Results suggest that intermittent IV infusions should only be delivered as a secondary infusion through a primary infusion administration set with a continuous infusion or an infusion that can flush the administration set at the completion of the secondary infusion” Harding et al (2020).

Abstract:

This study investigated the delivery of small-volume intermittent intravenous (IV) infusions. Laboratory protocol evaluated potential medication loss among 6 administration methods using 50- and 100-mL solutions. Significant variations existed in calculated medication loss depending on administration method and volume. Up to 35% of medication may not be administered due to residual volume, with the greatest percentage associated with 50-mL solutions. Results suggest that intermittent IV infusions should only be delivered as a secondary infusion through a primary infusion administration set with a continuous infusion or an infusion that can flush the administration set at the completion of the secondary infusion.

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Reference: