USE OF BLIND PLACEMENTS OF PERIPHERALLY INSERTED CENTRAL CATHETERS IN BURN PATIENTS - A RETROSPECTIVE ANALYSIS (238)

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Introduction: Safe and reliable vascular access is essential for the treatment and care of burn patients. Peripherally Inserted Central Catheters (PICCs) are widely used for various groups of critically and chronically ill patients. However, the information about PICC use and management for burn patients is limited.

Methods: This institutional review board-approved retrospective cohort chart review included all burn patients at a single center who received one or more PICCs (n=106). Blind PICCs were placed by an intravenous clinical nurse specialist (IV CNS). Data were collected from PICC records and included general demographics, as well as PICC insertions, management, and removals.

Results: About 42% of cases in cubital, 39% of in basilar, 14% of in cephalic veins, 3% brachial veins were accessed. Routine PICC nursing care was practiced by gauze dressing (75%). About 62% patients had their dressing changed every 48 hours and 37.5% of dressing changed every day. The average length of time each PICC remained in place was 18.5 days. About 16% of cases were identified as PICC related complication: two occlusions (2%), one edema at insertion place (1%), and 12 cases of mechanical phlebitis.

Conclusion: Although PICCs are adequate for burn patient care, there are no protocols or guidelines covering rational and safe usage of PICCs. Standard guidelines for burn patient specific - PICC placement and management should be developed.