

**Adult Infusion Skills Packet**

<b>Name:</b>	<b>Employee ID #:</b>
<b>Unit:</b>	<b>Title:</b>
<b>Due Date:</b>	
PERFORMANCE CRITERIA - Unless otherwise specified all skills will be demonstrated in accordance with the appropriate UC Davis Health Policy and Procedure.	
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<b>Skill/Learning</b> Not all skills are applicable to all Nursing areas – if not applicable mark as N/A	<b>Skill Code</b> (For CPPN Use Only)	<b>Date Completed</b> (or N/A)	<b>Verifier</b> <b>Initials</b>
Blood Withdraw from Central Venous Catheters and PIV: Performs per <a href="#">UC Davis Health Policies 13001 Vascular Access Policy</a> and <a href="#">13029: Venipuncture Verification and Blood Withdrawal</a>	DAHS-NSCBWFCVCPV		
Implanted Venous Port Care and Maintenance: Performs per <a href="#">UC Davis Health Policy 13001 Vascular Access Policy</a>	DAHS-NSCIVPCM		
Intravesicular Chemotherapy	DAHS-NSCIC		
PICC Care and Maintenance/Blood Draw: Performs per <a href="#">UC Davis Health Policy 13001 Vascular Access Policy</a>	DAHS-NSCPICCCMBD		
PowerFlow Implanted Apheresis Port	DAHS-NSCPFIAP		
Safe Handling Hazardous Drugs/Chemotherapeutic Agents: Completes “Management of Chemotherapy Spills (Oncology) DAHS-NGNSHOCS-ECS” and “Safe Handling of Hazardous Medications (Oncology) DAHS-NGNSHOHM-ECS” and performs per <a href="#">UC Davis Health Policy 10001 Hazardous Drugs (HD) (Chemo): Safe Handling/Preparation/Administration/Disposal of Waste/Spill Procedures</a>	DAHS-NSCSHHDCA		
Therapeutic Phlebotomy	DAHS-NSCTP		

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**SIGNATURE PAGE:**

Signature and Printed Name of Verifier (preceptor or other verified personnel) who have initialed on this form:		
Initial:	Print Name:	Signature:

**PRECEPTEE STATEMENT AND SIGNATURE:**

I have read and understand the appropriate UC Davis Health Policies and Procedures and/or equipment operations manual, I have demonstrated the ability to perform the verified skills as noted, and I have the knowledge of the resources available to answer questions.

Printed Name	Signature
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<b>Intravesicular Chemotherapy #DAHS-NSCIC</b>		
<b>References:</b> <a href="#">UC Davis Health Policy 10003 Intravesical and Topical Upper Tract Therapy with Chemotherapeutic/Biologic Agents</a> <a href="#">UC Davis Health Policy 9010 Urethral Catheter Insertion, Maintenance and Removal</a>		
Follows <a href="#">UC Davis Health Policy 10003 Intravesical and Topical Upper Tract Therapy with Chemotherapeutic/Biologic Agents</a>		
Assesses patient for side effects or problems from previous catheterizations including trauma and hematuria, and lab work		
Documents and notifies provider		
Provides patient teaching and education, assesses understanding		
Reviews policy for staff and medication precautions		
Demonstrates understanding of safe handling for BCG		
Wears PPE		
Gathers equipment for intravesical instillation		
Verifies patient identification		
Performs chemotherapeutic/biologic agent double check		
Follows protocol per policy for preparing care environment		
Inserts urethral catheter per <a href="#">UC Davis Health Policy 9010, Urethral Catheter Insertion, Maintenance, and Removal</a>		
Demonstrates 1 urethral catheter insertion with patient with preceptor		

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<b>Intravesicular Chemotherapy #DAHS-NSCIC Continued</b>		
Verbalizes urethral catheter insertion criteria for intravesical administration		
Verbalizes and documents urethral catheter insertion		
Follows protocol for instillation times and patient positions		
Follows safe handling with voiding and discontinuing catheter		
Provides discharge instructions for waste management at home		

