

VANDERBILT UNIVERSITY

MEDICAL CENTER

Protocol: Adult Burn Central Line Protocol

Category

Clinical Practice

Approval Date

September 28, 2020

Due for review

September 28, 2022

Applicable to

VUH Children's DOT VMG Off-site locations VMG VPH Other

Team Members Performing

All faculty & staff Faculty & staff providing direct patient care or contact MD House Staff APRN/PA RN LPN
 Other:

Content Experts

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I. Population:

The following protocol applies to burn patients in the Burn ICU.

II. Considerations

- All non-tunneled lines placed at an outside facility should be considered for removal at the earliest opportunity.
- Ideally central lines will be inserted in non-burned areas
- All central lines should be removed at the earliest opportunity once they are no longer clinically indicated.
- When there are signs of active infection around the central line insertion site, the line should be removed as soon as possible.

III. Interventions

Line inserted through burned skin:

- When it is necessary to insert lines through burned skin, these lines will be rotated by a new stick every **3 DAYS**.
- Dressing: If standard CHG dressing will not remain intact, cover insertion site with Hibiclens soaked fluff. Change every two days or PRN per Vanderbilt policy CL 30-07.11.

Femoral lines:

- Femoral central lines not inserted through burned skin will be rotated by a new stick every **5 days**

Other lines:

- All other central lines (including PICC lines) will be rotated by a new stick every **7 days**