

Landmarking - Deltoid - Administering an IM Injection - Using Z track

Female1: Hi, Renee. So we're going to be doing landmarking of a deltoid in administering an IM injection using Z track.

Female2: Yes. So I've prepared my medication. I've brought my MAR and my med to the bedside. 'Sir, can you tell me your name and your birthdate?'

M: Ross Geller. March 3rd, 1999.

F2: Awesome, so I have your morphine for you, it's for pain. You've had it before, right?

M: Um-hum.

F2: Do you have any allergies?

M: No.

F2: Okay, so Ross has a really good deltoid muscle in terms of mass and so this will be a good choice for an injection for him. I need to landmark to make sure I'm getting it into the right place. So I find an acromion process. I can go three finger widths down and then I always do this poke test to make sure I have enough muscle.

F1: That sweet spot, eh.

F2: Yes. Another way to landmark is to find the axilla crease. Draw a line and then draw a triangle from that acromion process. And again, you're right in the center. And you have a third way.

F1: Oh, yeah, you just sort of run your finger up into the armpit. Lay your hand down and you'll have the V and then you're just right there. It all comes to the same place.

F2: We've arrived to the same place. So I've done some hand hygiene. I've made a choice to wear gloves. I'm going to clean my site from the inside out. The literature's inconsistent about how long you should clean the site for. But what's very consistent is that you have to let the alcohol dry. It doesn't have antiseptic properties if it's still wet. I'm going to just do one last check on my med before I give this to him. Now we have to Z track. So Z track is a method of trying to displace the top tissue layers so that the medication is not going to leak out afterwards. It's really pretty straightforward. You just have to slightly move the skin, so Z track. Stab. Actually, I'm going to go Z track. Stab. Grab. Aspirate. Inject.

F1: So do that once more.

F2: Okay. Z track. Stab. Grab. Aspirate. Inject.

F1: And how fast do we inject in?

F2: It depends on the medication. It can hurt when you're trying to put a volume into a muscle. Some medications are more painful than others. So this being half of a millilitre, I would say you could get probably have that injected in about 10 seconds.

F1: What if the patient says 'oh, ow, ow, ow'.

F2: Then slow down. And you can use distraction techniques like tap your foot on the floor or start singing a song or wiggle the fingers on your other hand... something just to get their mind off [of the task at hand]. The other thing is if we aspirate and we get blood, because that's part of the risk with IM injections, we need to remove the needle and start the whole process again.

F1: Okay.