



NEONATAL SERVICES DIVISION

Approved by Quality & Patient Safety Committee 16/4/2020

PERIPHERAL INTRAVENOUS CANNULA - INSERTION AND DRESSING

This Local Operating Procedure is developed to guide safe clinical practice in Newborn Care Centre (NCC) at The Royal Hospital for Women. Individual patient circumstances may mean that practice diverges from this Local Operating Procedure.

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INTRODUCTION

A peripheral intravenous cannula (PIVC) is inserted into a small peripheral vein to provide access for intravenous fluid administration, medication, blood products and/or blood sampling for diagnostic tests. Sterile technique using aseptic non-touch technique (ANTT) principles must be adhered to throughout the procedure.

1. AIM

- To insert a PIVC safely and aseptically
- To secure the PIVC correctly

2. PATIENT

Newborns

3. STAFF

Medical and nursing

4. EQUIPMENT

- Blue tray •
- Dressing pack
- 5mL ampoule of 0.9% Sodium Chloride
- 24g cannula 14mm long
- 2mL slip-lock syringe
- Armboard (appropriate size)
- Needlefree Minibore extension set (Codan)
- Tegaderm film (small)
- Sterile plastic drape (60cm x 45 cm)
- Correctly pre-cut Elastoplast
- Blue-Inco sheet
- Oral Sucrose 24%
- 0.5% Chlorhexidine Maxi Swabstick x2

NOTE:

- Consider possible need for peripherally inserted central catheter before using cubital fossa or saphenous veins

 Avoid using a scalp vein if possible

- Maximum attempts to cannulate = 2 at each attempt

 Potentially difficult cannulation may require more attempts and will require discussion with senior medical staff



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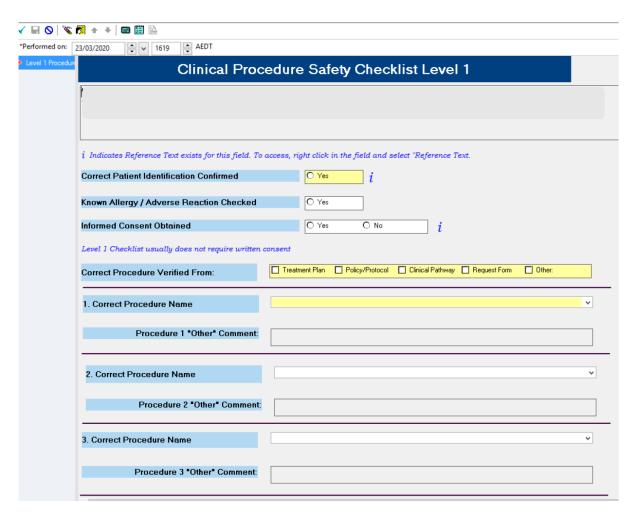
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5. CLINICAL PRACTICE

Procedure:

- 1. Perform a Clinical Procedure Safety Check prior to procedure:
 - Log on to infant's eMR
 - · Click on Chart on task-bar above infant's information bar (blue bar) for drop-down field
 - Click on Ad Hoc Charting
 - Tick in the box for Clinical Procedure Safety Checklist Level 1
 - Click on Chart at the bottom right of page for the form (Picture 1)
 - · Complete checklist before starting the procedure



Picture 1



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- 1. Use alcohol hand rub (AHR) solution or wash hands.
- 2. Clean the Blue plastic tray with neutral detergent wipe.

- Clean the Blue plastic tray with reducal detergent wipe.
 Collect equipment in the tray. (Picture 2)
 Clean the work surface area to be used.
 Prepare strappings to secure the cannula.
 Cut Elastoplast to appropriate size and length x 2.
 Back the middle section of the Elastoplast with cotton wool or Elastoplast. (Pictures 3 & 4)
 Make a small slit in the middle of one of the 2nd Elastoplast. (Picture 5)



Picture 2



Picture 3



Picture 4



Picture 5

9. Wash hands or use AHR.

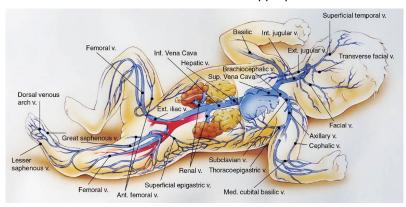


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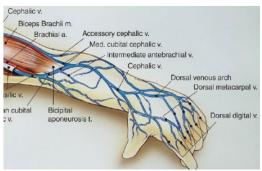
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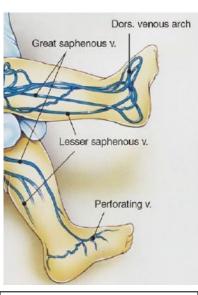
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10. Examine the infant and select an appropriate vein on a limb to cannulate. (Pictures 6)



