

Central Venous Line (CVL)

What is a CVL?

A central venous line (CVL) is a long, thin tube that is tunneled and has a cuff that keeps the line from being pulled out. This line may also be called a Broviac or Hickman.

These types of lines can stay in place for a long time. They have many uses. They may be used to:

- Give fluids.
- Give medicines.
- Give blood products.
- Give IV nutrition.
- Draw blood for lab tests

How is it put in?

A CVL is most often put in place in the operating room or Interventional Radiology.

- The provider makes two small cuts in the skin. One cut is at the neck and the other is near the middle of the chest.
- The CVL tube is tunneled. It goes under the skin from the cut in the chest to the neck.
- The area where the CVL goes under the skin is called the tract. The cut in the chest is called the catheter exit site.
- An x-ray is taken to make sure that the CVL is in the right place.

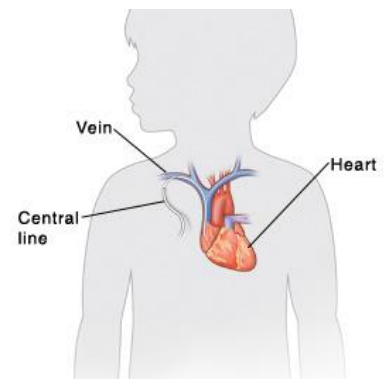
Possible problems

- There is a chance of getting an infection.
- If blood clots at the tip of the CVL or the vein around the line, it makes the line hard to flush.
- If there is a break in the line it will need to be repaired or replaced.

Dressing over looped line

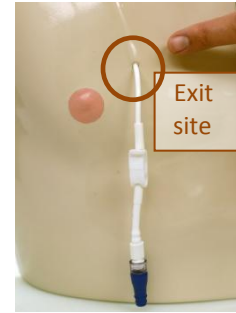


Hickman Line



What to Expect

- Your child's neck may be stiff and the chest may be sore for a few days after the surgery. The pain should go away in about 1 or 2 days.
- The chest may also look bruised. The bruising may take 1 to 2 weeks to go away.
- There will be a few stitches and steri-strips over the neck cut.
- The CVL is stitched into place at the catheter exit site.



The stitches around the exit site help secure the catheter until body tissue grows around the cuff. The stitches may be removed after 6 to 8 weeks.

What care is needed?

A dressing will be put over the CVL.

- The dressing is changed weekly. It should also be changed if it is loose, wet or soiled. This is important because the dressing holds the CVL line in place. Let your child's nurse know if you notice the dressing should be changed.
- When the CVL line is not in use (capped), the line must be flushed. This is done with a Heparin/vanco-heparin solution to keep the line open or prevent it from clotting.

How is the CVL removed?

- The CVL can be removed safely and easily. Often, the CVL will be removed in operating room and interventional radiology.
- Most often stitches are not needed to close the hole where the CVL was removed. The hole will be covered with a small dressing. The hole will heal on its own.
- After removal, keep a dressing over the site for 24 hours, or as directed by your child's doctor or nurse.

After healing, there may be a very small scar on the skin.

ALERT: Call your child's doctor, nurse, or clinic if you have any concerns or if your child has special health care needs not covered by this information.

This teaching sheet is meant to help you care for your child. It does not take the place of medical care. Talk with your healthcare provider for diagnosis, treatment, and follow-up.