Abstract:

Traditionally, nurses placing peripherally inserted central catheters, (PICCs) must obtain radiological clearance before utilizing the catheter. At West Virginia University Hospitals, this clearance is performed by a radiologist. The PICC team at WVUH felt strongly that this process could be expedited if they were able to interpret the PICC placements themselves. They took a proactive approach and attended specialized training in the radiological interpretation of PICC tips. They then utilized the West Virginia State Board of Examiners for Registered Nurses decision making algorithm to determine that this practice would be within their scope of practice. The team chose to conduct a retrospective study of cross-sectional data to determine if their radiological interpretations were as accurate as the radiologists. A two-tailed t-test was done to determine if they could clear the PICCs in a more timely fashion than awaiting clearance from the radiologists. The premise of reviewing this data was to ensure that their accuracy and timeliness would have a positive impact on patient care delivery.