PICC Care Sheet 2
What To Do With A Blocked Or Sluggish PICC

Why do PICCs get blocked or sluggish?
Usually because a small amount of blood has clotted in the line.

How can we prevent this?
By using a good flushing technique: see PICC Care Sheet 3

How can we get the PICC working again?
By using a thrombolytic: see below (from the UCLH Central Venous Catheter Care Guidelines)

What is a Thrombolytic?
A thrombolytic is a drug which is capable of breaking up a thrombus. Urokinase is the most common thrombolytic used for unblocking CVCs in UCLH: use 5000 units in 2mls per lumen. A thrombolytic should always be prescribed. (Heparin and Hepsal are NOT thrombolytics: they are capable only of inhibiting thrombus formation.)

How to use a Thrombolytic

1. Arrange prescription
2. Draw up the thrombolytic as per manufacturers instructions
3. Instill the thrombolytic into the catheter and wait 1-2 hours
4. Assess the catheter again
5. If full function has not returned instil the thrombolytic again and leave in for longer – several hours or overnight if possible.
6. If the procedure fails to restore function consider whether lipids/drug precipitation could be causing the blockage. If not, refer to PICC Team: Chest X-ray may reveal

Completely blocked catheters
1. Attach a 3-way-tap & syringes
2. Open clamp (if there is one)
3. Open stopcock to the empty syringe and blocked catheter.
4. Maintain suction and turn stopcock so it is closed to the empty syringe and open to the syringe containing thrombolytic which will be sucked into the catheter.
5. Leave for 1-2 hours – DO NOT CLAMP CATHETER
6. After this time, attempt withdrawal of blood.

Questions / feedback?
Internal email: centralvenousaccess External email: centralvenousaccess@uclh.nhs.uk
More info at www.uclh.nhs.uk/cvc or internal website page Central Venous Catheters