



The latest from the leader in vascular access education



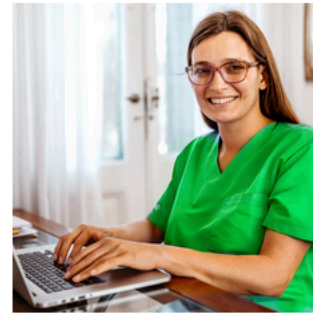
PICC Excellence Newsletter

March 2025



It's not just luck that lets skilled vascular access practitioners hit a vein on the first stick: it's a commitment to excellence and pursuing further education. A vascular access certification like [CPUI](#) or [CNPI](#) is the pot of gold at the end of the rainbow, leading to career advancement and higher pay.

Start your path toward PICC certification and don't forget to wear your St. Patrick's Day green!



Where's Nancy?

Dr. Moureau presented "Emerging Perspectives on the Prevention of Vascular Access Device-Associated Hospital Onset Bacteremia and Complications" at the Northeast Georgia Regional Infection Prevention Symposium on March 7. Her next stop is the INS annual meeting in Las Vegas!

Test Your Knowledge on the Importance of Documentation

The Nurses Service Organization (NSO) has published its 4th Edition of the [NSO/CNA Nurse Liability Claim Report](#). Using data and cases from claim files, it has important recommendations designed to help nurses improve patient outcomes and reduce the risk of malpractice.

The big takeaway? The importance of documentation. Document every nursing action in accordance with your facility's requirements, collect patients' medication histories and record any signs of adverse reactions to treatments or medications, communicate with the patient's care team about any test results and provide documented patient education throughout their encounter with you.

Read over the [Nurse Spotlight](#) and Claim Report and then take the NSO's [quiz](#) to test your knowledge!

Q&A with Dr. Nancy Moureau



Dr. Nancy Moureau offers counsel to hundreds of practitioners around the world. Each month we share a question from a colleague, which she answers pulling from her decades of experience in the field. If you have a question for Dr. Moureau, email it to info@piccexcellence.com.

QUESTION

If there is a suitable entry point – say basilic vein – in the mid or green zone and it meets the criteria of 4 Fr PICC into a 4mm vein or larger, but then as you scan the vein up proximally it enlarges or converges to become a lovely 6 mm brachial, yellow zone, requiring a tunnelled 2-step procedure, where would you insert?

ANSWER

In cases where the patient is, for example, having a PICC for chemotherapy, and there is an option to insert in either place, would you routinely insert in the mid zone or higher up into a larger vein and tunnel down?

This depends on vein size and catheter to vein ratio. You can use the top portion of this [chart](#) to indicate optimal vein size for the PICC. Ultimately, the best method to answer your questions is to collect the data and compare while remembering the standard to use the smallest catheter size and least number of lumens for the prescribed therapy.

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Upcoming Workshops

Adult PICC/Ultrasound

[Orlando: April 24-25](#)

[Atlanta: May 1-2](#)

Greenville Mastery Learning

[Ultrasound Guided PIV: April 14](#)

[IV Therapy: April 15](#)

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