Pictures 6





Pettit, J. & Mason Wyckoff, M. (1997). Peripherally Inserterd Central Catheters in Guideline for Practice, 2nd. Ed.. National Association of Neonatal Nurses, U.S. A. 4700 W.Lake Avenue, Glenview, IL 60025, p13; p18

- 11. Prepare the infant for cannulation:
 - Wrap the infant snugly with the selected limb exposed for the procedure
 - Position the infant in a comfortable posture
 - Make a fenestrated hole in the blue inco-pad
 - Insert the selected limb through the hole of the inco-pad to the axilla or groin
 - Position a sharps disposal container close by
 - Provide oral sucrose for pain-relief when needed
- 13. Wash hands.
- 14. Put sterile gloves on.
- 15. Prepare equipment for cannulation:
 - · Open dressing pack onto blue tray
 - Open remaining packets of equipment onto dressing pack
 - Prime the Needlefree Minibore extension set (Codan) with 0.9% Normal Saline
 - Leave syringe attached to the extension set
 - Make a small hole in the sterile plastic drape
- 13. Hold the selected limb for cannulation with a piece of antiseptic saturated gauze.
- 14. Clean the whole limb with a chlorhexidine swabstick focusing on the insertion site. Repeat cleaning with another swabstick.
- 15. Insert the limb through the fenestrated sterile plastic drape.
- 16. Use a sterile gauze to apply tourniquet to the limb.
- 17. Cannulate the vein whilst protecting key parts and key sites from contamination.



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- 18. Remove/loosen tourniquet when cannulation is successful.
- 19. Remove the stylet and attach the T-extension set to cannula.
- 20. Dispose sharps correctly.
- 21. Flush the cannula.
- 22. Ask an assistant to secure the cannula with tegaderm.
- 23. Secure the limb to an appropriate size armboard with prepared Elastoplast.
- 24. Ensure correct alignment of limb to armboard. (Picture 7)

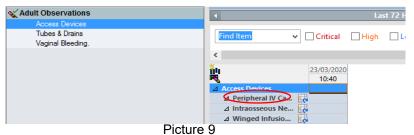


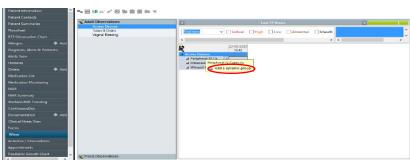
Picture 7

- 25. Remove and discard drapes and equipment. Remove gloves.
- 26. Perform Hand Hygiene.
- 27. Record details of cannulation in eMR:
 - Log on to infant's eMR
 - Click on *Menu* for drop-down field showing *iView* (Picture 8)
 - Click on iView on drop-down field showing Access Devices (Picture 9)
 - Click on Access Devices for drop-down field showing Add a Dynamic Group (Picture 10)



Picture 8





Picture 10

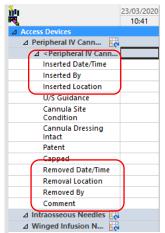


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- Click on Add a Dynamic Group for drop-down field below. (Picture 11)
- Record all information relating to the procedure post insertion in infant's eMR.



Picture 11

6. DOCUMENTATION

- eMR
- Neonatal Observation Chart
- NICUS database

7. RELATED POLICIES/PROCEDURES/CLINICAL PRACTICE LOP

- Extravasation and infiltration injuries prevention and management
- Intravenous Therapy

8. RISK RATING

Low

9. NATIONAL STANDARD

- Standard 1 Clinical Governance
- Standard 3 Preventing and Controlling Healthcare-Associated Infection
- Standard 5 Comprehensive Care
- Standard 6 Communicating for Safety

10. ABBREVIATIONS AND DEFINITIONS OF TERMS

NCC	Newborn Care Centre	ANTT	Aseptic Non-Touch Technique
PIVC	Peripheral Intravenous Cannula	AHR	Alcohol Hand Rub



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11. REFERENCES

- 1. NSW Health Policy Directive, 22nd September 2017. Clinical Procedure Safety. Doc No. PD2017_032, File No. CEC 17/238. *Department of Health, NSW*.
- 2. NSW Department of Health Safety Alert SN: 003/07. Extravasation of IV fluids care of the cannula site in neonates and children. Document No. PD2007 07.
- 3. Royal Children's Hospital Melbourne; Clinical Practice Guidelines: (2019). Intravenous access Peripheral. https://www.rch.org.au/clinicalguide/

12. AUTHOR

Primary	4/11/2005	RHW NCC LOPs Committee
Revised	03/03/2016	KB Lindrea (CNC)
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