

(place patient label here)

Patient Name: _____



PROVIDER ORDERS

Order Set Directions:

- > (√)- Check orders to activate; Orders with pre-checked box will be followed unless lined out.
- > Initial each place in the pre-printed order set where changes such as additions, deletions or line outs have been made
- > Initial each page and Sign/Date/ Time last page

Diagnosis: _____

Allergies with reaction type: _____

PICC/Midline Insertion

Version 2 4/2/14

Access preference and options (Pick one)

- Vascular access nurse to determine appropriate access and initiate PICC insertion protocol or Midline Catheter insert/ maintain
- Peripherally inserted central catheter (PICC) insert/maintain: Initiate Peripherally inserted central catheter (PICC) insertion protocol
- Peripherally inserted MIDLINE catheter insert/ maintain

Nursing Orders

- Labs may be drawn through PICC (Not generally recommended)

Consult Department

- Consult Vascular Access Nurse

Provider Signature: _____ Date: _____ Time: _____