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<b>PowerFlow Implanted Apheresis Port #DAHS-NSCPFIAP</b>		
<b>References:</b>		
<ol style="list-style-type: none"> <li><a href="#">UC Davis Health Policy 7509: Hemodialysis/Apheresis Catheters</a></li> <li>BD PowerFlow Nursing Guide</li> <li>BD PowerFlow Step-by-Step Access Guide</li> </ol>		
Review of <a href="#">UC Davis Health Policy 7509: Hemodialysis/Apheresis Catheters</a>		
Review of <a href="#">UC Davis Health Policy 13001: Vascular Access Policy (Adult/Pediatric)</a>		
<b>DEMONSTRATE:</b> Using the following steps, demonstrates one successful PowerFlow access and de-access on a human or simulated patient under the supervision of the vendor educator or UCDH skill verified healthcare provider		
<b>ACCESS:</b>		
Locate and identify the port via palpation by identifying the high and low points of the port		
Prepare access materials, including a primed extension set		

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<b>PowerFlow Implanted Apheresis Port #DAHS-NSCPFIAP Continued</b>		
Clean and prepare the access site prior to accessing per UCDH policy		
Stabilize the port with non-dominant, sterile gloved hand and palpate the funnel		
Using a shallow angle (30 degrees) of access, insert the needle into the funnel and slide it to the stop		
Separate needle from the IV catheter hub by pulling the needle slightly away		
Advance the IV catheter completely, continuing to pull the needle slightly away as needed		
Withdraw needle and engage safety mechanism		
Immediately attach the extension set, aspirate for blood return, and flush with normal saline		
Securely dress the site per Clinical Policy 13001: Vascular Access Policy (Adult/Pediatric)		
DE-ACCESS:		
Flush with normal saline to clear line		
Perform locking procedure by withdrawing the IV catheter while flushing continuously with locking solution to reduce potential for blood backflow into the catheter tip (5mL locking solution is recommended)		
After IV catheter removal, apply pressure if bleeding occurs		
Apply dressing per Clinical Policy 13001: Vascular Access Policy (Adult/Pediatric)		

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<b>Therapeutic Phlebotomy #DAHS-NSCTP</b>		
<b>References:</b> <a href="#">UC Davis Health Policy 13019: Therapeutic Phlebotomy</a>		
Review therapy plan/order set in its entirety to confirm the following:		
a. Indication for treatment		
b. Laboratory parameters for phlebotomy which may include hemoglobin, hematocrit, ferritin		
c. Total volume (or weight) of blood to be removed		
d. Minimum duration of blood removal		
e. Frequency of procedure		
f. Fluid replacement as ordered		
Ensure vital signs are obtained prior to start of procedure		
Obtain vascular access as indicated (PIV or central line), utilizing sterile technique. Confirm line patency; flush with normal saline		
If utilizing blood collection bag:		
a. Connect tubing, place bag on scale positioned below access site to encourage gravity flow		
b. Zero scale, then slowly unclamp tubing to allow blood to flow		
Alternate:		
a. Attach syringe to extension tubing & withdraw the ordered volume of blood. A three-way stopcock can be used if preferred.		
b. Flush line with normal saline as needed during phlebotomy to maintain patency		
Once ordered amount of blood has been withdrawn, clamp and disconnect removal device - collection bag or syringe/stopcock		
Scrub hub of connection site, attach normal saline syringe, flush line		
Obtain vital signs		
If IV replacement fluid is ordered, attach the administration set to PIV or central venous catheter and infuse as ordered. Note this may be ordered to occur prior to removal of blood. Ensure correct sequence is followed.		
Following completion of procedure:		
a. Remove PIV and hold pressure to the site until hemostasis occurs		
b. If using a central venous catheter, flush the catheter with normal saline followed by the appropriate dose of heparin per <a href="#">Standardized Procedure 318: Maintenance of Locked Intravenous Peripheral and Central Catheters with Heparin or Normal Saline</a> . If using a port, de-access per <a href="#">Policy 13001: Vascular Access Policy (Adult/Pediatric)</a> and hold pressure to the site as needed.		
Observe patient for 30 minutes post-procedure, ending with a final set of vital signs		
Discard blood waste in the appropriate biohazard container		