Competency Checklist



Activity Performed	Date	Preceptor Initials	Activity O=observed P=precepted
SecurAcath® Insertion			
Select the appropriate size SecurAcath device to match the catheter diameter.			
Add selected SecurAcath to sterile field using aseptic technique.			
Insert catheter (PICC, Mid, CICC, Drain, etc) per hospital protocol.			
Fold the SecurAcath anchor base downward until anchor tips come together.			
Gently lift the catheter until it is perpendicular to the skin surface.			
Visualize the insertion site on underside of catheter. Stretch the skin approximating the site to dilate it open and control the tissue variation (elastic, non-elastic skin will rebound)			
Hold the folded anchor base sideways with pointer finger on the blue elastomer, approximating the toes of the SecurAcath. Orient the feet so they are near parallel to the skin			
Insert anchor tips into the insertion site below dermis, above subcutaneous tissue, or until curved segment is no longer visible above the dermis.			
Release the SecurAcath anchor base until flat and apply reverse tension to ensure proper deployment and extend the legs to a full cm is visible.			
Align anchor base with catheter shaft.			
Gently move the anchor base to the sure the anchors are fully open under the dermis.			
If anchors appear to be overlapping slightly, gently move the anchor base back and forth to allow them to open fully. Alternatively, fold and apply traction to the dermis and press in further to ensure deployment in the subcutaneous space.			
Clean catheter at securement area with a dry 4x4 gauze, ensuring no blood, gel or exudate is present. Align the catheter with the groove within the anchor base with the numbering on the catheter upright, and wings of catheter parallel to the SecurAcath.			
Place the cover on the anchor base by pressing down on the center of the cover while holding the base to affix the device to the catheter shaft.			
Visually inspect the edges of the SecurAcath to make sure the cover is fully engaged with the base. Tug on the catheter and ensure the cover is fully engaged and appropriately secured.			
Remove the catheter stylet if present, aspirate and flush the catheter lumens to ensure patency. Lock per hospital protocol.			
Dress the catheter site per hospital protocol ensuring the catheter wings are under the dressing border.			
Ensure patient education is provide and utilize the appropriate resources per hospital protocol (App, patient wristbands, patient guide, patient cards, etc.)			
Document insertion process per hospital protocol, using recommended SecurAcath EMR Smart Phrase.			



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SecurAcath Care and Maintenance			
Follow hospital protocol regarding frequency of dressing change.			
Don surgical mask, perform hand hygiene and don clean gloves.			
Prepare supplies based on hospital protocol.			
Assess the insertion site before removal of old dressing through the original dressing noting, dressing status, orientation of the catheter and SecurAcath, any excess drainage or clinically relevant status of the insertion site or patient comfort.			
Remove the old dressing per hospital protocol.			
Inspect the skin.			
Check for catheter migration.			
Discard clean gloves. Perform hand hygiene, put on sterile gloves.			
If visible blood, antimicrobial gel, or exudate are present, use sterile saline soaked gauze to remove until visible cleaned.			
Using a sterile gauze, gently lift or hinge the catheter and SecurAcath device between 45-90 degrees from insertion site to clean around the catheter. Do not twist or rotate the SecurAcath device from its original position.			
Scrub skin 360° degrees around the insertion site using appropriate skin antiseptic following protocol for scrub time. Clean up to and including the catheter extensions that will go under the dressing.			
Allow to air dry per protocol while SecurAcath remains lifted. Do not blot or wipe away. Ensure the plastics are dried before next step.			
Dress catheter per hospital protocol. NOTE: Be sure to stabilize catheter hub under the border of the dressing or appropriate secondary securement to prevent pulling or kinking of the catheter outside the SecurAcath device. Do not apply dressing too tightly or it may pull on the SecurAcath device which may cause patient discomfort.			

Activity Performed	Date	Preceptor Initials	Activity O=observed P=precepted
SecurAcath Removal			
Verify appropriate provider order for the removal of catheter.			
Don protective eyewear, perform hand hygiene and don clean gloves.			
Prepare supplies.			
Turn off infusion if applicable.			
Remove cover of SecurAcath by placing a finger of the non-dominate hand under the device securing the device so it does not twist or rotate.			
Secure the catheter between non-dominate finger and thumb.			
Grasp tab on cover with the dominate hand.			
Lift tab upward and over toward opposite edge of device to detach cover completely from anchor base.			
*Remove the catheter (if indicated).			
Apply pressure to insertion site, per hospital protocol, until hemostasis has been obtained.			
Proceed to fold or split option for base removal.			
Allow to air dry per protocol while SecurAcath remains lifted. Do not blot or wipe away. Ensure the plastics are dried before next step.			

Competency Checklist



A ctivity

Activity Performed	Date	Preceptor Initials	Activity O=observed P=precepted
SecurAcath Removal Fold Option			
*This method can be done with or without the catheter in place.			
Apply firm pressure at the insertion site to keep tissue still.			
Fold base wings downward to bring feet together under the skin.			
Keep the blue channel parallel to the skin and use a three finger technique to hold with your pointer finger on the blue channel.			
Use swift, deliberate upward motion to remove following the shape of the feet.			
Apply a sterile dressing over insertion site per hospital protocol.			
Discards SecurAcath device in a biohazard container/bag (it is not considered a sharp).			

Activity Performed	Date	Preceptor Initials	O=observed P=precepted
SecurAcath Removal Split Option			
*This method can only be done with the catheter removed.			
Use a blunt-tip scissor (Metzenbaum, Mayo or similar) to cut the anchor base in half lengthwise, along the catheter groove.			
Place fingers of non-dominate hand near the insertion site, making skin taut around insertion site.			
Use a swift, deliberate motion to remove each half of the anchor base separately.			
Apply a sterile dressing over insertion site per hospital protocol.			
Discards SecurAcath device in a biohazard container/bag (it is not considered a sharp).			
Situational: If you meet excessive resistance, hold firm pressure over the foot with one finger at the insertion stie.			
Pull the foot against the pressure of your finger to straighten the flexible foot as you pull past the resistance. The nitinol foot is designed to flex out of the site without tissue damage. This may feel like a pinch to the patient, but causes no harm.			

P.3









Download the SecurAcath® App

24-Hour Clinical Information Line 1-800-225-0000

Go to www.securacath.com for more information



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Please refer to instructions for use for indications, contraindications, hazards, warnings, cautions and directions for use.