Per-Q-Cath* Catheter
A Percutaneously Inserted Catheter

Patient Information Booklet
Your physician has requested a Per-Q-Cath® catheter so that you can conveniently receive the I.V. therapy that you require. It can be used to give you medications or (in some instances) to obtain blood samples. It does not require surgery to place the Per-Q-Cath catheter in your vein.

The Per-Q-Cath Catheter is an alternative access device.

As a point of interest, the Per-Q-Cath Catheter was initially developed for the immuno-suppressed premature infant, and because of its success in this delicate area of medicine, it is now utilized in all patient categories.

This Patient Guide has been prepared to help you better understand your Per-Q-Cath Catheter. However, it is only a guide and should be used in conjunction with your IV nurse and/or physician's directions.

Should you need to go to a hospital or physician other than your primary physician, please take this booklet with you. It will help the physician and nurses to care for you and your catheter in the best manner possible.

The catheter is normally placed in one of the veins at or near the bend of the elbow. It may be placed in either arm.

You may feel slight discomfort from the introducer during the insertion procedure, but the threading of the catheter should not cause you any sensation.

Your Per-Q-Cath Catheter should not limit normal activities; however, this will be addressed by your I.V. nurse and physician.

WARNING: Use of ointments with the polyurethane Per-Q-Cath catheter can cause failure of this device.
Patient Name ________________________________________________________________

Patient’s Phone Number ________________________________________________________

Primary Physician Name ________________________________________________________

Primary Physician’s Phone Number ______________________________________________

IV Nurse Name ________________________________________________________________

IV Nurse Phone Number ________________________________________________________

Hospital ________________________________________________________________

Hospital’s Phone Number ______________________________________________________

Home Care Agency ____________________________________________________________

Home Care Agency Phone Number ______________________________________________

Date Inserted ________________________________________________________________

Inserted By _________________________________________________________________

Catheter Lot Number __________________________________________________________

Catheter length (after trimming) cm  French Size  2  3  4  5

Your catheter had been threaded approximately cm into the vein.

By external measurement, the tip of the catheter is in the ________________.

Your physician may request an x-ray to check the exact location of the tip of the catheter.

X-Ray Done  Yes  No

You will be receiving the following medications through your Per-Q-Cath Catheter.

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________

__________________________________________________________________________
**Dressing Change**

Your dressing serves two important functions.

1. It provides a sterile environment for the catheter.
2. It helps prevent the catheter from migrating or breaking.

Because of the small diameter and flexibility of the **Per-Q-Cath** catheter, it is not recommended that the catheter be sutured for stabilization and is, therefore, secure and stabilized in place by a moisture-vapor permeable, non-occlusive dressing.

If you or your family members have been instructed in changing the dressing, please follow the instruction explicitly. Proper dressing change and sterile techniques will help reduce the chance of catheter complications.

**Important**

1. Never use sharp instruments near catheter, i.e. scissors.
2. Do not allow catheter to move in or out of the exit site in you arm.
3. If your dressing becomes loose or there is excessive drainage, it should be changed immediately.
4. Your catheter should always be secured with a chevron tape over the hub, over the wings and chevroned over top of the dressing. This will relieve all tension from the catheter tubing and distribute it across the surface of the non-occlusive dressing.

5. Your Dressing will be changed (date): __________________________________________

**Flushing the Catheter**

If you are caring for your catheter, you will be instructed on the proper technique of catheter flushing.

Your catheter should be flushed ________________________________________________.

It should be flushed with ________________________________________________________.
Catheter Complications

A small red bump may develop at the venipuncture site where your catheter was inserted. This is normal; however, you should feel no pain nor see any drainage after the initial change.

If you should experience any of the following symptoms, please call immediately:

1. Excessive bleeding or drainage from the catheter exit site.
2. Redness or swelling at venipuncture site.
3. Pain, soreness or swelling of the arm with the catheter.
4. Pain or discomfort during infusion of your IV solution.
5. Chest pain or discomfort while your catheter is in place.
6. Catheter migration either in or out of the exit site.
7. If you encounter a catheter leak or inadvertently break or damage the catheter, fold the catheter below the break or leak and tape it together.

Catheter Maintenance Schedule

<table>
<thead>
<tr>
<th>Directions: List the date below and check off the maintenance performed.</th>
<th>Catheter Dressing Change</th>
<th>Extension Tubing Change</th>
<th>Injection Cap Change</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date</td>
<td>X</td>
<td>X</td>
<td>X</td>
</tr>
</tbody>
</table>

[Table continued with multiple blank rows for data entry]
<table>
<thead>
<tr>
<th><strong>Patient's Name</strong></th>
<th><strong>Physician</strong></th>
<th><strong>Physician's Phone No. (        )</strong></th>
<th><strong>Date of Insertion</strong></th>
<th><strong>Catheter Product Code</strong></th>
<th><strong>Catheter Lot Number</strong></th>
<th><strong>Catheter Length</strong></th>
<th><strong>Medication Administered</strong></th>
<th><strong>Catheter Tip Location</strong></th>
<th><strong>Home Healthcare Agency</strong></th>
<th><strong>Agency Phone No. (        )</strong></th>
</tr>
</thead>
</table>

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**Important:** Please fill out the patient information card below and separate from booklet. Fold on the crease provided and keep on your person at all times.

**Bard Access Systems, Inc.**
Salt Lake City, UT 84116
Clinical Information Hotline: 1-800-443-3385
Ordering Information: 1-800-545-0890

**The Per-Q-Cath* Catheter**
Patient Information Card