

Administration of IV Push/IV Bolus Medications

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.**

PERFORMANCE BEHAVIORS	S*	U^	COMMENTS
<u>Assessment</u>			
1. Avoid distractions			
2. Check Medication Administration Record (MAR)			
a. Date			
b. Patient name			
c. Drug name and dosage			
d. Time for administration			
e. Route of administration			
4. **Check patient allergies including sensitivity to latex.			
<u>Planning</u>			
5. Identify expected outcomes: know actions, special nursing considerations, safe dose ranges, purpose of administration, and adverse effects of medications to be administered. Know appropriate timeframe for administration of the IVP medication. Verify compatibility with IV Fluid, if IV fluid is hanging.			
6. Identify what teaching you might need to provide to the patient.			
7. Gather equipment			
a. EHR			
b. **Proper size syringe and needless adaptor or needle			
c. Alcohol swabs			
d. Gloves			
<u>Implementation</u>			
8. **Perform hand hygiene			
9. Prepare medication for only one patient at a time. State the **6 rights of medication administration comparing it to the MAR. Read MAR and select correct medication. ** (First check) Check expiration date.			
10. Compare MAR to label on vial, ampule, or prefilled syringe, verifying correct Medication. ** (Second check) Check expiration date.			
11. **Verbalize that you will calculate correct amount of medication to be given.			
12. Prepare medication in syringe using proper technique.			
a. Visually inspect medication for color, clarity, sediment.			
b. Firmly alcohol swab rubber stopper of vial			
c. **Inject air into vial in quantity of desired volume to be drawn into syringe			
d. **Withdraw correct dose (tap syringe to clear air from syringe and needle)			
e. **Recap syringe using scoop method for transport to patient's room			
f. If not administered immediately, clearly label syringe with the name dose and date.			

PERFORMANCE BEHAVIORS	S*	U^	COMMENTS
13. Carry prepared medication, vial(s), alcohol swab, and MAR to patient's room.			
14. Upon entering room: a. ** Perform hand hygiene b. Be aware of your spatial safety have the call light within reach c. Identify self d. **Identify patient using two forms of identification (i.e., Name, birth date, medical record number) while comparing MAR to patient wrist band e. **Ask patient if he/she has any allergies and check for allergy band. f. Assure privacy g. Explain what is about to occur and what medications will be administered. h. Allow for patient questions i. Raise bed to comfortable working height. j. Don gloves			
15. Collect data a. Patient status, and condition of existing IV site and dressing. b. Determine patency of site. c. Scan patient wrist band d. Scan medication e. Check label of vial, ampule, or prefilled syringe, comparing to MAR **(Third check) Check expiration date. 16. ** Correctly record medication on MAR a. Any pertinent collected data such as pain level.			
17. Prepare site for injection (IV Push medication) a. Choose the injection port closest to the IV insertion site. b. Cleanse the injection port with an alcohol swab. c. Remove the needle and attach the hub of the syringe to the injection port **Maintain sterile technique. d. Kink the IV tubing while administering the IV Push medication. e. Administer the medication in the appropriate time frame using the push the medication then pause method. f. Unkink the tubing and assess the IV fluid infusion rate.			
18. Monitor the patient for adverse reactions such as: cardiac arrhythmia, anaphylaxis and swelling redness of extravasation of the IV site			
19. Discard used syringe and needle a. Never recap a used needle b. Place the used syringe and needle in properly labeled container			
20. Before leaving room 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 f. Dispose of used equipment			
<u>Evaluation</u> 21. Verbalize need to follow up on therapeutic effects of medication (i.e., pain blood pressure, heart rate, fluid status, etc.) in a timely manner.			

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