

## Clinical Cases: StatSeal Powder to Replace Conventional Dressings and Intervention for CVC Sites

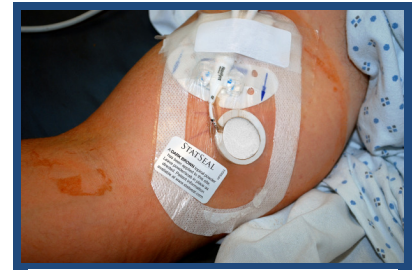
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### Introduction

Bleeding and oozing from CVC sites can cause increased challenges for clinicians in terms of dressing supplies, workload and patient care. Conventional interventions were found to be ineffective for three clinical cases with bleeding, oozing CVC sites. A topical powder was then used to successfully stop the bleeding and keep the CVC sites dry and intact.

Conventional, previous interventions included:

- Calcium sodium alginate dressing
- Oxidized cellulose gauze dressing
- 4x4 gauze, abdominal pads and “pink” tape to “make occlusive and apply pressure”
- Manual pressure



StatSeal Powder and Powder Containment Device applied to site.

### Three Clinical Cases

12.5 Fr triple lumen tunneled, cuffed catheter Right internal jugular insertion Chest area exit site; sutured	4 Fr Peripherally Inserted Central Catheter (PICC) Right upper basilic insertion No sutures at site	13.5 Fr Percutaneous hemodialysis catheter Right subclavian insertion Sutures at site
<ul style="list-style-type: none"> <li>• Male, 47 years</li> <li>• Low platelet count</li> <li>• New diagnosis of leukemia; Tumour Lysis Syndrome</li> <li>• Bruising, bleeding gums</li> <li>• “Urgent” insertion, at bedside</li> </ul>	<ul style="list-style-type: none"> <li>• Female, 32 years</li> <li>• Normal blood counts</li> <li>• Traumatic insertion under fluoroscopy by IR</li> <li>• Unable to thread 5Fr PICC so threaded 4Fr PICC instead</li> </ul>	<ul style="list-style-type: none"> <li>• Male 62 years</li> <li>• Acute onset kidney failure</li> <li>• ↑↑ serum creatine</li> <li>• ↓↓ eGFR</li> <li>• “Urgent” insertion, at bedside</li> </ul>

### Methods

Following unsuccessful conventional interventions to stop bleeding and oozing, the Clinical Nurse Educator recommended application of topical powder. StatSeal was applied according to instructions and two minutes of manual pressure was applied. A sterile, semi-permeable, transparent dressing was then applied to site per protocol.

### Outcomes

- No oozing, bleeding through dressing after proper application of StatSeal
- No unscheduled dressing changes required
- Daily visual inspection and assessment done
- StatSeal sealed the sites for seven days; routine dressing changes resumed weekly as per protocol

## “Hard Cost” Implications

- No further use of Calcium Sodium Alginate dressing at a product cost of \$10 per application
- No further use of oxidized cellulose gauze at \$60+ per application
- No further use of gauze, abdominal pads, “pink” tape, gloves

## “Soft Cost” Implications

- No need to stand at patient bedside “holding down dressing” for one to two hours at a time to ensure no leaking or oozing
- No need to re-suture line
- Increased clinician confidence that patient is safe and will not “bleed out”
- Increased patient satisfaction and confidence

## Conclusions

For patients with CVCs such as large-bore tunneled, large-bore percutaneous and PICCs, StatSeal is an effective intervention to stop bleeding and oozing compared to conventional interventions in the acute clinical setting.

## Implications for Practice

These three cases provide validation to continue to use StatSeal product for patients to reduce hard and soft costs when dealing with bleeding and oozing CVC insertion sites. StatSeal seals insertion sites to keep them dry and intact for 7 days.

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*StatSeal Powder is a non-prescription topical powder that quickly forms a seal to stop external bleeding and oozing from wounds and procedures. The powder’s ingredients are a hydrophilic polymer and potassium ferrate.*

For more information about StatSeal, please visit [www.statseal.com](http://www.statseal.com) or call the manufacturer at 1-800-722-7559.