



Policy code	CPP_DFA_INV_0120
Date	January, 2020
Purpose	To ensure a consistent procedural approach to intravenous (IV) drug administration.
Scope	Applies to Queensland Ambulance Service (QAS) clinical staff.
Health care setting	Pre-hospital assessment and treatment.
Population	Applies to all ages unless stated otherwise.
Source of funding	Internal – 100%
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Intravenous

January, 2020



Administration of medication via the IV route

• Evidence of a misplaced or dislodged IV cannula

Complications

- Pain or discomfort on medication administration
- Air embolus
- Infection, bacteraemia or sepsis
- A misplaced or dislodged cannula resulting in extravasation and possible tissue necrosis.

Procedure – Intravenous

- 1. Prepare the required dose of medication in an appropriate syringe.
- 2. Clean the SmartSiteTM needle free valve with an appropriate antimicrobial swab.
- 3. Insert the Luer-Lok™ syringe tip into the SmartSite™ valve and rotate 1/4 turn clockwise to secure the connection:
 - SmartSite[™] valve on an Alaris[™] (gravity flow) giving set: Administer medication (please note, occluding of the distal tubing is not required due to the Alaris™ one-way valve).
 - SmartSite™ valve on an Alaris™ 2-way extenion set (with clamps): Open clamp and administer medication.
 - SmartSite™ valve on a cannula: Support cannula and administer medication.
- Flush medication with sodium chloride 0.9%
- If using an Alaris™ 2-way extension set, close clamp.
- 6. Disconnect luer by securely holding SmartSite™ valve whilst turning syringe counter clockwise.



Additional information

- All IV cannulae should be checked for patency prior to each medication delivery.
- All parenteral medications must be prepared in an aseptic manner.

