



CHANGING YOUR CENTRAL LINE DRESSING

SUPPLIES:

- Central Line Dressing kit

PROCEDURE:

1. Gather equipment. Clean work area.
2. Remove your clothing to expose the catheter site. Sit comfortably with a good view of the site.
3. ***If a caregiver is changing the dressing, you may lie down.***
4. Wash your hands thoroughly.
5. Open dressing kit, maintaining sterility.
6. Apply mask, pinch over nose to secure in place.
7. Put on non-sterile gloves.
8. Carefully remove the old dressing. Inspect the catheter site for any signs of redness or drainage.
9. Remove and discard gloves and dressing in a plastic bag for disposal in household trash.
10. Rewash hands thoroughly.
11. Put on sterile gloves as instructed by your nurse.
12. Open the packet of ChloroPrep swab sticks.
13. Apply ChloroPrep solution to the IV site dressing area using a back-and-forth friction scrub for 30 seconds cleaning a 3 inch square area with the catheter in the center of the square. **DO NOT BLOT OR WIPE AWAY.** Allow area to dry thoroughly.

YOU MAY NOW APPLY THE “NEW” DRESSING:

1. Prepare the transparent dressing by removing the paper on the back and flatten the dressing by gently pulling it taut.
2. Place the transparent dressing directly over the catheter exit site, molding it around the catheter with your gloved fingers.



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3. Your nurse may instruct you to anchor the dressing with tape.
4. Place all used supplies in your waste container. Remove and discard your gloves. Dispose waste after double bagging it.
5. Wash your hands thoroughly.

IMPORTANT:

- **CHANGE YOUR CATHETER DRESSING ONCE WEEKLY, UNLESS INSTRUCTED OTHERWISE BY YOUR NURSE.**
- **IT IS ALWAYS NECESSARY TO CHANGE YOUR DRESSING IF IT BECOMES WET, LOOSE, OR SOILED.**
- **NEVER TOUCH THE CATHETER EXIT SITE WITH YOUR BARE HANDS.**
- **NEVER USE SCISSORS NEAR THE CATHETER.**
- **NOTIFY YOUR NURSE IMMEDIATELY IF YOU EXPERIENCE ANY OF THE FOLLOWING SYMPTOMS:**
 - **FEVER, SWEATING OR CHILLS**
 - **TENDERNESS OR REDNESS AT THE CATHETER EXIT SITE**
 - **DRAINAGE OR PAIN AT EXIT SITE**