

Converting an IV to Saline Loc (Extension Preset)

Female1: Today we're going to be converting a running IV with an extension set to a saline loc.

Female2: Yes. You might have an order to do that from your prescriber. Or nurses in many places can make that decision within their autonomous scope of practice. So you always want to know what the policies that guide you are; Policies from your regulator and then from your employer as well.

F1: Why would I want to do this?

F2: Well, in this case the patient is eating and drinking well. They don't need the IV for hydration. They aren't receiving any meds through their IV. But we anticipate the patient will go home tomorrow and we just want to have IV access just in case.

F1: And this will give them a bit of freedom to move around too. We can make sure that they've got good mobility.

F2: Exactly.

F1: So what do we need to collect?

F2: It's pretty straightforward. You want to have a look to see what kind of venous access device you have and in this case we have a PVAD short. So PVAD meaning peripheral venous access device; short meaning the cannula is short. And you will get used to knowing and recognizing what your different kinds of venous access devices are just by working with them. In this case we have an extension set present. So this is really straightforward. We can simply turn off the IV, turn off the pump and disconnect at the needleless cap site. What I need to do next is

clean that site with alcohol. You'll want to know your flushing protocols are. They're probably quite similar in the different agencies, but they might differ slightly. In this case I know my flushing protocol is to flush with 2-5 mls of normal saline. I have a preloaded saline syringe. There's always a little bit of air in there, so I'm just going to get that out. I'm just simply going to attach and do a turbulent flush which means exactly what I'm doing.; Looking for swelling infiltration, leaking [and pain].

F1: Will the patient feel this?

F2: They might. It shouldn't be painful. If it's painful it means they have some irritation in the vein so you probably want to even consider removing it. And then you just disconnect. The manufacturer suggests putting the slide clamp on. So now the system is doubly closed with the slide clamp and the needleless cap.

F1: And then we can just tape that up so it's not flapping around?

F2: Yes, you could do that. And then document on your MAR, because according to the flushing protocol this should be flushed at least every 24 hours. So if it doesn't show up on the MAR perhaps it might get missed.