



For patients with difficult intravenous access, those requiring multiple attempts, those who are obese, or have diabetes or other chronic conditions, determining the vascular access device (VAD) with the lowest risk that best meets the needs of the treatment plan can be confusing” Moureau and Chopra (2016).

Abstract:

Patients admitted to acute care frequently require intravenous access to effectively deliver medications and prescribed treatment. For patients with difficult intravenous access, those requiring multiple attempts, those who are obese, or have diabetes or other chronic conditions, determining the vascular access device (VAD) with the lowest risk that best meets the needs of the treatment plan can be confusing. Selection of a VAD should be based on specific indications for that device. In the clinical setting, requests for central venous access devices are frequently precipitated simply by failure to establish peripheral access. Selection of the most appropriate VAD is necessary to avoid the potentially serious complications of infection and/or thrombosis. An international panel of experts convened to establish a guide for indications and appropriate usage for VADs. This publication summarises the work and recommendations of the panel for the Michigan Appropriateness Guide for Intravenous Catheters (MAGIC).

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Reference:

Moureau, N. and Chopra, V. (2016) Indications for peripheral, midline and central catheters: summary of the MAGIC recommendations. *British Journal of Nursing*. 25(8), p.S15-24.

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