

Umbilical Arterial Catheter, Umbilical Venous Catheter and Peripheral Longlines

This leaflet has been designed to give you important information about your baby's condition, and to answer some common queries that you may have.

What is an Umbilical Arterial Catheter (UAC)?

A UAC is a special line which is sited through an artery in your baby's umbilical cord. A UAC is very useful for taking blood samples and monitoring your baby's blood pressure.

What is an Umbilical Venous Catheter (UVC)?

A UVC is a special line which is sited through a vein in your baby's umbilical cord. A UVC is useful for giving your baby fluids or medication.

What is a long line?

A long line is a thin catheter which either goes into a vein in your baby's arm, leg or neck. Long lines are helpful to administer total parenteral nutrition (TPN). TPN is intravenous feeding and is usually used when babies are unable to tolerate feeding into the stomach. Medication can also be given through a longline.

How are these lines inserted?

All the above lines are inserted under sterile conditions on the Neonatal Unit. It is extremely important to ensure they are in the correct place. Your baby will therefore have an x-ray to check their position after they have been inserted. In order to reduce the risk of clots forming a drug called Heparin, which helps keep the blood thin, may also be passed through the lines.

How long do the lines remain in for?

The insertion of lines into your baby can carry risks, therefore in order to reduce these risks and the chances of complications the lines will be taken out as soon as they are no longer needed. Nursing or medical staff will keep you updated.

What are the benefits?

All of the lines are invaluable in the management of sick babies. The UAC/UVC lines reduce the need to handle poorly babies. They also reduce the need for repeated pricking of your baby with needles so that blood samples can be taken, or medication given.

If your baby is receiving TPN via a longline this will help your baby receive the calories they need to help them grow.

What are the risks?

There is a risk of complications; however medical/nursing staff will discuss these risks with you explaining the complications against the need for ensuring your baby receives the appropriate care and treatment.

Below are some of the known complications:

- Infection
- Clot formation with the possibility of the clot being carried to other areas in the body.
- Migration – the line extending to beyond where it was thought to be
- Reduced blood supply to the intestines
- Artery spasm with discoloration of the skin of toes.
- Cardiac tamponade (perforation of the heart muscle with fluid in the sac around the heart).

Staff will carry out regular inspections of the site of the lines and if necessary, the lines will be removed.

Are there any alternatives?

There are currently no alternatives. If you are concerned about lines being inserted, please discuss your concerns with medical or nursing staff.

Additional Information

If you require any additional information, please do not hesitate to speak to a member of medical or nursing staff on the Neonatal Unit.

Concerns and Queries

If you have any concerns/queries about any of the services offered by the Trust, in the first instance, please speak to the person providing your care.

Patient Advice & Liaison Service (PALS)

The team are available to help with any concerns, complaints or questions you may have about your experience at the Trust. Their office is in the Main Foyer (Gate 4) of Doncaster Royal Infirmary. Contact can be made either in person, by telephone or email.

The contact details are:

Telephone: 01302 642764 or 0800 028 8059.

Email: dbth.pals.dbh@nhs.net