



To compare the patency duration of a peripheral intravenous cannula (PIVC) using either continuous infusion with 5% dextrose or intermittent flushing with 0.9% saline” Stok and Wieringa (2016).

Abstract:

OBJECTIVE: To compare the patency duration of a peripheral intravenous cannula (PIVC) using either continuous infusion with 5% dextrose or intermittent flushing with 0.9% saline.

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STUDY DESIGN: Prospective comparative cohort study, including full-term newborn infants in whom PIVC were placed for the administration of antibiotics. In cohort 1 (n=48), 5% dextrose was infused at 3 ml h⁻¹; in cohort 2 (n=50), the cannula was flushed six times daily with 2 ml 0.9% saline. Primary outcome was the duration of PIVC patency. Secondary outcomes included the occurrence of complications, time required by the nursing staff and the cost of materials.

RESULT: Duration of PIVC patency was similar. However, significantly, more complications occurred in cohort 1 (P=0.02), and both cost and time were significantly lower in cohort 2 (P=0.001).

CONCLUSION: Intermittent flushing and continuous infusion provide a similar duration of PIVC patency; however, intermittent flushing is associated with fewer complications, lower cost and reduced time.

Reference:

Stok, D. and Wieringa, J.W. (2016) Continuous infusion versus intermittent flushing: maintaining peripheral intravenous access in newborn infants. *Journal of Perinatology*. June 16th. .

doi: 10.1038/jp.2016.94.

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