Insertion of PICC via the scalp veins are feasible in neonates and not associated with higher complication rates compared with insertions via other sites” Callejas et al (2015).

Abstract:

Objective: To describe the use and complications of peripherally inserted central catheters (PICC) via scalp veins in neonates.

Methods: A retrospective review of neonates who had PICCs inserted, between January 2010 and June 2013, in the NICU at Children’s and Women’s Health Centre of British Columbia.

Results: During the study period, 689 PICCs were inserted over a total of 46728 NICU patient days. The PICC insertion sites were: scalp veins (69), upper limb veins (471) and lower limb veins (149). The mean catheter durations were 17 days, 19 days and 18 days for PICCs inserted through scalp, upper limb and lower limb veins, respectively. The complication rates were 23%, 23% and 15% for insertion via scalp, upper and lower limb veins, respectively. Centrally placed PICCs at the time of insertion were more likely to remain in situ for longer than one week (p < 0.001). The incidence of central line-associated blood stream infection
was 4.4, 6.4 and 3.4 per 1000 catheter days, respectively, for scalp, upper and lower limb PICCs.

Conclusions: Insertion of PICC via the scalp veins are feasible and not associated with higher complication rates compared with insertions via other sites.

Reference:


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