

Patient Safety ALERT – PERIPHERAL CANNULATION INSERTION

Selecting the cannula

Selecting the smallest gauge cannula to fit the chosen vein will ensure the risk of damage to the vessel intima is minimised. This allows a higher blood flow around the cannula which reduces the risk of a clot forming. This also reduces the effect of irritant solutions on the inside of the vein, the degree of mechanical irritation and insertion trauma.

Selecting the insertion site

Avoid the antecubital fossa site as these veins can increase the possibility of dislodgement, infiltration, extravasation or mechanical phlebitis, accidental arterial cannulation and puncture of arteries.

Documentation

Document insertion details in the patient records.
Record Visual Infusion Phlebitis (VIP) score at access or at least twice daily.

FOR ACTION:

- ✓ Unnecessary cannulation should be avoided.
- ✓ Assess the patient for the most appropriate insertion site, avoiding the antecubital fossa site if possible.
- ✓ Select correct size cannula for the prescribed therapy
- ✓ Use aseptic non-touch technique when inserting and managing the cannula.
- ✓ Regularly review the need for the cannula and remove when no longer clinically indicated.
- ✓ Replace on first signs of infection/phlebitis or once 72 hours has elapsed, whichever is sooner.

For more information, please contact: kathleenwedgeworth@nhs.net