



REGION 11 CHICAGO EMS SYSTEM PROCEDURE	Title: Intravenous (IV) Insertion / IV Medication Administration - ALS
	Section: Medication Administration/Access
	Approved: EMS Medical Directors Consortium
	Effective: August 1, 2022

INTRAVENOUS (IV) INSERTION / IV MEDICATION ADMINISTRATION – ALS

INDICATIONS

- Administration of IV medication or fluid per Protocol
- Critical patient with the anticipated need for IV medication or fluid

CONTRAINDICATIONS

None

EQUIPMENT

- Medication or 0.9% Sodium Chloride IV solution bag 1000ml
- IV catheter (14, 16, 18, 20, 22, 24 gauge), catheter-over-needle device, 1 - 2 inches
- IV tubing, macrodrip, needleless connector and split septum port
- Saline lock
- Tourniquet
- Alcohol swab
- Saline flush
- Tape
- IV dressing (tegaderm or similar type)
- Sharps container

PROCEDURE

1. Apply personal protective equipment: gloves.
2. For administration of IV medication or fluid, check the five rights of medication administration:
 - a. Right patient
 - b. Right medication
 - c. Right dosage/concentration
 - d. Right time
 - e. Right route
3. Select appropriate catheter and supplies for saline lock, medication administration or IV fluids.
4. For IV fluid administration, connect IV tubing to the IV fluid bag, fill drip chamber, and flush tubing.
5. Apply tourniquet.



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6. Palpate suitable vein.
7. Cleanse site appropriately with alcohol swab.
8. Perform venipuncture.
 - a. Insert IV catheter into vein
 - b. Note flash of blood in chamber
 - c. Advance the catheter into the vein and secure the needle
 - d. Occlude vein proximal to catheter
 - e. Remove needle
 - f. Connect IV tubing or saline lock to catheter
9. Dispose of the needle properly in a sharps container.
10. Release tourniquet.
11. Flush with saline or initiate IV fluids to ensure patent line.
12. Cover with dressing.
13. Secure with tape as needed.
14. Reaffirm medication with Medication Administration Cross Check (MACC).
15. Administer medication or IV fluids as indicated.
16. Assess patient for desired effect and side effect.
17. Document the medication dose and clinical response.