**Employee Name:**  ­­­­­­­­­­­­­­­­­­­­­ **Employee ID #:** ­­­­­­­­ ­­­ \_\_\_\_\_**Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Disclaimer:** Competency Verification Records (CVR) are temporarily stored in the Department’s competency filing system until completion has been recorded on a permanent competency form (e.g., OCA, ACR).  The CVR requires a validator’s signature.

**Transfer of CVR to Permanent Record:** With this record of a validated competency, the preceptor, Dept. NEC, manager, or their designee locates the matching competency statement on the Annual Competency Record (ACR), Orientation Competency Assessment (OCA) Regional Competency Assessment (RCA), or Department Specific Competency (DSC) form. *(If the statement is not present, it can be written-in*.) The competency statement is then initialed and dated as complete.

|  |  |
| --- | --- |
| **Competency Statement:** | Demonstrates insertion of Peripherally Inserted Central Catheter (PICC). |
| **Validator(s):** | RN Vascular Access Team members who have validated and documented competency for this skill. |
| **Validator Documentation Instructions:** | Validator documents method of validation (below) and initials each skill box once completed **and** places their full name, signature, and completion date at the end of the document.  |
| **Method of Validation:** |

|  |  |
| --- | --- |
| **DO** |  **Direct Observation – Return demonstration or evidence of daily work.** |
| T |  Test: Written or oral assessments, surveys or worksheets, passing grade on a CBL test. |
| S |  Simulation |
| C |  Case Study/ Scenarios: Create/share a story of a situation then ask questions that capture the nature of the competency that is being referenced.  |
| D |  Discussion: Identify questions related to a competency and ask orientee to provide an example of their real-life experiences. |
| R |  Reflection: A debriefing of an actual event or a discussion of a hypothetical situation. |
| QI |  Quality Improvement Monitoring: Audits or compliance checks on actual work or documentation to ensure the competency is completed. |
| N/A |  If the specific product or process step is not used in the respective area or by the respective role, then this step is deemed N/A.  |

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| **Validation Instructions:** | Documented confirmation and successful completion of the BD PICC training or required training by competent Vascular Access Team member.  |

| **Demonstrated Skill****Behaviors for Competency (Critical Behaviors in Bold)** | **Method of Validation** | **Evaluator’s Initials** |
| --- | --- | --- |
| Successfully completes BD modules, practicum, and simulation | T/S |  |
| **Verbalizes indications for Peripherally Inserted Central Catheter (PICC) placement** | D |  |
| Verbalizes potential complications | D |  |
| Verifies Licensed Independent Provider (LIP) consult order to VAT/IR for Venous Access | DO |  |
| Reviews medical history, appropriate labs, ECG, allergies to determine inclusion and exclusion criteria for vascular access device placement | DO |  |
| **Identifies patient utilizing two identifiers** (name, date of birth, medical record number) | DO |  |
| Explains procedure and **obtains informed consent** for the procedure | DO |  |
| **Disinfects high-touch surfaces** (e.g., bedside rails, call bell, bedside table, in-room keyboard, and IV pump) | DO |  |
| Gathers Supplies:* Portable ultrasound machine with vascular probe
* PICC insertion kit
* Non-sterile measuring tape
* Non-sterile gloves
* Sterile gloves
* Head cover
* Mask(s)
* Googles or eye protection
* Antiseptic solution (Chlorohexidine, for allergy Betadine Applicator)
* Needleless connector end caps
* CHG Tegaderm dressing
* Skin prep
* PICC Tip Tracking Confirmation System
* Subcutaneous Anchor Securement System (SASS)
 | DO |  |
| **Completes procedural time-out** | DO |  |
| **Assesses vasculature for appropriate vessel, size, shape, pathway, and compressibility** | DO |  |
| * Accurately measures and documents vessel size (catheter vein ratio)
 | DO |  |
| * Accurately identifies structures and vessels
 | DO |  |
| * Demonstrates doppler waveform assessment of vessels
 | DO |  |
| * Accurately measures the desired external length of the line

(Distance from the selected insertion site to the axillary crease, then to the right clavicular head, then down to the third intercostal space.)  | DO |  |
| * Adds additional length; per subcutaneous anchor securement device recommendation (2-3cm)
 | DO |  |
| * Accurately measures the arm circumference from the selected insertion site
 | DO |  |
| Demonstrates the ability to use and troubleshoot PICC Tip Tracking Confirmation System* Sets up Tip Tracking Confirmation System
 | DO |  |
| * Applies sensor in the desired chest location
 | DO |  |
| * Attaches ECG external leads
 | DO |  |
| * Performs pre-calibration of system
 | DO |  |
| * Evaluates baseline ECG waveform, verifies p-waves present, identifiable, and consistent
 | DO |  |
| **Demonstrates sterile technique**, including procurement of necessary equipment.* Sterile gown, gloves, drape
 | DO |  |
| Prepares the catheter according to the manufacturer’s recommendation. | DO |  |
| Provides local anesthesia for venipuncture | DO |  |
| **Performs the modified Seldinger technique*** Insert needle into vein and observe for blood return
* Advance guidewire through the needle
* Remove the needle over the guidewire
* Insert introducer over the guidewire
* Advance the introducer
* Remove the guidewire
 | DO |  |
| Qualified second operator obtained after 2 unsuccessful sticks | DO |  |
| Inserts the PICC | DO |  |
| Secures the catheter at the insertion site by applying a subcutaneous anchor securement device | DO |  |
| Assesses bleeding risk factors and demonstrates the importance of hemostasis.  | DO |  |
| Utilizes hemostatic topical powder  | DO |  |
| **Demonstrates proper sterile technique with dressing application.** | DO |  |
| **Confirms sharps count** with second operator and discards supplies appropriately in designated receptacles  | DO |  |
| Disinfects equipment (ultrasound) per hospital policy | DO |  |
| Identifies and orders Vascular Access Team (VAT) Order Panel* Lidocaine 1% 5mL
* XR Chest Single VW
* Vascular Access Ready for Use (post confirmation of placement)
 | DO |  |
| **Performs necessary documentation**: Central Line Insertion Checklist, LDA, Flowsheet, Procedure note, MAR (lidocaine administration), Education | DO |  |
| Identifies clinician resources for escalating PICC insertion concerns* IR Physician Assistant/IR on-call Attending
* PICC insertion trained nurses
* BD representatives
 | D |  |

*Competency Verified by:*

 Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

*Validator’s Name (printed*) *Validator’s signature*

**References:**

* American Association of Critical-Care Nurses. (2019). *Procedure 77: Peripherally inserted central line catheter and midline*. In *AACN procedure manual for progressive and critical care* (8th ed., pp. 734 - 745). Elsevier
* Becton, Dickinson and Company. (n.d.). *Sherlock 3CG+*. Retrieved from <https://www.bd.com/en-us/products-and-solutions/products/product-page.9770351#overview>
* Infusion Nurses Society. (2021). *Infusion therapy standards of practice* (8th ed.). *Journal of Infusion Nursing*, 44(1S), S82, S94- S97.
* Lippincott Williams & Wilkins. (2024, August 19). *Peripherally inserted central catheter (PICC) insertion* (Revised). <https://procedures.lww.com/lnp/view.do?pId=39476&s=p>
* Securacath. (2022, September 30). Subcutaneous catheter securement system: Instructions for use [PDF]. Retrieved from <https://securacath.com/ifu/>
* StatSeal. (2024). *IFU-Statseal INS-SS-06.8: StatSeal powder* (Web version). Retrieved from <https://www.statseal.com/downloads/>