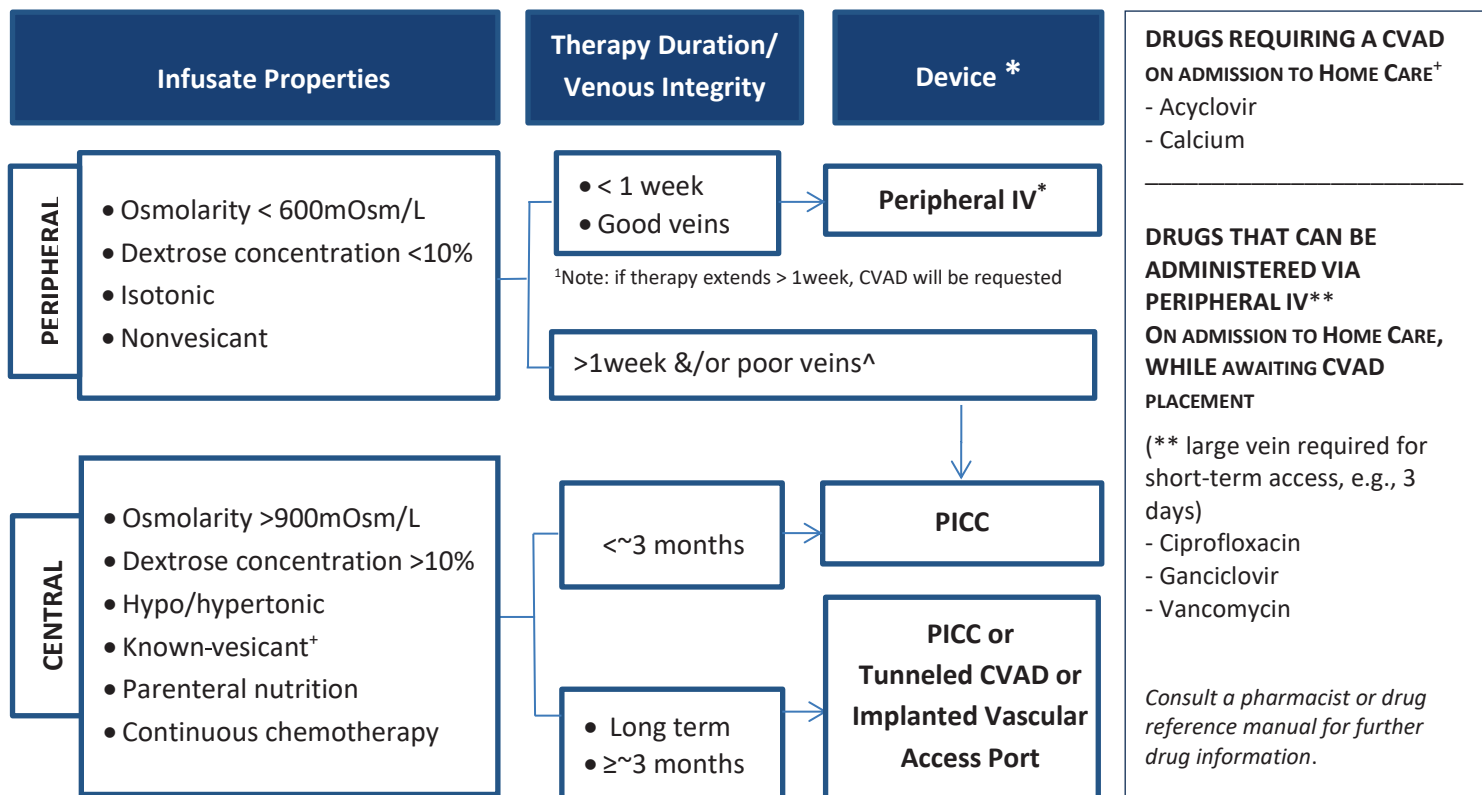


VASCULAR ACCESS DEVICE SELECTION

In the Alternate Care Setting- effective December 23, 2019



*** OTHER FACTORS TO CONSIDER IN DEVICE SELECTION:**

- Peripheral IV Contraindications:**
 - Poor veins ([^]= < 3 sites visible)
 - Thrombosis/clots
- Patient preference** for device and location, as appropriate
- Ability and resources available to care for the device
- Select the catheter of the **smallest gauge** and **length** with the **fewest # of lumens** and the **least invasive device** needed to accommodate and manage the prescribed therapy.
- Consider hypodermoclysis for rehydration**
- Goal: vascular access assessment within 24 hours of admission and line placement within 48 hours

Use care with skin access, vein & catheter size selection for following risk factors, which often lead to multiple restarts:

- Elderly skin/loss of elasticity
- Abrasions
- Psoriasis/skin breakdown
- Rash or allergies

Consider referral to Vascular Access Specialist if:

- Patient requires 2 or more restarts within 24 hours
- High volume fluid needs
- Limited peripheral access due to chest or neck surgery, amputation of arms, infection, cellulitis, fistula, trauma or injury, burns, hematomas, obesity>250 lbs
- Circulatory status: stroke, hemiparesis, thrombosis to upper extremity, sign of illegal drug use, elevated INR, fistulas or shunts, severe dehydration or edema/fluid, DVT
- Previous complications: presence of CVAD, frequent IV restarts, history of poor access, required CVAD in past
- Pediatric patient: < 8 years old, child with high activity level

*** Patients whose peripheral venous access cannot be maintained in the community will be sent back to the ER for initiation of IV access and should be considered for referral to a Vascular Access Specialist if infusion therapy is to continue**

References: Infusion Nurses Society (INS). *Infusion Therapy Device Selection Algorithm*. 2012. | Teleflex Medical. Vessel Health & Preservation Protocol. | Canadian Vascular Access Association. *Vascular Access and Infusion Therapy Guidelines*. 2019. | Stranz et al. Development of an Evidence-based list of noncytotoxic vesicant medications and solutions. *Journal of Infusion Nursing*. 2017; 40(1):26-40

This Device Selection Algorithm has been developed in collaboration with Home and Community Care Support Services Champlain and members of CCIQC.