

Memorandum

Date: November 9, 2017

To: AHS Clinical Staff

From: Dianne MacGregor - Associate Chief Nursing Officer, Nursing Professional Practice

and Education, Health Professions Strategy and Practice

RE: Mini-Bag Shortage-Clinical Practices

The recent hurricanes in Puerto Rico have impacted the manufacturing and supply of Baxter mini-bags which has resulted in a shortage of the following products:

- Dextrose 5% 50 mL
- Dextrose 5% 100 mL
- Sodium Chloride 0.9% 50 mL
- Sodium Chloride 0.9% 100 mL

Nursing areas have been identified as the largest consumer/user of these products and therefore conservation strategies are to be employed wherever possible, as per the attached <u>Medication</u> <u>Posting</u>. Health Professions Strategy and Practice (HPSP) is providing the following response to some frequently asked questions related to clinical practice:

1. Direct IV Administration:

- 1.1 How do I ensure that I am competent to give medications via the Direct IV route?

 It is recommended that all staff who give medications via the direct IV route (and for those for whom this is a new practice) complete an appropriate learning module and skills demonstration to ensure competence and patient safety.
- 1.2 If I have already completed a competency program am I required to complete the module recommended on the Medication Posting?

If you have completed a competency program established by your site/program/unit you do NOT have to repeat or re-do the competency module unless directed to by your operational leadership/ Clinical Nurse Educator (CNE)

1.3 Who should use the competency module recommended on the Medication Posting?

The competency module that has been suggested for use is for those sites/units/programs.

The competency module that has been suggested for use is for those sites/units/programs that do not currently have a resource to support Direct IV practice but require a learning resource to support staff in this practice.

1.4 Can LPNs give medications via the Direct IV route?

LPNs can give medications by the Direct IV route provided they have completed the appropriate education and hands-on skill requirements as established by their site/unit/program. If the LPN is working in a setting where it has been determined that they cannot give medications by the Direct IV route then local practice applies.

1.5 Can student nurses give medications via the Direct IV route?

Students with clinical instructors may give medications via the Direct IV route with instructor supervision providing they have the appropriate didactic and lab practice. It is the clinical instructor's responsibility to determine if this has been achieved.

Students with an AHS preceptor may give medications via the Direct IV route providing it is permitted by the operational area, they have completed the IV direct learning module and are directly supervised by their preceptor.



2. <u>Use of larger volume solution bags (250mL - 1000mL) for flush or diluent purposes:</u>

2.1 Can I use a large volume (250-1000mL) IV bag to withdraw 50 cc of fluid to use as a medication diluent for multiple patients?

IV infusion bags are labelled by the manufacturer as *single dose* containers, and as such are intended for administration as a single dose for use promptly after the container is opened. Any unused portions should be discarded (ISMP Safe Practice Guidelines for Adult IV Push Medications, 2015). IV solutions in containers used for infusion (i.e., bags) should NOT be used as common source containers (multiple-dose products) to prepare flushes or reconstitute medications for one or more patients in clinical areas.

2.2 Can I access the medication port on the IV bag multiple times with a needle to withdraw fluid?

This is not acceptable practice. Multi-access of the self-sealing medication port leads to decreased integrity of the access port which in turn can lead to introduction of bacteria to existing fluid.

2.3 Can we continue to use a bag spike with needleless/Clave access in the pediatric population?

In the pediatric population use of a bag spike with a needleless connection can continue to be used as appropriate with the appropriate connector cleansing and labelling of infusion bag.

3. Other conservation strategies:

3.1 Should we consider using buretrols?

The recommendation is administer medications via the direct IV route. The use of the buretrol device has been identified as a last option in conservation strategies and if required further messaging and instruction for use will be distributed to applicable clinical areas

3.2 Is there a shortage of 250 mL or 500mL bags if we choose to use them for flushing? No, these volume bags are not affected by this shortage.

Link to ISMP Safe Practice Guidelines for Adult IV Push Medications

CARNA Guidelines for Medication and Vaccine Injection

CLPNA Medication Administration Competency Profile

Please contact the Health Professions Strategy and Practice Consultation Service at <u>practice.consultation@ahs.ca</u> if you have further questions or call 1-855-735-3043.