



Vascular Access: It's More than IV Insertion

Two things can happen in the blink of an eye: a compassionate decision and a clinical decision. In the best of worlds, both work in concert for the right outcome; but we don't live in a perfect world.

Now, imagine this: One of your patients is entering day two of a regimen of IV medication. After an extremely restless night, finally he's resting comfortably. You arrive to monitor the status of the IV site and discover the site being protected by a roller gauze; rather than removing the gauze wrap you elect to allow him to sleep undisturbed. When you arrive at work the following day, you learn that he had experienced an extensive extravasation. No one noticed. Treatment of the complication encompassed surgical intervention and as a consequence, extended hospitalization and discomfort. The family consults a lawyer.

This situation may be a nurse's worst nightmare – because it caused a patient pain and suffering – and because it could have been avoided.

“The Intravenous Nurses Society has published Standards of Practice that address vascular access and site securement,” says Darnell Roth, RN, AA, CRNI, LNC. “When an IV is wrapped so that visibility is hindered, and the IV is not monitored as per the standards of practice, that's indefensible.” Roth should know. In addition to decades of experience specializing in IV therapy, teaching hundreds of courses and publishing on the topic of intravenous therapy, she provides legal consulting to plaintiff and defense attorneys on cases that involve vascular access infusion therapies.

“It's my feeling that excellence in vascular access is not limited to the aseptic establishment of the peripheral IV site, but it also involves the responsibility to take the steps necessary to adequately secure and protect the site in a manner that will decrease the risk of complications,” she said.

“These complications, which have been well documented in the literature, include such things as phlebitis and/or bacterial invasion of the insertion site. Failure to secure and protect the site increases the risk of dislodgement of the IV cannula which can result in infiltration or extravasation necessitating surgical intervention in the form of fasciotomy, debridement, skin grafting and even amputation. In these scenarios it is not at all uncommon for the patient to seek redress through the court system.”

IV therapy has become a significant source of litigation; and Roth offers insights into the legal arguments that surround it. “In my work as a legal nurse consultant, I've encountered a number of cases in which the site securement and protection was described as being the application of a roller gauze or similar bandage. This is in direct conflict with the Infusion Nursing Society (INS) Standards of Practice (Standard 43.2),” she says. “And in the legal arena, since these standards are in place, the use of a wrap implies a disregard for patient safety. You could not defend the practice.” The INS standards also address ongoing assessment of the site. The failure to monitor an IV in accordance with these standards also leaves the patient – and the nurse – at risk.

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I.V. HOUSE®
Protection Over and Above



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(continued from other side)

“The use of securement and protection products, such as those from I.V. House, Inc., will enhance the ease and thus will probably impact the frequency of this assessment process. Because if you can lift the dome and look at the insertion site, you are more inclined to do it,” says Roth.

“The availability of securement products has become well known in the legal community so an attorney will ask “Why wasn’t it used?”

Roth says she first learned about I.V. House® products in 1992. “I saw an article in a St. Louis newspaper and was impressed. As a nurse, I cut medicine cups, and even used the packaging from the butterfly needle to help protect patient IVs. Here was a product developed by a nurse and dedicated to protection of the site.”

Just as IV therapy has changed over the years, so too, have the products from I.V. House, Inc. “When the product first came out, it was directed for infants. But it’s gone way beyond that,” she says. “The new designs and additional sizes make it appropriate to all patient groups—from infants to geriatrics. And the need is there.” And it’s a need that is likely to increase over time. “As the Baby Boomers age, they will demand to know their options. These well-versed, educated, and informed consumers want quality. And they want accountability.”

Nurses, Roth believes, must rise to the challenge. “IV therapy has gone way past the days of the simple saline drip,” she says. “Patients must have confidence that we’re taking every step to ensure that their care is being done in a safe manner. Nurses must use every tool at their disposal. IV securement and protection is an essential part of ensuring patient safety.”

“Products to secure and protect the IV cost very little. But they can make such a critical difference,” says Roth. “In many ways, it’s like having insurance. Most of the time you don’t even think about the fact that you have it. But when you need it, oh what a difference it can make! **That’s** protection.”