

Medication Administration



Eastern Metropolitan Region
Palliative Care Consortium



Step 1 PREPARE

- Wash hands
- Collect equipment required
- Draw up medication
- Draw up N/Saline flush

Step 2 ASSESS SITE

- Heat
- Redness/Swelling
- Pain
- Bleeding
- Hardness/Lumps
- Leakage at site

Step 3 ADMINISTER

- Wipe the bung with alcohol swab
- Inject medication slowly into bung
- Inject 0.5ml N/Saline slowly as a flush
- Discard waste safely
- Wash hands

Step 4 REVIEW

- Record medication on medication chart
- Check site each shift and prior to drug administration
- Contact Decision Assist, palliative care advisory line on 1300 668 908- 24/7 if any concerns

If any of these signs are present do not administer medications, Saf-T-Intima will require replacement (see overleaf)

Insertion of Saf-T-Intima

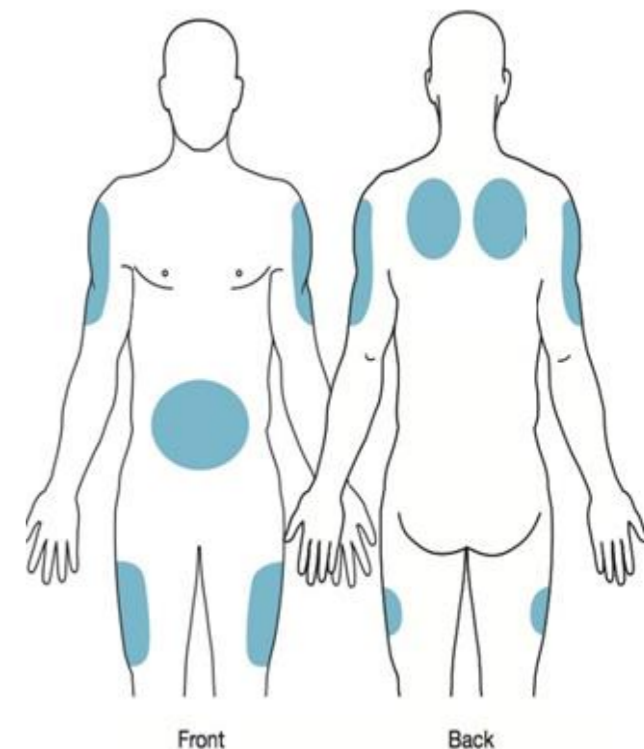


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Step 1 CHOOSE insertion site

- Anterior aspect of the upper arms or abdominal wall
- Anterior aspect of the thigh
- Scapula if resident is confused or agitated
- Anterior chest wall (least used)
- Avoid bony prominences or sites full of fluid

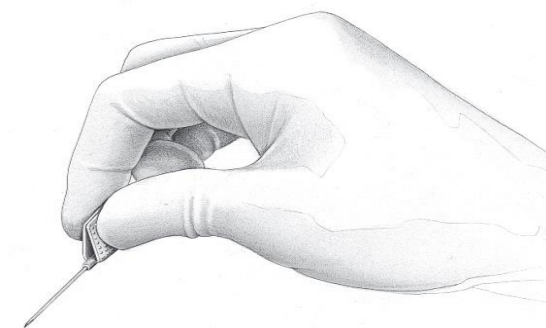


Step 2 PREPARATION

- Wash hands and prepare resident
- Collect required equipment
- Explain procedure and gain consent
- Ensure skin is clean
- Put on gloves
- Swab skin

Step 3 INSERTION

- Grasp the textured sides of the wings and bring them together, pinching firmly
- Using thumb and index finger gently pinch the skin around selected site to identify the subcutaneous tissue
- Insert the full length of the catheter and needle through the skin at 30^o-45^o angle
- Secure cannula with a transparent dressing such as Tegaderm
- Whilst holding 'butterfly', remove introducer in a smooth, single movement



Step 4 DOCUMENT and MONITOR

- Document date, time and place of cannula insertion in notes
- Check site each shift and prior to drug administration and document
- Contact Decision Assist, palliative care advisory line on 1300 668 908- 24/7 if any concerns