

## IV DIRECT MEDICATION ADMINISTRATION

Integrative Practicum (IP) Student/Preceptor Competency Validation Tool

<b>STUDENT NAME</b>	<b>POSITION</b>	<b>UNIT</b>
<b>PRECEPTOR NAME</b>	<b>POSITION</b>	<b>UNIT</b>
<input type="checkbox"/> <b>IV DIRECT ILEARN COMPLETED</b>		

INSTRUCTIONS
<p>Self-Assessment:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> I am an IP nursing student and have completed the <i>Intravenous Direct Administration</i> iLearn.</li> <li><input type="checkbox"/> Prior to performing this skill WITH my preceptor, I achieved a minimum score of 80% on the knowledge test at the end of the iLearn and provided a printout of this page with my full name, date, and signature as proof of this completion.</li> </ul> <p>Preceptor:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> When you are ready to perform this skill, consult the clinical educator of the unit on which you're practicing, and you and your preceptor can then complete the competency validation tool together. The preceptor must be competent in this skill prior to evaluating the student. By initialing each section of the competency validation tool, both parties acknowledge that the IP student completed the procedure(s) outlined in each section safely and accurately.</li> </ul>

PROCEDURE (FOR ALL IV DIRECT ADMINISTRATION)	STUDENT	PRECEPTOR
1. Check order (right medication, dose, reason, etc).		
2. Consult LHSC's Parenteral Drug Administration Manual (PDAM) to determine the following: <ul style="list-style-type: none"> <li><input type="checkbox"/> Can I give this medication via this route?</li> <li><input type="checkbox"/> Do I have to reconstitute or dilute the medication? If so, do I know which and how much diluent to use?</li> <li><input type="checkbox"/> Do I have the ability and resources to monitor the patient after giving the medication?</li> <li><input type="checkbox"/> Am I familiar with the potential adverse effects associated with administering the medication and how to manage these effects?</li> </ul>		
3. Prepare the medication as per the PDAM.		
4. Perform hand hygiene.		
5. Don gloves (minimal PPE required) – please don additional PPE if required.		

NO INFUSION (SALINE LOCKED)	STUDENT	PRECEPTOR
1. Remove Curocap (if present). If no Curocap present, scrub needleless connector with chlorhexidine swab for at least 15 seconds and allow to dry for at least 30 seconds.		
2. Confirm patency of line: <ul style="list-style-type: none"> <li><input type="checkbox"/> Peripheral IV (PIV)- Flush with 10 mL Normal Saline (NS) syringe → Assess for signs and symptoms of infiltration (e.g., pain, redness, swelling, etc).</li> <li><input type="checkbox"/> Central line (CVAD)- Flush with 10 mL NS syringe → Flush 5 mL NS, aspirate for blood return, and flush the remaining volume.</li> </ul>		
3. Attach needleless syringe containing medication to the end of the device and infuse medication at the <b>**PRESCRIBED RATE**</b> . <ul style="list-style-type: none"> <li><input type="checkbox"/> Refer to PDAM for drug specific information .</li> </ul>		
4. Observe infusion site and assess patient response and monitor for signs and symptoms of adverse reactions while administering medication (e.g., rash, anaphylaxis, urticaria, extravasation, etc).		
5. Flush line with NS. <ul style="list-style-type: none"> <li><input type="checkbox"/> PIV- Flush with <b>1 X 10 mL NS syringe <u>**AT THE SAME RATE AS THE MEDICATION**</u></b> to avoid speed shock.</li> <li><input type="checkbox"/> CVAD- Flush with <b>2 X 10 mL NS syringes → 1<sup>st</sup> 10 mL NS syringe <u>**AT THE SAME RATE AS THE MEDICATION**</u> to avoid speed shock; 2<sup>nd</sup> 10 mL NS syringe PUSH/STOP (turbulent) motion.</b></li> </ul>		
6. Clamp device, attach <b>NEW</b> Curocap, and continue to monitor patient response.		

