23.6: Checklist for Secondary IV Solution Administration

Use the checklist below to review the steps for completion of “Secondary IV Solution Administration.” This checklist is used when fluids are already being administered via the primary IV tubing and a second IV solution is administered.

Steps

Disclaimer: Always review and follow agency policy regarding this specific skill.

2. Verify the provider order with the medication administration record (eMAR/MAR).
3. Perform the first check of the six rights of medication administration while withdrawing the IV solution and tubing from the medication dispensing unit. Check expiration dates on the fluid and the tubing and verify allergies.
4. Verify compatibility of the secondary IV solution with the other IV fluids the patient is concurrently receiving.
5. Remove the IV solution from the packaging and gently apply pressure to the bag while inspecting for tears or leaks. Check the color and clarity of the solution.
6. Perform the second check of the six rights of medication administration.
7. Enter the patient room and greet the patient.
8. Perform safety steps:
   - Perform hand hygiene.
   - Check the room for transmission-based precautions.
   - Introduce yourself, your role, the purpose of your visit, and an estimate of the time it will take.
   - Confirm patient ID using two patient identifiers (e.g., name and date of birth).
   - Explain the process to the patient.
- Be organized and systematic.
- Use appropriate listening and questioning skills.
- Listen and attend to patient cues.
- Ensure the patient’s privacy and dignity.
- Assess ABCs.

9. Perform the third check of the six rights of medication administration at the patient’s bedside.
10. If the patient is receiving the medication for the first time, teach the patient and family (if appropriate) about the potential adverse reactions and other concerns related to the medication.
11. Remove the secondary IV tubing from the packaging.
12. Place the roller clamp to the “off” position.
13. Remove the protective sheath from the IV spike and the cover from the tubing port of the IV solution.
14. Insert the spike into the IV bag while maintaining sterility.
15. Compress and release the drip chamber, filling halfway.
16. Prime the secondary IV tubing. Back priming is considered best practice and is performed using an infusion pump with primary fluids attached:
   - Vigorously cleanse the catheter tip on the patient’s IV port with an alcohol pad/scrub hub (or the agency required cleansing agent) for at least five seconds and allow it to dry.
   - Connect the secondary tubing to the port closest to the drip chamber. Lower the secondary bag below the primary bag, and allow the fluid from the primary bag to fill secondary tubing. Fill the secondary tubing until it reaches the drip chamber, and then raise the secondary bag above the primary line.
17. Hang the secondary IV solution on the IV pole with the primary bag lower than the secondary bag.
18. Label the secondary tubing near the drip chamber.
19. Set the infusion rate:
   - For infusion pump: Set the volume to be infused and the rate (mL/hr) to be administered based on the provider order.
   - For gravity: Set the roller clamp to achieve the appropriate number of drops per minute based on the provider order.

Take time to watch the IV fluid or medication to drip into the drip chamber to ensure the medication or fluid is flowing to the patient.

20. Assess the patient’s IV site for signs and symptoms of vein irritation or infiltration after infusion begins. Do not proceed with administering secondary fluids if there are any concerns about the site.
21. Assist the patient to a comfortable position, ask if they have any questions, and thank them for their time.
22. Ensure safety measures when leaving the room:
   - CALL LIGHT: Within reach
- BED: Low and locked (in lowest position and brakes on)
- SIDE RAILS: Secured
- TABLE: Within reach
- ROOM: Risk-free for falls (scan room and clear any obstacles)

23. Perform hand hygiene.
24. Document the procedure and assessment findings. Report any concerns according to agency policy.