This project aims to improve the visibility of the IV site using more adhesive transparent dressings to attain 90% compliance based on the frequent and proper inspection of the IV site and decrease the incidence of IV complications” Lim et al (2018).

Abstract:

Purpose: This project aims to improve the visibility of the IV site using more adhesive transparent dressings to attain 90% compliance based on the frequent and proper inspection of the IV site and decrease the incidence of IV complications.

Design and Method: The project was conducted in a 43-bedded general pediatric ward from March 2016 to February 2017. To address the poor visibility of the IV site due to bandaging caused by poor adhesive strength of the IV securement dressing, a more adhesive securement dressing was introduced. The study team conducted pre-implementation, immediate post-implementation, and sustainment audits, cost-analysis, and comparison of the number of reported occurrences of phlebitis and extravasation between 2015 and 2017.

Results: The post-implementation audit showed 100% visibility of the IV site, from 73% pre-implementation, and 87% compliance on frequent IV site inspection, from 70% pre-implementation. Both criteria attained 100% compliance during the sustainment audit. Incidences of extravasation and phlebitis were reduced from eight to seven, an improvement of 13%. These seven cases were also generally less severe compared to those from the previous year.

Conclusion: This project has greatly improved the visibility of the IV site as well as nurses’ compliance in checking the IV site. This is because nurses can monitor the IV site without having to remove any additional bandage over the site and causing unnecessary distress to fretful pediatric patients.

Implications: The use of an adhesive transparent dressing can lead to prevention and earlier detection of phlebitis and extravasation. Additionally, the new IV securement dressing brought about manpower cost savings enabling staff time directed to other patient care
activities.

Reference:

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