Supplemental Instructions for Use
Bard Access Systems PICCs and Midline Catheters

These supplemental instructions provide additional information relevant to the placement and use of all Bard Access Systems PICCs and Midline Catheters, including PowerPICC SOLO®, PowerPICC®, PowerPICC® SV, Poly Per-Q-Cath® PowerGroshong®, Groshong® NXT ClearVue®, Groshong® NXT, Groshong® and Per-Q-Cath® catheters. These supplemental instructions are to be used in conjunction with the product instructions for use for the specific catheter family.

Additional Warning
- Ensure that the stylet tip does not extend beyond the trimmed end of the catheter. Extension of the stylet tip beyond the catheter end may result in vessel damage, stylet damage, difficult removal, stylet tip separation, potential embolism and/or risk of patient injury.

Additional Precautions
- Follow all contraindications, warnings, precautions, and instructions for all infusates, including contrast media, as specified by their manufacturer.
- Some patients may be hypersensitive to heparin or suffer from heparin induced thrombocytopenia (HIT) and these patients must not have their catheter locked with heparinized saline.
- As reported in literature, anaphylactic or anaphylactic-like reactions occur in a small percentage of the population during placement1, positioning2, flushing3 of central venous catheters or cleaning of catheter exit site4. These reactions are reported in association with insertion, rapid flushing, or manipulation of the catheter and/or use of chlorhexidine gluconate (CHG) in some patients. Be aware of the potential symptoms or signs of these reactions and take precautionary steps as dictated by institution protocol for their prevention or treatment.
- If CHG allergy is suspected, confirmatory testing is recommended4,5.
- Do not use scissors to remove dressing to minimize the risk of cutting catheter.
- Do not suture through or around any part of the catheter’s tubing (shaft or extension legs). If using sutures to secure catheter USE THE SUTURE WINGS and make sure they do not occlude, puncture, or cut the catheter.
- The catheter must be secured in place to minimize risk of catheter breakage and embolization.
- To reduce potential for blood backflow into the catheter tip, always remove needles or needless caps slowly while injecting the last 0.5 ml of saline.
- Do not reinsert needle into IV catheter to minimize the risk of the needle damaging or shearing the IV catheter.
- Do not withdraw dilator from microintroducer sheath until sheath is within vessel to minimize the risk of damage to sheath tip.
- Do not pull apart the portion of the sheath that remains in the vessel. To avoid vessel damage, pull back the sheath as far as possible and tear the sheath only a few centimeters at a time.
- Do not cut guidewire to alter length.
- Do not insert stiff end of guidewire into vessel as this may result in vessel damage.
- Keep sufficient guidewire length exposed at hub to allow for proper handling. A non-controlled guidewire can lead to wire embolism.
- Do not use excessive force when introducing guidewire or microintroducer as this can lead to vessel perforation and bleeding.
- If the guidewire must be withdrawn while the needle is inserted, remove both needle and wire as a unit to prevent the needle from damaging or shearing the guidewire.
- Never leave stylet or stiffening wire in place after catheter insertion; injury may occur. Remove stylet or stiffening wire and T-lock (as applicable) after insertion.
- The stylet or stiffening wire needs to be well behind the point the catheter is to be cut. NEVER cut the stylet or stiffening wire.
- Do not clamp extension leg when stylet or stiffening wire is in catheter to minimize the risk of component or catheter damage.

Additional Possible Complications
In addition to the potential complications listed in the catheter family instructions for use, the potential exists for the following serious complications:
- Heparin Induced Thrombocytopenia
- Hypersensitivity, anaphylactic or anaphylactic-like reaction during placement1, positioning1, flushing2 of catheter or cleaning of catheter exit site4.

References
1 Halpern M.D., Georges. “Allergic and Toxic Reactions.” Adverse Events During Infusion Therapy Symposium, University of California, Davis School of Medicine. (1993)
5 Beaudouin, E. et al., “Immediate Hypersensitivity to chlorhexidine: literature review,” European Annals of Allergy and Clinical Immunology. 36, no. 4 (2004)

*Bard, ClearVue, Groshong, Per-Q-Cath, PowerGroshong, PowerPICC and PowerPICC SOLO are trademarks and/or registered trademarks of C.R. Bard, Inc.

An issued or revision date for these supplemental instructions is included for the user’s information. In the event two years have elapsed between this date and product use, the user should contact Bard Access Systems, Inc. to see if additional product information is available.

Revised date: June 2011

Bard Access Systems, Inc.
605 North 5600 West
Salt Lake City, UT 84116 USA
1-800-595-0700
Clinical Information Hotline: 1-800-433-3385
Ordering Information: 1-800-545-0890
www.bardaccess.com

0728680 / 1106R