

# Having a Hickman Line

This leaflet can be made available  
in alternative languages / formats on request.

如有需要，本传单可提供其他语言/版式  
此單張的其他語言/格式版本可按要求提供

Na żądanie ta ulotka może zostać udostępniona  
w innych językach/formatach.

Whiston Hospital  
Warrington Road,  
Prescot, Merseyside, L35 5DR  
Telephone: 0151 426 1600

St Helens Hospital  
Marshall Cross Road,  
St Helens, Merseyside, WA9 3DA  
Telephone: 01744 26633

 /sthknhs  @sthk.nhs  
[www.sthk.nhs.uk](http://www.sthk.nhs.uk)

**Author:** IR Lead, Consultant and Nurse  
**Department:** Interventional Radiology  
**Document Number:** STHK1786  
**Version:** 001  
**Review Date:** 01 / 03 / 2025

## Introduction

This leaflet has been given to you to help you understand your Hickman line and has been prepared by the staff in the X-Ray department at Whiston Hospital. If you have any questions or concerns, or would like to know about alternative treatment after you have read this, please speak to the specialist team who referred you for your Hickman line.

## What is a Hickman line?

A Hickman line is a soft, flexible tube that is inserted (tunneled) under the skin of your chest into a vein. The tip of the tube sits in a large vein just above your heart. The other end of the line hangs outside your body, from your chest. (See fig 1 below).

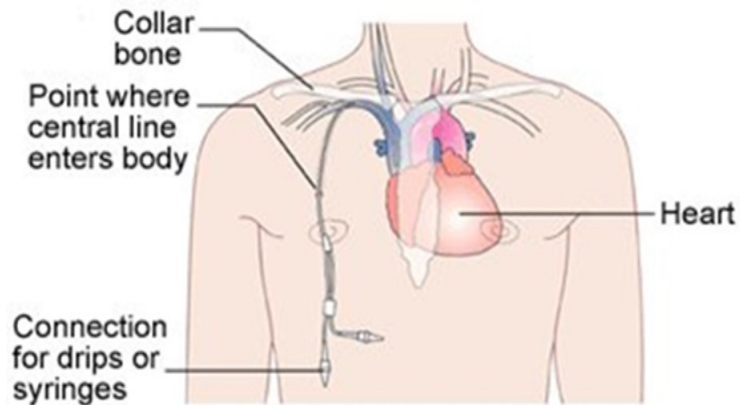


Diagram showing a central line  
Copyright © CancerHelp UK

The benefit of this procedure is that it will save you the discomfort of having needles inserted into your veins every time you have treatment. You can go home with the line in place and can be left for weeks or months.

## If your line falls out

Bear down or hold your breath until you cover the site with gauze or your hand.

Apply pressure for about 5 minutes or until bleeding stops.

Notify your nurse or doctor immediately.

**Watch for signs and symptoms of infection and please contact your ward immediately if you are experiencing any of the following:**

- The skin around the line becomes red or inflamed, or any swelling at the site
- Leakage from the site
- Pain at the site
- A fever of greater than 38°C or 100°F
- Chills and shaking
- Difficulty when flushing the line.

## Going home and aftercare

If you need immediate treatment, you may be staying in hospital after the line has been inserted.

However, if you need treatment for a long period of time you may be discharged from hospital with your Hickman line still in.

The nurses will teach you how to look after your line before you go home.

If you have stitches they may need to be removed after 2 weeks, but may be dissolvable.

You need to keep the dressing clean and dry.

Do not touch the line until your hands have been washed with soap and water.

Check the cap connections every day and make sure they are tight, make sure the clamps are closed at all times.

Do not use safety pins or sharp objects around your line. Keep nail varnish remover and other strong chemicals away from your line.

These things can damage your line.

It is ok for you to bath or shower but you must keep the line and the dressing dry by covering them with plastic and taping it to your body.

You will be able to continue with normal activities as discussed with your doctor.

To prevent damage to the Hickman line try to bend with your knees rather than at the waist and do not do excessive upper body exercise at work or in leisure whilst your line is in place.

## Risks

Hickman line insertion is a safe procedure but as with any medical treatment there are a few risks and complications.

It is possible for an infection to develop inside or outside the line, it occurs in up to 25% patients, if this happens you would require antibiotics and/or the line to be removed.

There are other very rare risks that may occur including:

- Bruising around the wound site, called a hematoma, happens in less than 0.5% patients.
- Pneumothorax (leak of air from the lung due to puncture with the needle) occurs in less than 0.1% patients.
- Puncture of an artery occurs in 1% patients.
- Clotting of the line or the vein that the line is in can occur in 3% patients.

We will discuss the risks and benefits in detail before the procedure.

### **However, if you are diabetic or take warfarin:**

If you take warfarin and are unsure of what preparation to take regarding your medication please ring:

**0151 430 1233**

And ask to speak to a Radiographer or nurse.

## On the day of my appointment

You may eat a light early breakfast.

Please take all your medicines as normal.

## Preparation for Examination

You will be admitted to hospital, either as a day case or an inpatient (depending on your treatment plan).

On the ward your nurse or doctor will ask you several questions about your health and current medication.

Your blood pressure and pulse will also be checked.

They may need to take some blood for tests.

You will need to change into a hospital gown.

You will be transferred to the X-ray department on a trolley.

The procedure usually takes 30 minutes to 1 hour, but may take longer.

## During the procedure

In the X-Ray room you will lie on a special table. Your neck and chest will be cleaned with antiseptic and you will be covered with a sterile sheet. The doctor will give you an injection of local anesthetic to numb the skin in your neck just by your collar bone and on your chest. This will cause some stinging initially then go numb. The procedure should not cause you any pain.

Throughout the procedure the nurse will be with you, who will monitor your pulse and blood pressure. Please let the nurse know if you feel any discomfort. The Hickman line will be tunneled under your skin from the chest to the neck. Once it is at your neck it will be placed into a large vein. The doctor will then put stitches/glue and a dressing to your skin to hold the Hickman line in place.

## After the procedure

You will go back to the ward where you will need to rest in bed for a couple of hours.

Your ward nurse will record your pulse and blood pressure regularly.

If all is well, after a few hours you should be able to go home.

Once your line is in place you may feel a dull ache over the shoulder area for a few days.

Discomfort varies with each person.

You may not feel anything. You may take simple pain killers as required.