



In this study, we found that many PIVCs were placed in areas of flexion, were symptomatic or idle, had suboptimal dressings, or lacked adequate documentation. This suggests inconsistency between recommended management guidelines for PIVCs and current practice” Alexandrou et al (2018).

Abstract:

BACKGROUND: Peripheral intravenous catheter (PIVC) use in health care is common worldwide. Failure of PIVCs is also common, resulting in premature removal and replacement.

OBJECTIVE: To investigate the characteristics, management practices, and outcomes of PIVCs internationally.

SETTING/PATIENTS: Cross-sectional study. Hospitalized patients from rural, regional, and metropolitan areas internationally.

MEASUREMENTS: Hospital, device, and inserter characteristics were collected along with assessment of the catheter insertion site. PIVC use in different geographic regions was compared.

RESULTS: We reviewed 40,620 PIVCs in 51 countries. PIVCs were used primarily for intravenous medication (n = 28,571, 70%) and predominantly inserted in general wards (n =

22,167, 55%). Two-thirds of all devices were placed in non-recommended sites such as the hand, wrist, or antecubital veins. Nurses inserted most PIVCs (n = 28,575, 71%); although there was wide regional variation (26% to 97%). The prevalence of infection in this study, we found that many PIVCs were placed in areas of flexion, were symptomatic or idle, had suboptimal dressings, or lacked adequate documentation. This suggests inconsistency between recommended management guidelines for PIVCs and current practice. Idle PIVCs was 14% (n = 5,796). Overall, 10% (n = 4,204) of PIVCs were painful to the patient or otherwise symptomatic of phlebitis; a further 10% (n = 3,879) had signs of PIVC malfunction; and 21% of PIVC dressings were suboptimal (n = 8,507). Over one-third of PIVCs (n = 14,787, 36%) had no documented daily site assessment and half (n = 19,768, 49%) had no documented date and time of insertion.

CONCLUSIONS: In this study, we found that many PIVCs were placed in areas of flexion, were symptomatic or idle, had suboptimal dressings, or lacked adequate documentation. This suggests inconsistency between recommended management guidelines for PIVCs and current practice.

Full Text

Reference:

Alexandrou, E., Ray-Barruel, G., Carr, P.J., Frost, S.A., Inwood, S., Higgins, N., Lin, F., Alberto, L., Mermel, L. and Rickard, C.M. (2018) Use of Short Peripheral Intravenous Catheters: Characteristics, Management, and Outcomes Worldwide. 13(5).

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