

“This descriptive study adds to the evidence for midline catheter use and provides an impetus for randomized controlled trials on midline catheters and infusates. We’ll continue to monitor this practice for safety and efficacy.” Dumont et al (2014).

Reference:

Dumont, C., Getz, O. and Miller, S. (2014) Evaluation of midline vascular access: A descriptive study. Nursing. 44(10), p.60-66.

Midline catheter evaluation illustrates reliable vascular access [@ivteam #ivteam](http://ctt.ec/xa4YG+)

Click To Tweet

Abstract:

Background and significance: Vascular access is a mainstay of therapy in acute and chronic care. The use of midline catheters has been controversial, but little research-based evidence shows its benefits and risks. The nursing vascular access team (VAT) in a 400-bed community hospital was asked to provide this service. To ensure the best care for patients, the development of the midline service was approached carefully by designing a study to track the outcomes. What’s the incidence of complications for midline catheters? What’s the average dwell time for midline catheters? What are the relationships between infusates and complications? What are the relationships between dwell times and complications? This was a prospective descriptive study. The sample was a convenience sample of patients who had midline catheters inserted by the VAT nurses. Data on 345 midlines were collected. The average dwell time for the midlines was 6.9 days (SD, 6.1). The rate of phlebitis among 345 patients was 2% (7 cases), infiltration rate, 1.7% (6 cases), and thrombosis, 1.7% (6 cases). Two bloodstream infections occurred in 2,304 line days, or a rate of 0.9 per 1,000 line days. No relationships were identified between infusates or length of dwell and complications. In this study, the midline catheter was determined to provide stable and safe vascular access. The complication rate wasn’t greater than that of other vascular access devices. This descriptive study adds to the evidence for midline catheter use and provides an impetus for randomized controlled trials on midline catheters and infusates. We’ll continue to monitor this practice for safety and efficacy.

Thank you to our partners for supporting IVTEAM

