If you have any questions, you can call Radiology at 715-717-6985 or you may call your doctor’s office.
Vascular Access Devices

A flexible thin plastic tube (catheter) will be put into a vein to provide a painless way to deliver medicines or nutrition, and draw blood. The type of catheter put in depends on what the catheter will be used for, and how long it will be needed.

Following are the major types of vascular access catheters:

• PICC line (peripherally inserted central catheter) is a catheter that goes from an arm vein into the largest vein near the heart. It is usually used for a few weeks, but can be used for a few months if needed.

• Tunneled Catheter Central line has a cuff that supports tissue growth that will help hold it in place in the body. It can be used for a longer period of time.

• Implantable Port catheter is a catheter attached to a small reservoir, which is put under the skin in the upper arm or the chest. It is used for chemotherapy and blood draws.

Following are the major types of dialysis catheters:

• Non-tunneled dialysis catheters are put in a large, more central vein, like the jugular vein in the neck or the femoral vein in the groin. These catheters are used when short term dialysis is needed.

• Tunneled Dialysis Catheters has a cuff that supports tissue growth that will help hold it in place in the body. These catheters are needed for long term dialysis but are not limited to the use of dialysis.

Before the Procedure

Depending on the type of catheter is put in, you may or may not have something to eat or drink up to 4 hours before putting in the catheter. Ask your doctor if you can eat and drink before the procedure.

For tunneled catheters and port catheters, blood thinning medicines like Aspirin, Coumadin (Warfarin) or Plavix should be discussed with your doctor. When possible, these medicines should not be taken for 5-7 days before your procedure. You may take your other medicines with a sip of water unless told not to by your doctor.

When you arrive, the procedure will be explained to you. You can ask any questions you have about the procedure, its risks, or how it will be done. Once your questions have been answered, you will be asked to sign a consent form.

Depending on the type of catheter placed you maybe offered medicine for your comfort.

During the Procedure

These procedures are often done on an outpatient basis, so you will not have to stay overnight in the hospital.

You will lie on your back on a special table. The area of the body where the catheter is to be put in (usually the neck, upper chest or upper arms) will be shaved, cleaned, and covered with a surgical drape.

Depending on the type of catheter put in, a Registered Nurse may be with you during the procedure. The nurse may monitor your blood pressure and other vital signs.

The person doing the procedure (radiologist) will use a special machine (ultrasound) to find a vein. The area will be numbed with medicine and a very small nick will be made in the skin where the catheter will be put in. A special x-ray machine will be used to put the catheter in the right place. Depending upon the type of catheter put in, a second area will be numbed, and you may feel some pressure or brief pain if a tunnel is created or a reservoir is placed, as with a port. Incisions are closed with stitches that dissolve, surgical glue and/or special tape.

The procedure is usually done within 30-60 minutes.

After the Procedure

You should avoid hard, physical activity or lifting heavy objects with the arm that has the catheter. Never pull on the catheter tails, and do not get them caught on things like clothing.

The incision/catheter site will be sore for 1-2 days. Bruising around the catheter is also normal. A small amount of bleeding from the site in the first 24 hours is also normal.

You will receive home care instructions for the care of your catheter.