

## Central Venous Access Device (CVAD)

### What is a CVAD?

A Central Venous Access Device (CVAD) 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 Non-power Broviac/Hickman or Power Hickman.

#### Non-Power Broviac/Hickman

- May be used for Ethanol Dwells.
- May **not** be power injected.

#### Power Hickman

- May **not** be used for Ethanol Dwells.
- May be power injected.

Non-power Broviac



Power Hickman



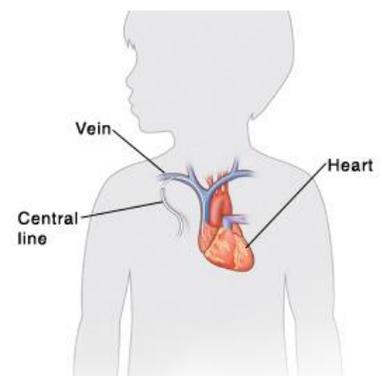
These types of lines can stay in place for a long time. They have many uses. They may be used to:

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

### How is it put in?

A CVAD 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 CVAD tube is tunneled. It goes under the skin from the cut in the chest to the neck.
- The area where the CVAD 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 CVAD is in the right place.

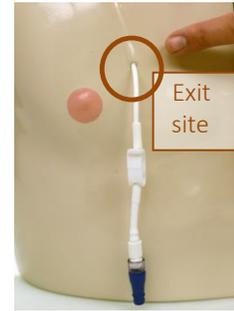


## Possible problems

- There is a chance of getting an infection.
- If blood forms at the tip of the CVAD 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.

## 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 CVAD 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 CVAD.

- 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 CVAD line in place. Let your child's nurse know if you notice the dressing should be changed.
- When the CVAD line is not in use (capped), the line must be flushed. This is done with a Heparin/vancomycin-heparin solution to keep the line open.

## How is the CVAD removed?

- The CVAD can be removed safely and easily. Often, the CVAD will be removed in Operating Room and Interventional radiology.
- Most often stitches are not needed to close the hole where the CVAD 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.**