

Your Tunnelled CVAD (Central Venous Access Device)



Treatment — Systemic



**Cancer Care
Alberta**

The care team that inserted your catheter will fill in the information below. Save this information and share it with all your healthcare providers.

Your tunnelled line is this type: _____

- Locking solution:**
- Normal Saline
 - Sodium Citrate
 - Heparin

Your line needs to be locked: Every 7 days

Your caps need to be changed: Every 7 days

Date the line was inserted: _____

Tunnelled CVAD

What is a tunnelled CVAD?

A tunnelled CVAD is a long tube that is placed into a large vein in your chest. It is then slid through the vein until the tip is just above your heart. A tunnelled CVAD can stay in your vein for a few years. It is sometimes called a **catheter** or **line**.

Why do I need a tunnelled CVAD?

The tunnelled CVAD makes it possible for you to have many treatments without having to put a needle into your vein each time. It is used to infuse stem cells, draw blood and to give:

- chemotherapy
- fluids
- medication
- blood products
- nutrition

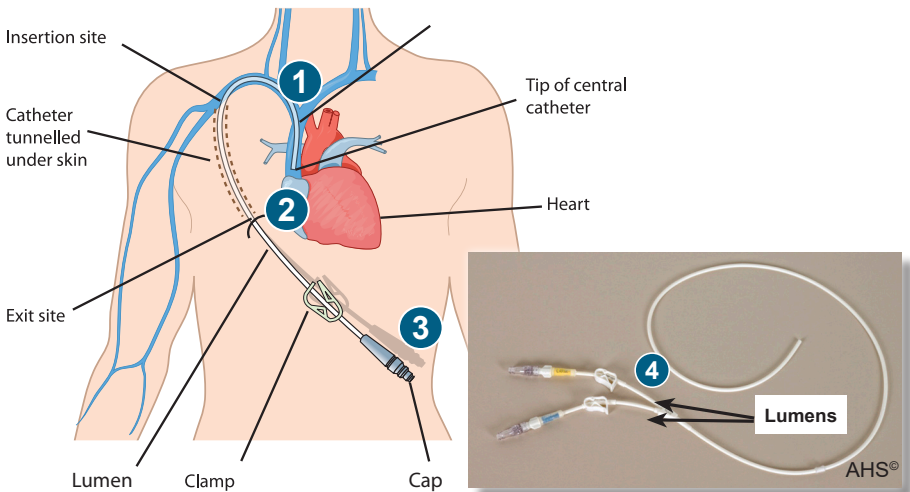
Parts of a Tunnelled CVAD

Inside the body:

- 1 Catheter** — leads to a vein above the heart.
- 2 Dacron® cuff** — directly under the skin at the exit site. The skin grows around the cuff. It prevents the catheter from being pulled out and also helps keep bacteria from entering the body.

Outside the body:




- 3 Lumen** — A small tube at the exit site. You may have 1 or 2 lumens. Each lumen has a cap that can be removed and a plastic clamp. Medications are injected into the cap and travel directly into the vein.



- 4 Double lumen catheter** — If you have more than 1 lumen, then you can get different medications, fluids, or blood products at the same time. They are separate tubes and are not connected.

Inserting the Tunnelled CVAD

What can I do to prepare for my tunnelled CVAD?

-  Arrange for a ride home from the procedure.
-  Let your doctor know if you are taking blood thinners.
-  Follow the directions for eating and drinking you were given.

Who will insert the tunnelled CVAD?

A radiologist or x-ray doctor will insert the line. You will need to sign a consent form. When you sign the consent form, it means you agree to having the procedure.

What can I expect during the procedure?

- The nurse will use sterile cloths to cover the area of your body where the CVAD will be inserted to help prevent infection.
- You will be awake but the doctor will freeze the area on your chest where the CVAD will be inserted.
- 2 small cuts will be made and the CVAD is inserted. You may feel some pressure when this happens.
- You will get a chest X-ray after the CVAD is inserted to make sure that it is in the right place.
- The insertion site will be closed with steri-strip tapes or stitches and then covered with a dressing.