***Please submit this record to your clinical educator as part of your ongoing documentation of competence.***

INFUSION	STUDENT	PRECEPTOR
1. Determine if the medication and IV infusion are compatible. <input type="checkbox"/> Consult the Micromedex for IV compatibility.		
INFUSION (COMPATIBLE SOLUTION)	STUDENT	PRECEPTOR
1. Remove Curocap (if present). If no Curocap, scrub needleless connector with chlorhexidine swab for at least 15 seconds and allow to dry for at least 30 seconds.		
2. Select an injection port on the administration set <b>CLOSEST TO THE PATIENT (DO NOT DISCONNECT THE SET FROM THE PATIENT)</b> .		
3. <b>DO NOT</b> stop the pump or clamp the line.		
4. Confirm patency of line: <input type="checkbox"/> PIV- Flush with 10 mL Normal Saline (NS) syringe → Assess for signs and symptoms of infiltration (e.g., pain, redness, swelling, etc). <input type="checkbox"/> CVAD- Flush with 10 mL NS syringe → Flush 5 mL NS, aspirate for blood return, and flush the remaining volume.		
5. Attach needleless syringe containing medication to the lowest port and infuse medication at the <b>**PRESCRIBED RATE**</b> . <input type="checkbox"/> Refer to PDAM for drug specific information.		
6. Observe infusion site and assess patient response and monitor for signs and symptoms of adverse reactions while administering medication (e.g., rash, anaphylaxis, urticaria, extravasation, etc).		
7. Flush line with NS <input type="checkbox"/> PIV- Flush with <b>1 X 10 mL NS syringe **AT THE SAME RATE AS THE MEDICATION**</b> to avoid speed shock. <input type="checkbox"/> CVAD- Flush with <b>2 X 10 mL NS syringes</b> → 1 <sup>st</sup> 10 mL NS syringe <b>**AT THE SAME RATE AS THE MEDICATION**</b> to avoid speed shock; 2 <sup>nd</sup> 10 mL NS syringe PUSH/STOP (turbulent) motion.		
8. Allow the IV infusion to continue as prescribed, attach <b>NEW</b> Curocap, and continue to monitor patient response.		
INFUSION (INCOMPATIBLE SOLUTION)	STUDENT	PRECEPTOR
1. Remove Curocap (if present). If no Curocap present, scrub needleless connector with chlorhexidine swab for at least 15 seconds and allow to dry for at least 30 seconds.		
2. Select an injection port on the administration set <b>CLOSEST TO THE PATIENT (DO NOT DISCONNECT THE SET FROM THE PATIENT)</b> .		
3. <b>STOP</b> the pump and <b>CLAMP</b> the line .		
4. Confirm patency of line: <input type="checkbox"/> PIV- Flush with 10 mL Normal Saline (NS) syringe → Assess for signs and symptoms of infiltration (e.g., pain, redness, swelling, etc). <input type="checkbox"/> CVAD- Flush with 10 mL NS syringe → Flush 5 mL NS, aspirate for blood return, and flush the remaining volume.		
5. Attach needleless syringe containing medication to the lowest port and infuse medication at the <b>**PRESCRIBED RATE**</b> . <input type="checkbox"/> Refer to PDAM for Drug Specific Information		
6. Observe infusion site and assess patient response and monitor for signs and symptoms of adverse reactions while administering medication (e.g., rash, anaphylaxis, urticaria, extravasation, etc).		
7. Flush line with NS <input type="checkbox"/> PIV- Flush with <b>1 X 10 mL NS syringe **AT THE SAME RATE AS THE MEDICATION**</b> to avoid speed shock. <input type="checkbox"/> CVAD- Flush with <b>2 X 10 mL NS syringes</b> → 1 <sup>st</sup> 10 mL NS syringe <b>**AT THE SAME RATE AS THE MEDICATION**</b> to avoid speed shock; 2 <sup>nd</sup> 10 mL NS syringe PUSH/STOP (turbulent) motion.		
8. Unclamp IV administration set, restart pump, attach <b>NEW</b> Curocap, and continue to monitor patient response.		

***Please submit this record to your clinical educator as part of your ongoing documentation of competence.***