“Overall retention of training was excellent, and this supports earlier reports that patient-administered outpatient parenteral antibiotic therapy is as safe as nurse-administered therapy.” Eaves et al (2014).

Reference:

Abstract:
AIMS AND OBJECTIVES: To assess patient retention of initial training on completion of self-administration of a prolonged course of intravenous therapy.

BACKGROUND: Outpatient parenteral antibiotic therapy is being used increasingly in the UK, and patients requiring prolonged antibiotic courses may be trained to self-administer therapy.

DESIGN: Prospective clinical evaluation.

METHODS: Patients self-administering parenteral antibiotic therapy through the Sheffield outpatient parenteral antibiotic therapy service were assessed when nearing completion of
therapy for correct technique in five key areas of proficiency using a scoring system.

RESULTS: Twenty-nine patients and nine carers were reassessed, at a median interval of 35 days after completion of the initial training package. Of these, 35 of 38 were fully competent in all areas. Three patients showed incomplete retention of their initial training. All made errors relating to use of sterile technique.

CONCLUSIONS: Overall retention of training was excellent, and this supports earlier reports that patient-administered outpatient parenteral antibiotic therapy is as safe as nurse-administered therapy. However, this study highlighted a small number of patients or carers who were not fully competent at maintaining sterile technique, and as a result, the protocol for training patients has been altered.

RELEVANCE TO CLINICAL PRACTICE: In this study, we assess patients’ ability to maintain safe self-administration of therapy over a period of time. Patients are increasingly involved and engaged in their own health care, and this study provides a novel approach to assessing their competence in practical procedures.

Other intravenous and vascular access resources that may be of interest (External links – IVTEAM has no responsibility for content).