

NIAIC MEDICAL DEVICES ONE LINERS

Safety on the line

Intravenous devices are used throughout hospitals, primary care and home settings. A significant number of adverse incidents and patient injuries occur because of problems with the devices themselves, inadequate training or poor practices associated with their use. This special edition of One Liners attempts to highlight some of the issues that have given rise to problems and provide advice to address this.

Opening the Blood gates

There have been a number of reports of users observing free flow when attempting to stop infusion using administration sets. Because of a change in the material of the roller clamp, the new clamp will only stop flow when it completely shut i.e. pushed to its rear-most position.

Users are reminded that although flow may appear to have stopped when the clamp is partially closed, they should always push the clamp fully shut to prevent free flow.

Set-up?

There is evidence to suggest that during intermittent antibiotic therapy, administration sets are disconnected from the patient's cannulae and after remaining on the drip stand for an unspecified length of time, are subsequently reconnected and reused, posing an infection risk.

Once disconnected from the patient, an administration set should be discarded.

Vile vials

Users should not repeatedly access single dose vials and intravenous bags. This is associated with the risk of cross infection and should be avoided.

Single dose vials must be discarded immediately after use.

You crack me up!

During central venous catheter site dressing changes, the use of some alcohol-based disinfectants may cause degradation of the catheter.

Users are reminded to refer to the manufacturers instructions for use and only use recommended disinfectants.

Needless problems

Needle-free intravenous connectors must be properly disinfected before use. Not to do so may result in an increased risk of infection and failure of the device.

Users must pay careful attention to the manufacturer's disinfection advice when using needle-free intravenous connectors. They should also be aware of and monitor the intended duration of use, including maximum number of activations.

Cut off point

Withdrawing the guidewire whilst leaving the introducer needle in place during difficult central line insertions can result in the wire being severed. The resultant pieces of wire can be difficult to remove or can migrate along the vein, potentially causing injury.

If difficulty is experienced, the procedure should be abandoned by removing the needle and wire simultaneously.