

Replacement of Intravenous Tubing and Intravenous Solution Return Demonstration

Student Name: _____ Student Signature: _____

Evaluator Signature: 1st attempt _____ Date: _____ Satisfactory* Unsatisfactory^

Evaluator Signature: 2nd attempt _____ Date: _____ Satisfactory* Unsatisfactory^

Evaluator Signature: 3rd attempt _____ Date: _____ Satisfactory* Unsatisfactory^

**** Critical Behaviors that need to be stated or done in order to pass the skill.**

IV PUMP specific skills highlighted in GREY

PERFORMANCE BEHAVIORS	S*	U^	COMMENTS
<u>Assessment</u> 1. Avoid distractions 2. Check patient's chart for a. Active physician's order b. ** Allergies, including sensitivity to latex and tape			
3. Check Medication Administration Record (MAR) a. Date b. Patient name c. IV solution, volume, flow rate, and duration			
4. ** Verify IV access: assess site for patency, if current tubing has a Y-port and note IV solution infusing			
<u>Planning</u> 5. Identify expected outcomes: know actions, special nursing considerations, safe flow rate, ranges purpose of administration, and potential adverse effects of infusion therapy.			
6. Identify teaching that may need to be provided to the patient.			
7. Gather equipment a. EHR or IV infusion record b. IV solution label c. Primary IV tubing d. IV tubing label (96 hours) e. Alcohol swabs f. Tape g. Adhesive remover (if necessary) h. Gloves			
<u>Implementation</u> 8. ** Perform hand hygiene			
9. Prepare IV solution for only one patient at a time a. Read MAR and select the correct IV solution b. ** State the 6 rights of medication administration while comparing fluids to the MAR (First Check) c. Verbalize the solution is not expired d. Check for expiration date, discoloration, cracks or leaks			
10. ** Compare MAR to label on IV solution (Second Check) a. Verbalize the solution is not expired			
11. ** Confirm the correct IV flow rate			
12. Prepare the solution. <i>(If preparing in the room, these steps will be performed at step 17)</i> a. Spike new bag of IV solution, maintaining sterile technique while stabilizing port b. Fill drip chamber halfway c. Prime tubing, purging air within tubing d. Label tubing with date, time, and initials e. Label primary bag with patient ID label			
13. Take the IV bag, tubing and supplies to patient's room			

PERFORMANCE BEHAVIORS	S*	U^	COMMENTS
14. Upon entering room <ul style="list-style-type: none"> a. ** Perform hand hygiene b. Be aware of your spatial safety, have call light within reach c. Identify self d. ** Identify patient using two patient identifiers while comparing MAR to patient ID band e. ** Ask patient if they have any allergies and check for allergy band f. Ensure privacy g. Explain what is about to occur h. Allow for patient questions i. Raise bed to comfortable working height j. Don gloves 			
15. Collect data <ul style="list-style-type: none"> a. Patient status, condition of existing IV site and dressing b. Reconfirm patency of IV site, date and time last IV fluid hung, volume given at the time you change the bag c. Scan patient wrist band d. Scan IV fluids 16. ** Compare IV solution to MAR (Third Check) <ul style="list-style-type: none"> a. Verbalize that the solution is not expired 17. <i>If preparing tubing in the patient's room, perform steps 12a-e here</i>			
18. Prepare to replace tubing and IV fluids <ul style="list-style-type: none"> a. Hang new IV fluids onto pole b. Pause IV pump c. Clamp old IV tubing d. Close slide clamp on saline lock between insertion site and hub, then loosen any tape e. Open pump and remove old tubing f. Thread new IV tubing into IV pump and close pump with two hands g. Secure existing IV catheter at hub with non-dominant hand h. Disconnect old tubing from IV catheter hub with dominant hand, being careful not to remove IV catheter from arm i. Clean IV catheter hub with alcohol for 15 seconds and allow to dry j. ** Maintaining sterile technique, quickly connect new tubing into hub k. Unclamp IV tubing, open slide clamp on saline lock, and anchor new tubing with tape 			
19. Set flow rate according to the physician's order <ul style="list-style-type: none"> a. Select IV fluid to be infused b. Set flow rate (mL/hr) based on order in EHR c. Set volume to be infused (VTBI) d. Start infusion 			
20. **Correctly document medication on MAR or IV Solution Record			
21. Instruct patient to report any pain, redness, drainage, or swelling that may occur during infusion of the IV solution. 22. Dispose of used equipment.			
23. Before leaving room <ul style="list-style-type: none"> a. ** Reposition patient for comfort and safety b. ** Lower bed c. ** Raise appropriate side rails d. ** Leave call light and belongings in reach e. ** Perform hand hygiene 			
<u>Evaluation</u> 24. Verbalize need to return to patient's room to reassess the site, flow rate, and solution administered 25. Verbalize need to follow-up on therapeutics of IV therapy in a timely manner			

*S = Satisfactory, ^U = Unsatisfactory

**Critical Behaviors that need to be stated or done in order to pass the skill