PERFORMANCE CHECKLIST FOR ADMINISTERING IV MEDICATIONS BY INTRAVENOUS BOLUS

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13. Assessed the IV site for any signs of phlebitis or infiltration.

14. Performed hand hygiene and applied clean gloves.

15. Administered medication by intravenous push:
   A. Confirmed the bolus is compatible with the IV fluid.
   B. Selected the needleless injection port of the IV tubing closest to the patient.
   C. Cleaned the injection port with an antiseptic swab. Allowed it to dry.
   D. Inserted the needleless tip of the medication syringe through the center of the port.
   E. Occluded the IV line. If IV fluids are infusing by means of a pump, paused the pump if necessary while the IV bolus medication is being administered. Pulled back gently on the syringe’s plunger to aspirate for blood return.
   F. If the IV is patent, released the tubing and injected the medication within the amount of time recommended by agency policy, the pharmacist, or a medication reference manual. Used a watch to time the administration. Pinched the IV line while pushing medication, and released it when not pushing medication. If the IV fluids were compatible, allowed IV fluids to infuse when not pushing the medication.
   G. Withdrew the syringe and rechecked the IV fluid infusion rate. If the IV pump was paused, restarted the infusion at the desired rate.
   H. Stopped the infusion immediately and changed the IV tubing if cloudiness occurs.
   I. Cleaned the selected injection port with an antiseptic swab. Allowed it to dry.
   J. Pinched the IV line, attached a prefilled normal saline flush to the port. Pulled back gently on the plunger of the syringe to aspirate for blood return. Flushed with 10 mL of normal saline. Removed the syringe.
   K. Cleaned the injection port with a new antiseptic swab, and allowed it to dry.
Attached a medication syringe to the selected injection port. Using a watch with a second hand, gave the IV medication over the appropriate amount of time. Removed the syringe.

L. Cleaned the injection port with a new antiseptic swab, and allowed it to dry. Attached a new prefilled normal saline flush, and injected 10 mL of normal saline through the IV line at the same rate at which the medication was administered.

M. Released the tubing and restarted the primary infusion.

N. If the IV currently infusing is a medication, disconnected it and administered IV push medication as above. If unable to stop the IV infusion, inserted a new saline lock and administered the medication using the IV push method.

16. IV bolus through an intermittent IV device:
   A. Verified the patient and medications as above.
   B. Prepared flush solutions according to agency policy.
   C. Administered the medication:
      (1) Cleaned the injection port with an antiseptic swab. Released the clamp.
      (2) Inserted a syringe containing normal saline 0.9% through the injection port of the IV lock.
      (3) Pulled back gently on the plunger of the syringe, and checked for blood return.
      (4) Flushed the IV site with 2-3 mL of normal saline. Observed the insertion site for infiltration.
      (5) Removed the empty syringe.
      (6) Cleaned the injection port again with a new antiseptic swab.
      (7) Inserted the syringe containing the prepared medication through the injection port of the IV lock.
      (8) Injected the medication within the amount of time recommended by agency policy, the pharmacist, or a medication reference manual. Used a watch to time the administration.
(9) Withdrew the syringe.
(10) Cleaned the injection port with a new antiseptic swab. Allowed it to dry.
(11) Attached a second syringe containing 0.9% normal saline, and flushed the port with 2-3mL of normal saline at the same rate at which the medication was delivered. Watched the IV site for sudden swelling.
17. Reclamped the saline lock while maintaining pressure on the syringe plunger.
18. Stayed with the patient for several minutes and observed for any adverse or allergic reactions.
20. Removed gloves and performed hand hygiene.
21. Helped the patient into a comfortable position, and placed toiletries and personal items within reach.
22. Placed the call light within easy reach, and made sure the patient knows how to use it to summon assistance.
23. Raised the appropriate number of side rails and lowered the bed to the lowest position.
24. Left the patient’s room tidy.
25. Continued to monitor the patient for adverse reactions.