**VENOUS ACCESS DECISION TREE**

**THERAPEUTIC HYPOTHERMIA**
- UVC
  - Unsuccessful
    - Consider LOW LYING UVC until stable access obtained
      - EPIV
        - DIVA
          - EPIV
  - ≤ D12.5 STABLE
    - PIV
  - ≤ D12.5 UNSTABLE
    - EPIV
  - > D12.5
    - UVC
      - Unsuccessful
        - Consider LOW LYING UVC for babies < 1kg until PICC placement
          - EPIV
            - If Vessel Supports 2hr
              - IV Therapy <5 DAYS
                - PIV
              - IV Therapy ≥5 DAYS
                - PICC
          - Unsuccessful
            - 5-29 DAYS
              - EPIV
            - >29 DAYS
              - PICC
      - Unsuccessful
        - Vascular access consult (2-PIV/EPIV/PICC)

**WEIGHT</1500GM**
- UVC
  - Unsuccessful
    - Consider LOW LYING UVC for babies < 1kg until PICC placement
      - EPIV
        - If Vessel Supports 2hr
          - IV Therapy <5 DAYS
            - PIV
          - IV Therapy ≥5 DAYS
            - PICC
      - Unsuccessful
        - 5-29 DAYS
          - EPIV
        - >29 DAYS
          - PICC
  - Unsuccessful
    - Vascular access consult (2-PIV/EPIV/PICC)

**WEIGHT 1500-1800GM +IUGR**
- EPIV
  - If Vessel Supports 2hr
    - IV Therapy <5 DAYS
      - PIV
    - IV Therapy ≥5 DAYS
      - PICC
  - Unsuccessful
    - 5-29 DAYS
      - EPIV
    - >29 DAYS
      - PICC

**ANTIBIOTICS**
- EPIV
  - *UVC
    - Unsuccessful
      - Vascular access consult (2-PIV/EPIV/PICC)

**CARDIAC/PROSTAGLANDINS**
- EPIV
  - *UVC
    - Unsuccessful
      - Vascular access consult (2-PIV/EPIV/PICC)

**OSMOLARITY**
- UVC
  - ≤ 1050 mOsm/L
    - EPIV
  - > 1050 mOsm/L
    - DIVA
      - Unsuccessful

**DIVA= DIFFICULT IV ACCESS**
*Refer to PIV Insertion Algorithm*

- PIV
- UVC
- PICC

Treat Low Lying UVC as non-central access

*Discuss UVC placement with Cardiology*

---

This is a guideline. While the guideline is useful in approaching decisions about venous access, clinical judgement and/or new evidence may favor an alternative plan of care.

Last Updated 4/17/20