

### Care Bundles Recording Tool-Each shift

One document can be used for up to three PVCs. Details of line insertion dates on the IV Pink sheet.

Peripheral Venous Catheter																														
Use in conjunction with IV Cannulation Guidelines for Clinical staff OLCHC (2013) Careplan 9, 9a, 9b, Care bundle Guidelines (2014)																														
Tick ✓ each element of care bundle. To be 100% compliant all boxes must be ticked.																														
Date	1			2			3			4			5			6			7			8			9			10		
	Line	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3	1	2	3		
1. Assess the need for PVC on each shift ✕ <i>Please tick</i>																														
2. Hand hygiene is performed before and after all line maintenance/access procedures. Appropriate ANTT Level is used. <i>Please tick</i>																														
3. Check cannula is secure and site clean. Dressing change if required <i>Please tick</i>																														
4. Check site for infiltration, infection or dislodgement <i>Consider the following when observing the PVC site</i> a. Normal appearance b. Redness c. Redness, tenderness d. Redness, tenderness and discharge e. Other (temperature, bleeding) <i>Please tick if site normal or X if not</i>																														
5. Ensure patency of the PVC is maintained by flushing with NACL or continuous infusion <i>Please tick</i>																														
6. Consider resite after 72 hours <i>Please tick</i>																														
7. Alcohol hub decontamination is performed before and after each hub access. (Use OLCHC approved disinfection wipe) <i>Please tick</i>																														
8. There is no obvious constriction above the PVC site <i>Please tick</i>																														
<b>Initials</b>																														
<b>NMBI PIN</b>																														

- At the beginning of each shift complete the care bundle above.
- ✕ Under ' Assess the need for PVC ' if line not in use always place an x in the box and acknowledge the reason on the surveillance sheet
- If non compliant with bundle re-evaluation may be required following nursing care.
- Use a ✓ in the boxes provided for a yes. An X for no

Patient Name.....  
 HCR no.....  
 Ward .....

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