

## Preparing to provide/expand IV therapy services and care

1. Follow scope of practice and formal education requirements of your State Board of Nursing or Health Department regarding personnel allowed to insert peripheral indwelling IV catheters, manage infusions, and discontinue infusions.

2. Prepare clear policies and procedures for IV therapy.

A. Explain procedure to patient (include family as appropriate or required); provide written medication information when possible

B. Obtain appropriate consent if needed

C. Assemble supplies (determine who is preparing medicated infusion and follow guidelines for safe and sterile infusion preparation)

IV catheter, insertion materials or kit (gloves, skin prep, tourniquet, tape, transparent dressing, infusion bag with primed tubing or primed lock, sterile 2x2, site label)

D. Perform venipuncture

Apply tourniquet

Select site (See [next page](#) for veins commonly used for peripheral IV's)

Cleanse site

Stabilize site, puncture skin, and enter vein; observe for flashback of blood

Remove needle and activate safety device

Attach tubing/lock to indwelling catheter

Begin prepared infusion or flush lock to determine patency

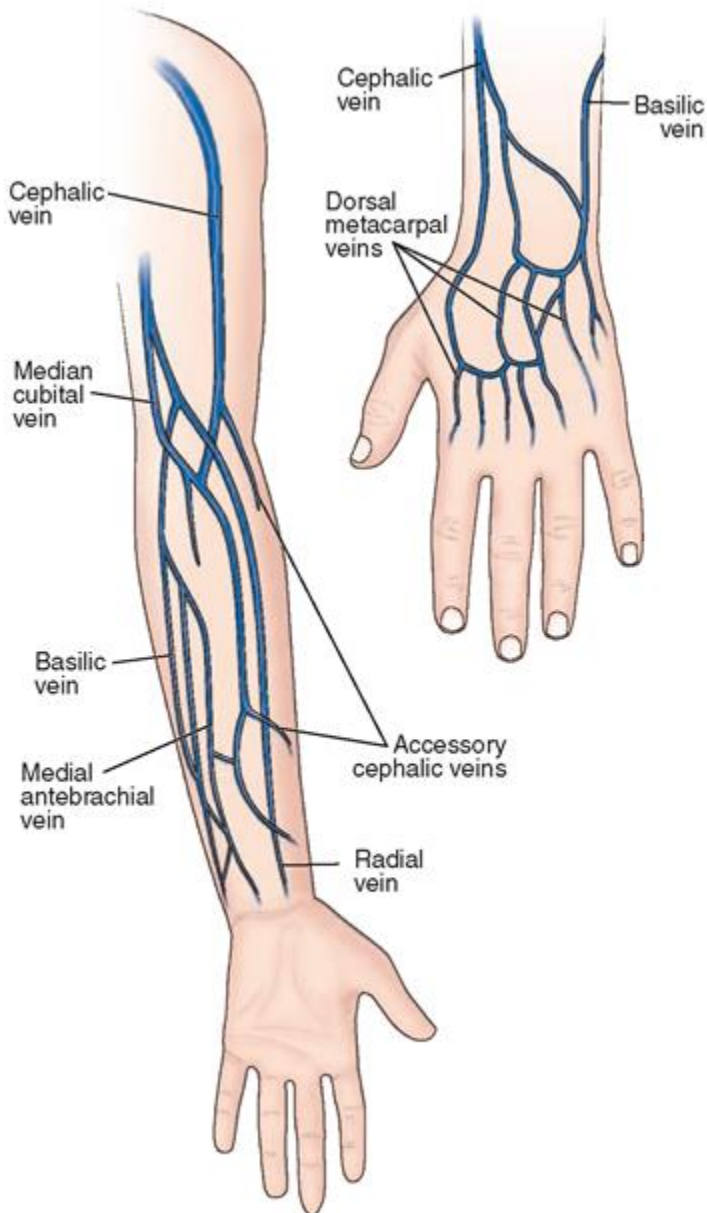
Apply transparent dressing

Secure tubing with tape

Apply label with start date, time, initials

Document in patient record including location of IV site, size of catheter inserted, date and time.

### Common IV sites in adults



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From <http://what-when-how.com/nursing/administration-of-injectable-medications-pharmacology-and-administration-of-medications-nursing-part-3/>

E. Administer infusion, medication(s) as ordered

Review provider order

Right patient (use two identifiers)

Right medication(s) READ LABEL CAREFULLY

Right dose READ LABEL CAREFULLY

Right time

Right route

Right infusion rate according to guidelines, medication information

F. Monitor patient during infusion including site and signs of allergic reaction or anaphylaxis.

Observe for

Stop infusion immediately if allergic reaction or infiltration is suspected and immediately contact appropriate clinician to evaluate. Keep vein open with 0.9% Normal Saline infusion.

G. Monitor patient following infusion; follow medication infusion with infusion flush of 0.9% Normal Saline to assure complete dose of medications is being delivered. Lock site for future use OR remove indwelling catheter.

3. Train staff on IV therapy policies and procedures; document.

4. Train staff and have medication information available for all medications being infused.

5. Train staff and have resource materials, supplies, and emergency medications available to the patient and caregivers when IV medications are being administered (may require 911 call in community setting).

6. Document staff training and competency in medication handling/preparation, IV initiation, infusion management, infusion/catheter discontinuation, emergency management, and medication knowledge as appropriate to scope of practice, role, and medication(s) to be given by infusion.

7. Monitor staff performance of IV therapy and related documentation.

8. Complete adverse event report for all adverse events and all medication errors related to IV medication infusions.