Caring for your tunnelled CVAD

Do not touch or pull off the steri-strip tapes. They need to stay on for 5 to 7 days. The steri-strips should fall off on their own in about a week. If they have not fallen off by this time, you may remove them.

If you were given stitches, you will have two sets of stitches. The stitches will be removed by your healthcare team. Each set of stitches may be removed at a different time.

To help prevent infections:

- Check the dressing and insertion site every day. **Do not remove your dressing to do this.** It needs to be secure and should not be lifting.
- A healthcare professional will change the dressing 24 hours after your CVAD is inserted and then every 7 days. Once the area is fully healed, you may not need a dressing anymore.



If your dressing gets wet, dirty or loose, call your healthcare team. If this happens after hours, call Health Link at 811.

- A healthcare professional will change the caps and flush and lock your line every 7 days. This keeps the line clear so it doesn't get clogged, or clotted.

Water and my tunnelled CVAD:

- You may shower while you have your CVAD but never put it directly in the water.
- Protect it from the water by putting plastic around your chest like Saran Wrap®.
- If you take a bath, make sure the water is low enough so the CVAD does not touch the water.
- Do not use hot tubs, or go swimming.

Safety tips for your tunnelled CVAD

- Always wash your hands before you touch your catheter.
- Do not bend or twist your catheter.
- Do not use sharp objects like scissors, knives, or pins, near the catheter or other tubing. They may damage your catheter.
- If your line has a clamp, keep it clamped when you are not using it.
- Tape the line to your body to prevent pulling or dangling.
- Keep your emergency supplies with you at all times.

What do I need to avoid with my CVAD?

- Anything that will cause the dressing to get wet, like swimming or tubs
- No heavy lifting, strenuous exercise, or contact sports
- Pulling or tugging on the line — tape the line close to your body
- Clothing that rubs or pulls on your line. Wear loose-fitting tops
- Do not wear jewellery that can catch on the catheter like necklaces

Possible Problems to Watch for

Blood clots — Watch for facial swelling, sudden chest pain or shortness of breath. If you have any of these symptoms, call the contact number your nurse gave you or go to the emergency room. You will get medication to help break down the clot.

Catheter has moved out of place — the cuff on the catheter has come out from under the skin at the insertion site. Call your care team right away.

Skin rash — check to see that there are no changes to your skin under or around the dressing. If you do see changes, call your care team right away.

If the cap comes off — never touch the end of the catheter. Clamp your catheter. Clean the end of the line on the outside with an alcohol swab from your emergency supplies and put a new cap on. Call your care team and let them know what has happened.

When should I go to the emergency room?

The red box on the next page lists when you should go to the emergency room. If you have to go to emergency and get any treatment, let your cancer care team know.

When to go to the emergency room:

If you have any of the symptoms below. **Do not wait** to speak to your cancer care team.

- Confusion
- Shortness of breath
- Dizzy
- A cough that will not go away
- Pain in your chest
- Distended neck veins
- Sudden pain in your jaw, ear or neck
- Difficulty swallowing or turning your head
- Swelling in your chest or neck
- Pale skin, swelling, or numbness in your arm or neck on the same side as your line
- You have a fever or chills with a temperature of 38.3°C (100.9°F) or higher at any time or 38.0°C (100.4°F) to 38.2 (100.8°F) for at least 1 hour.

Broken or torn CVAD — it is possible to get a hole or tear in the central line tubing. Signs of damage could include:

- Wetness under the dressing or along the tubing
- An area of bulging or bubbling on the central line
- Puffiness or swelling on the skin near the central line
- Tear or hole is visible

If there is damage, clamp the line between the tear and where the catheter goes into your body. Tape the catheter to your skin and cover it with a sterile dressing if you can. Go to the emergency room.

The tunnelled CVAD pulls out all of the way — put pressure on the site for at least 10 minutes until bleeding stops. Go to the emergency room.

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The information is to be updated every 3 years, or as new clinical evidence emerges. If there are any concerns or updates with this information, please email cancerpatienteducation@ahs.ca.

You can find this booklet and other resources at
www.cancercarealberta.ca

Cancer Care Alberta

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