

## Appendix K: Care of the Patient Receiving PPN/CPN

Responsibilities	
Authorized Prescriber:	<ol style="list-style-type: none"> <li>1. Orders Parenteral/Enteral Support Service (PESS) consultation in non Oncology areas or Nutrition Consult for Oncology dept patients.</li> <li>2. Orders PPN/CPN daily, before 2:30pm, in order that the solution will be available for that evening</li> <li>3. Utilizes standardized order set/form ensuring that all patients receiving CPN have orders for daily intake and output, blood glucose and weight monitoring.</li> </ol>
PESS: (Where Applicable)	<ol style="list-style-type: none"> <li>1. After consultation, determines the most appropriate line for CPN</li> <li>2. Schedules central line insertions for lines placed by the Line Service</li> <li>3. Performs discharge planning for patients with home CPN infusion needs for the non-Oncology patient</li> </ol>
RN	<ol style="list-style-type: none"> <li>1. Hangs new CPN and PPN bags at the designated time</li> <li>2. Maintains integrity of dedicated CPN line</li> </ol>
VAT	<ol style="list-style-type: none"> <li>1. Changes dressing and tubing for CPN lines in applicable areas.</li> <li>2. Dedicates lines for CPN in applicable areas.</li> <li>3. Places peripheral line for PPN administration if central access is not available.</li> </ol>
CPN	
Orders/CPN Solution	<ol style="list-style-type: none"> <li>1. PESS, where applicable, shall be consulted for nutritional recommendations prior to initiating CPN/PPN.</li> <li>2. Standardized order set/form should be utilized to order CPN to ensure appropriate solution, nursing and lab orders are implemented.</li> <li>3. Patients admitted from home or transferred from another institution with CPN may continue infusion only until comparable dextrose/electrolyte solution is obtained from Pharmacy, or patient is evaluated by PESS or their physician and a new bag of CPN is available from Pharmacy. Additional bags brought from home with the patient may not be infused.</li> </ol>
Line Placement and Selection	<ol style="list-style-type: none"> <li>1. CPN must be infused through a central VAD.</li> <li>2. PESS shall be consulted to determine the most appropriate type of central line for CPN.</li> <li>3. A single lumen VAD is preferred for CPN administration.                         <ol style="list-style-type: none"> <li>a. Infusion of CPN through multilumen line must be approved by member of PESS staff in non-oncology areas.</li> </ol> </li> </ol>
Line Dedication	<ol style="list-style-type: none"> <li>1. For newly placed central lines, VAT, where applicable, shall designate the line or one port of a multilumen line for CPN administration by placing a label on the port. In addition, for dedicating an existing central line, VAT will obtain blood cultures through the line and culture the insertion site.</li> <li>2. Line can not be used for any other administration of fluids or meds once it is dedicated. Otherwise, dedication procedure must be performed again.</li> </ol>

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Line Management	<ol style="list-style-type: none"> <li>1. Where available, VAT shall troubleshoot all CPN-designated lines (e.g., leaks, occlusions, disconnects) on adult non-Oncology.</li> <li>2. CPN lines shall be used exclusively to administer CPN and shall not be accessed or interrupted for any reason (e.g., blood draws, piggybacking meds or other fluids, transport ) except in a life-threatening emergency                         <ol style="list-style-type: none"> <li>a. If the line is needed in an emergency, then it is no longer considered a dedicated line. PESS service must be notified.</li> <li>b. In rare instances where other means of blood sampling is not appropriate or available, PESS may approve blood draws through CPN line by the VAT. Physicians order is required.</li> <li>c. On Oncology Units, compatible medication is sometimes piggybacked with CPN.</li> </ol> </li> </ol>
Tubing	<ol style="list-style-type: none"> <li>1. CPN with or without lipid admixture administration sets shall be changed every Mon-Wed-Friday by VAT where applicable.</li> <li>2. Lipid administration sets shall be changed daily.                         <ol style="list-style-type: none"> <li>a. When lipids are administered as piggyback to CPN, the CPN administration set shall be changed daily or at completion of lipid infusion.</li> <li>b. No stopcocks or needleless connectors shall be used on CPN tubing.</li> </ol> </li> </ol>
Dressing/Site Care	<p>CPN central line dressing changes are performed every 7 days, or if dressing becomes wet, soiled or non-occlusive, by VAT, where applicable.</p> <ol style="list-style-type: none"> <li>1. For patients receiving CPN, the dressing change after showering shall be coordinated ahead of time with the VAT, where applicable.</li> <li>2. Central VAD dressing change is a sterile procedure and is located in the Nursing Practice and Organization Manual, IV Therapy: Central Venous Access Device, Procedure for changing dressing, #341.</li> </ol>
Cycling	<ol style="list-style-type: none"> <li>1. When patients are cycling on CPN, their CPN line is no longer considered “dedicated” and therefore, can be used for administration of other therapies, if no other line or venous access is available.</li> <li>2. A Clave connector should be placed on the line, if patient is cycling.</li> <li>3. CPN infusions should not be interrupted during cycling infusions.</li> <li>4. CPN should be cycled via Hohn, PICC, implanted port or tunneled central line.</li> </ol>
Weaning/Discontinuing	<ol style="list-style-type: none"> <li>1. The hourly rate should be decreased by ½ for 1 hour before discontinuing CPN.</li> <li>2. If CPN runs out or is not available, MD shall be notified and, D10W infused at the previously ordered CPN rate.</li> <li>3. A blood glucose level shall be checked 1 hour after D10W is started or CPN/PPN is stopped.</li> </ol>
PPN	
Orders/Solution	Standardized order set/form should be utilized to order PPN
Line Selection	<ol style="list-style-type: none"> <li>1. PPN may be infused through a peripheral or central VAD                         <ol style="list-style-type: none"> <li>a. PPN infused peripherally must contain lipids</li> <li>b. If using a peripheral route, a 20 gauge or larger PIV is recommended</li> </ol> </li> </ol>

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Tubing	PPN tubing shall be changed every day with solution change
Dressing	PPN line dressings are the responsibility of the patient's nurse, unless infusing through a PICC.
Weaning	<ol style="list-style-type: none"><li>1. PPN does not need a weaning period prior to discontinuing.</li><li>2. A blood glucose level shall be checked 1 hour after CPN/PPN is stopped.</li></ol>