants,) platelets >50, Negative blood culture, afebrile for 24 hours                                                                                      |          | Preferred to PICC for use ≤ 14 days in acutely critically ill patient |                                                                                               |
|                                           | PICC<br>(all infusions, blood and blood products, vesicants, not to be used for routine blood drawing,) GFR >45, platelets >50, Negative blood culture, afebrile for 24 hours. Not to be used on same arm as special precaution i.e., fistula, mastectomy) |          |                                                                       | Proposed duration is ≥ 6 days and preferred to tunneled catheters for durations of 15-30 days |
| OR or IR                                  | Tunneled Catheter<br>(all infusions and vesicants, Negative blood culture and afebrile for 24 hours CKD and ESRD)                                                                                                                                          |          |                                                                       | No preference if use is ≥ 31 days                                                             |
|                                           | Port/Implantable port<br>(all infusions, blood and blood products, vesicants, negative blood culture, afebrile for 24 hours. Preferred line for Oncology patients)                                                                                         |          |                                                                       |                                                                                               |

\* Adapted from Michigan Appropriateness Guide for Intravenous Catheters (MAGIC), Annals of Internal Medicine Vol 164 No 6, Sept 15, 2015