

## Intravenous (IV) Therapy Skill Checklist

Student Name: \_\_\_\_\_ Course: \_\_\_\_\_ Date: \_\_\_\_\_

Instructor: \_\_\_\_\_ Overall Validation Grade: **S** or **U** (*circle one*)

Student Signature: \_\_\_\_\_

**Directions:** The checklist outlines actions that you will have to perform in order to successfully pass the IV therapy skill validation. Critical points are highlighted in bold. You will receive either a Satisfactory or Unsatisfactory for each section. If you receive an Unsatisfactory for a section, you will have to remediate and revalidate the entire skill.

IV Validation	Satisfactory S	Unsatisfactory U	Comments
<ol style="list-style-type: none"> <li>1. <b>Checked physician's order and gathered equipment and supplies. Introduced self, explained what procedure was to be done and why.</b></li> <li>2. <b>Performed hand hygiene, following infection control measures, and verified client's identity. Assessed for allergies (Latex, Tape, Antiseptics)</b></li> <li>3. Provided comfort and safety for client and self, including raising bed to appropriate height for procedure</li> </ol>			
<ol style="list-style-type: none"> <li>4. Prepared client: Assisted the client to a comfortable position, either sitting or lying. Exposed the limb to be used but provided for client privacy.</li> </ol>			
<ol style="list-style-type: none"> <li>5. Selected venipuncture site:               <ol style="list-style-type: none"> <li>A. Used client's nondominant arm. Identified possible venipuncture sites by looking for veins that are relatively straight.</li> <li>B. Checked agency protocol about shaving if site is very hairy.</li> <li>C. Placed towel or bed protector under extremity to protect linens.</li> </ol> </li> </ol>			
<ol style="list-style-type: none"> <li>6. Dilated the vein               <ol style="list-style-type: none"> <li>A. Placed extremity in a dependent position.</li> <li>B. Applied tourniquet firmly 15 to 20 cm (6 to 8 in.) above venipuncture site.</li> </ol> </li> </ol>			

<p>C. Explained that tourniquet may feel tight.</p> <p>D. For elders, placed arm in dependent position and did not use a tourniquet.</p> <p>E. If vein did not sufficiently dilate, massaged or stroked vein distal to site and in direction of venous flow toward heart. Encouraged client to clench and unclench fist.</p> <p>F. Lightly tapped vein with fingertips.</p> <p>G. If preceding steps failed to distend vein, removed tourniquet and wrapped the extremity in a warm, moist towel for 10 to 15 minutes.</p>			
<p>7. Minimized insertion pain as much as possible using ice, transdermal analgesic creams or intradermal injection.</p>			
<p><b>8. Applied clean gloves and cleaned venipuncture site.</b></p> <p><b>A. Cleaned skin at site of entry with a topical antiseptic swab.</b></p> <p><b>B. Used a back-and-forth motion for a minimum of 30 seconds to scrub the insertion site and surrounding area</b></p> <p><b>C. Permitted solution to dry on skin.</b></p> <p><b>D. Prepare equipment aseptic technique (set aside catheter, tegaderm, flush the extension set tubing)</b></p>			
<p>9. Inserted the catheter, and initiated the infusion.</p> <p>A. Removed catheter assembly from sterile packaging.</p> <p>B. Used nondominant hand to pull skin taut below entry site.</p> <p>C. Held the over-the-needle catheter at a 15- to 30-degree angle with needle bevel up, inserted catheter through skin and into vein.</p> <p><b>D. Once blood appeared in the lumen of the needle, lowered the angle of the catheter until almost parallel with the skin, and advanced the needle and catheter approximately 0.5 to 1</b></p>			

<p><b>cm (about 1/4 in) further. Held needle assembly steady, advanced the catheter until the hub was at the venipuncture site.</b></p> <p>E. If hematoma occurred, release tourniquet, removed needle, and applied pressure.</p> <p><b>F. Released the tourniquet.</b></p> <p><b>G. Put pressure on vein proximal to catheter to eliminate or reduce blood oozing out of catheter. Stabilized hub with thumb and index finger of nondominant hand.</b></p> <p><b>H. Carefully removed stylet, engaged needle-safety device, and connect distal end of extension set tubing to the hub. Flushed catheter with sterile normal saline. Maintain sterility. Placed stylet directly into sharps container.</b></p> <p><b>I. While maintaining sterility connect distal end of the extension set to the IV tubing. Initiated infusion as prescribed.</b></p>			
<p>11. Dressed and labeled venipuncture site and tubing according to agency policy. <b>Applied Tegaderm dressing to secure the site.</b></p> <p>A. Labeled dressing with date and time of insertion, type, gauge of catheter used, and nurse's initials.</p> <p>B. Applied an IV site protector, if available.</p> <p>C. Looped any tubing and secured it with tape.</p> <p>D. Discarded tourniquet. Removed and discarded gloves.</p>			
<p>12. Discarded all used disposable items in appropriate receptacles. Cleansed any blood spills according to agency policy.</p>			
<p>13. Returned bed to lowest height. Removed gloves and performed hand hygiene.</p>			
<p>14. Discontinuation of IV catheter</p>			

<ol style="list-style-type: none"> <li>1. Stopped fluids infusion and disconnect IV extension set from the IV tubing, if fluids were infusing.</li> <li>2. Pulled skin taut while removing dressing</li> <li>3. Removed IV catheter and inspected the tip for integrity while applying pressure at the site based on patient assessment.</li> <li>4. Disposed catheter appropriately</li> </ol>			
<ol style="list-style-type: none"> <li>15. Documented procedure, assessment data, and client's response.</li> <li>1. Date and Time</li> <li>2. Nurse</li> <li>3. Site Location</li> <li>4. Type/Size of catheter</li> <li>5. Number of attempts</li> <li>6. Dressing</li> <li>7. Solution</li> <li>8. Patient response</li> <li>9. Teaching</li> </ol>			