# TITLE OF SKILL INTRAVENOUS CANNULATION

# **INTRODUCTION (RATIONALE):**

This is one of the most important skills for giving parental Medications and fluids to patient.

#### **LEARNING OBJECTIVES:**

At the end of the session students should be able to:

- Identify the correct sites for I/V cannulation
- Demonstrate the correct method for I/V cannulation

# **EQUIPMENT/MATERIAL NEEDED:**

# Same as for venipuncture, with addition of:-

- ❖ Appropriate size of I/V cannula
- Heparin lock
- Adhesive tape

#### VIDEO DEMONSTRATION

#### **PROCEDURE**

- 1. Initial steps are same as of venipuncture)till step 9)
- 2. Hold a cannula with bevel up. insert a needle at 15 to 30 degree angle
- 3. Observe the flash back and then advance the device slightly. Avoid double pricking, if you see swelling remove cannula, apply pressure and change the site
- 4. Release tourniquet.
- 5. Apply pressure at the cannula tip to prevent back flow
- 6. Retract the sty let and dispose in sharps container
- 7. Run a few drops of I/V fluid to check free flow and observe for swelling
- 8. If a free flow is achieved attach the drip or heparin lock
- 9. Fix the cannula with tapes
- 10. Write date and time of the procedure over the tapes as well as in the pt's file.
- 11. Thank the patient

# BACKGROUND INFORMATION (THEOTRICAL INFORMATION TO BE READ BY THE STUDENT)

## **INDICATIONS:**

- Administrative fluids, medications and blood
- For emergency access
- For parental nutrition's
- For obtaining blood samples
- For delivering anesthetics

## **CONTRAINDICATIONS:**

- A same side cannula
- Patients with fistula or scheduled to have fistula for dialysis
- Avoid puncturing dominant arm
- Vein distal to a previous I/V site
- Joints and bonny prominences
- Scelrosed or thrombotic veins
- · Veins with overlying cellulites or skin breakdown

## **COMPLICATIONS:**

- Phlebitis
- ThromboPhlebitis
- Septic ThromboPhlebitis
- Infiltration
- Hematoma
- Nerve damage

# **CAVEATS:**

- Cannula should be removed at the first sign of infection or swelling (needs regular inspection)
- Cannula should not be left in vein for more than 48 hours