

“On the basis of this review, the authors conclude and assert that pH alone is not an evidence-based indication for central line placement Gorski et al (2015).

Reference:

Gorski, L.A., Hagle, M.E. and Bierman, S. (2015) Intermittently Delivered IV Medication and pH: Reevaluating the Evidence. *Journal of Infusion Nursing*. 38(1), p.27-46.

Abstract:

The Infusion Nurses Society’s Infusion Nursing Standards of Practice has treated pH as a critical factor in the decision-making process for vascular access device selection, stating that an infusate with a pH less than 5 or greater than 9 is not appropriate for short peripheral or midline catheters. Because of the Standards, drug pH is not an uncommon factor driving the decision for central vascular access. In this era of commitment to evidence-based practice, the pH recommendation requires reevaluation and a critical review of the research leading to infusate pH as a decisional factor. In this narrative literature review, historical and current research was appraised and synthesized for pH of intermittently delivered intravenous medications and the development of infusion thrombophlebitis. On the basis of this review, the authors conclude and assert that pH alone is not an evidence-based indication for central line placement.

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