Intravenous Therapy
WEST COAST UNIVERSITY

Student:

		Peer 1	Peer 2	Faculty Evaluation
NPSG	Wash hands per CDC guidelines.			
	Provide patient privacy.			
NPSG	Introduce yourself.			
NPSG	Identify patient correctly using two identifiers (check to chart).			
NPSG	Verify allergy status.			
General Survey				
	Perform environmental safety check.			
	Ensure proper body mechanics.			
	Gather all supplies, equipment, and PPE as needed.			
	Verify MD order on Chart. Perform medication checks.			
	Assess need for procedure. Educate patient about the procedure.			
Preparing intravenous (IV) tubing				
	Remove IV solution from packaging and gently apply pressure to bag while inspecting for leaks. Check color, clarity, and expiration date.			
	Remove primary IV tubing and extension tubing from packaging.			
	Remove caps from proximal end of extension tubing and distal end of primary tubing and connect.			
	Move roller clamp 1-2 inches below drip chamber and close clamp.			
	Perform Medication checks.			
	Remove cover from tubing port on bag. Remove cap insertion spike and insert spike into tubing port of bag. If using glass bottle, cleanse rubber stopper before inserting spike.			
	Hang bag on IV pole and squeeze drip chamber 2 or 3 times, to fill at least halfway. Loosen cap from end of tubing and open clamp to prime tubing.			
	Check entire length for air bubbles; tap tubing and invert ports to remove air. Replace or tighten cap on end of tubing			
	Place time tape on bag and tubing label on tubing near drip chamber.			
Initiating IV therapy				
	Place tourniquet on patient's arm. Inspect hand and arm, palpating and selecting vein.			
	Release tourniquet.			
	Prepare supplies. Open IV insertion kit. Prime IV extension tubing.			
	Cleanse site and allow to dry. Reapply tourniquet			
	Anchor vein by puling skin taut below insertion site. Insert IV catheter. Confirm blood return.			
	With placement confirmed, lower and advance the catheter. Advance catheter until hub rests against insertion site.			
	Remove needle and activate safety device.			
	Stabilize catheter and remove tourniquet.			
	Connect extension tubing to catheter hub. Confirm patency and flush the line with normal saline slowly.			
	Secure IV catheter. Apply transparent dressing over insertion site up to where hub and tubing connect.			
	Loop tubing next to IV site and tape to patient's arm. Label as per facility policy.			
Replacing IV tubing				
	Place prepared IV bag and tubing near bedside. Identify patient. Perform medication checks.			
	Remove cover from tubing port on bag.			
	Take empty bag off IV pole and invert it. Move roller clamp to off position.			
	Remove spike from bag. Invert new bag and insert spike. Hang new bag on IV pole.			
	Inspect tubing for air bubbles; gently tap to remove them. For large amount of air, cleanse port below air and attach needless syringe to port, then aspirate air into syringe.			
	Verify that drip chamber is at least half full.			
	Adjust roller clam to set appropriate rate.			
Replacing IV tubing				
	Place new tubing near bedside. Identify patient. Verify when tubing was last replaced.			
	Remove tubing from packaging, leave protective caps in place.			
	Connect extension tubing to primary tubing. Place roller clamp on new tubing in off position. Place roller clamp on existing tubing in off position.			
	Take empty bag of IV pole and invert it. Remove spike from bag. Drape tubing over pole or table. Remove protective cap from spike and insert into bag.			
	Hang bag on IV pole and compress drip chamber 2-3 times to fill at least halfway. Loosen cap and roller clamp to prime tubing.			

Inspect tubing for air bubbles; tap to remove them. Place end of tubing near patient. Prepare supplies.			

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Remove tape securing tubing to patient's arm. Place gauze pad under catheter's hub. Stabilize catheter and detach existing tubing from hub.			
Attach end of new tubing to hub and secure it. Open roller clamp to check patency.			
Remove gauze and secure tubing to patient's arm. Adjust roller clamp to set rate.			
Preparing a Saline Lock			
Remove tubing and injection cap from packaging.			
Remove cap from proximal end of tubing and from injection cap and connect them.			
Cleanse and attach saline-filled syringe. Remove cap from distal end of tubing and prime tubing.			
Invert access port and tap to fill it with air and remove air. Inspect tubing for air bubbles and tap to remove them. Place cap back on distal end of tubing and leave syringe attached to cap.			
Gather additional supplies.			
Converting an IV infusion to a saline lock			
Place supplies near bedside. Assess IV site. Identify patient. Move roller clamp to off position.			
Remove IV lock adapter from packaging and cleanse. Attach 10-mL syringe filled with normal saline and prime adapter.			
Move slide clamp on extension tubing to pinch off tubing. Disconnect primary tubing from extension tubing. Attach primed lock adapter to extension tubing and flush to confirm patency.			
Assess site for pain, redness, and swelling. Secure tubing to patient's arm.			
Converting a saline lock to an IV infusion			
Place supplies near bedside. Identify patient. Perform medication checks. Move slide clamp on saline lock to pinch off tubing.			
Remove saline lock adapter. Flush to check patency. Assess site for pain, redness, and swelling.			
Remove protective cap from end of primary tubing and attach to extension tubing			
Stabilize tubing. Set flow rate. Secure tubing to patient's arm.			
Discontinuing a peripheral IV catheter			
Place supplies near bedside. Identify patient.			
Move roller clamp on tubing to off position. Loosen edges of dressing and tape. Place gauze pad over IV site.			
Keeping catheter parallel to skin, pull straight back. Apply pressure with gauze pad to site.			
Inspect catheter. Remove gauze pad. Assess site. Apply clean gauze and tape in place.			
Safety	**Ensure safe environment: bed to appropriate height, brakes locked, appropriate side rails up and call light within reach**		
NPSG	Wash hands per CDC guidelines		

PEER #1:

PEER #2:

Faculty Evaluator:

Comments: