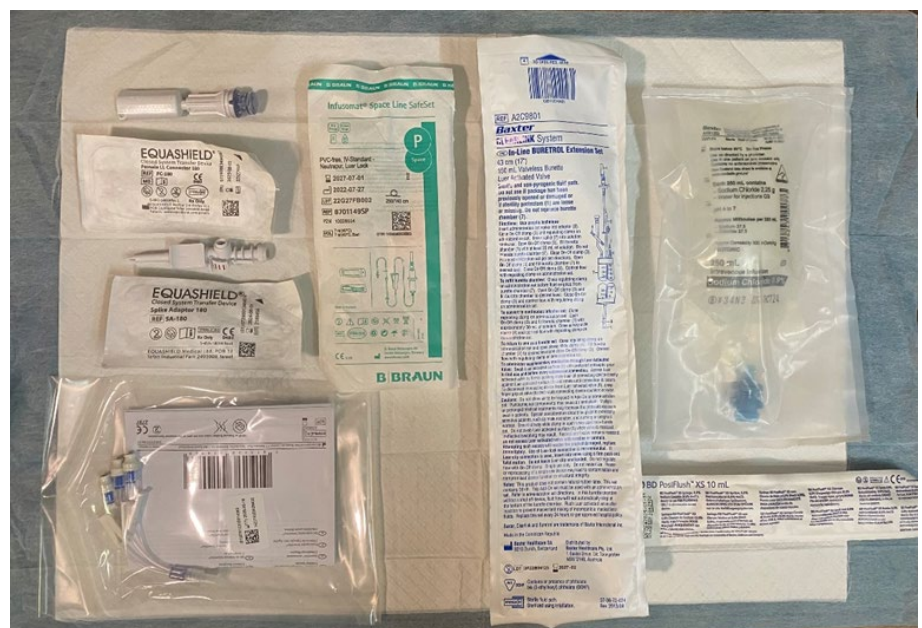



INTRAVENOUS HAZARDOUS OR CYTOTOXIC MEDICATION – PHARMACY PREPARED BAG – SCH CSTD SINGLE CHANNEL SYSTEM LOCAL WORK PROCEDURE[®]

The preparation and administration of intravenous hazardous or cytotoxic medication is a 5 step process

1. Gather equipment
 2. Prepare equipment for administration
 3. Check medication for administration
 4. Administration at bedside
 5. Administration of flush
- ❗ **Practice Point:** Ensure the medication is charted correctly and available.
 - ❗ **Practice Point:** Calculate medication dose and final concentration dilution as per Paediatric Injectable Medication Handbook (PIMH) or patient's treatment protocol



Gather equipment

Equipment for step 2	Equipment for step 3
<ul style="list-style-type: none"> • 100 or 250mL bag of fluid compatible with medication • Burette • Standard IV port-less line • Extension set with 3 needle-free valves (if not already present on patients' line) • +/- 1 x female closed system connection • +/- 1x male closed system bag spike • Medication filter (if required) as per PIMH • Equipment to confirm IV access patency Prepare as per ANTT and CVAD policy 	<ul style="list-style-type: none"> • Plastic backed absorbent sheet/pad • Personal Protective Equipment (link to medication list with PPE requirements) • Cytotoxic zip lock bag • Gauze • 2% chlorhexidine and 70% alcohol swabs • 1 x female closed system connection • 1x male closed system bag spike • Pharmacy prepared medication • Line access equipment/supportive cares • Hand sanitiser 

Prepare equipment for administration

1. Identify an appropriate distraction free, low traffic space to prepare the intravenous cytotoxic/hazardous medication (such as the medication room/cytotoxic medication room or treatment room)
2. Prepare equipment as per ANTT
3. Prepare a 250 or 100mL bag of compatible fluid to burette and a standard IV port-less line. Prime line.
4. ****Alternatively.** Prepare the 250mL or 100mL compatible fluid bag by inserting male closed system bag spike into IV bag port, then connect it to a female closed system. Attach the system to the burette and line. Prime line.
 - ❗ **Practice Point:** If patient not already accessed will also need an extension set with 3 needle free valves primed and attached to end of line.
 - ❗ **Practice Point:** If required: attach an appropriate filter to the IV line and prime
5. Prepare equipment to confirm IV access patency and any required supportive cares as per ANTT (see equipment - prepare list above)

Check medication for administration

❗ *Practice Point:* Remain in distraction free, low traffic space

❗ *Practice Point:* Prepare equipment at waist height

1. Prepare equipment as per ANTT
2. Place a plastic backed absorbent pad/sheet under the clean work administration area
3. Perform hand hygiene and don full PPE as per policy
4. Perform medication checks and complete 1st cytotoxic time out – *Designated Cytotoxic Time Out* on eMR iView
5. Remove gloves and dispose as cytotoxic waste
6. Perform hand hygiene
7. Prepare trolley by adding all administration equipment, prepared IV line and supportive cares to work administration area.
8. Move to patient's bedspace with your second checker (they should remain with you until the medication has commenced via the pump).

Administration at the bedside

❗ *Practice Point:* Ensure cytotoxic waste bins and cytotoxic sharps bin and within reach

❗ *Practice Point:* Set up and position equipment to ensure appropriate reach and WHS

1. Perform medication check as per policy
2. Perform hand hygiene and don gloves
3. Confirm IV access patency as per policy
 - ❗ *Practice Point:* PIVC patency check by flushing (except for vesicants)
 - ❗ *Practice Point:* Accessed CVAD patency check by aspiration of blood and flushing
 - ❗ *Practice Point:* De-accessed CVAD patency check by accessing as per policy
 - ❗ *Practice Point:* If patency cannot be confirmed **DO NOT PROCEED**, speak to medical team
4. Administer supportive cares as required (antiemetic, fluids, pre-medications etc)
5. Attach pre-prepared line to the patient, (ensure all clamps closed at this point and keep IV fluid bag and burette still on medication administration area)
6. Remove gloves, dispose as cytotoxic waste
 - ❗ *Practice Point:* Prepare equipment at waist height

7. Perform hand hygiene and don gloves
8. On work administration area, remove the fluid bag used to prime and attach the female closed connection on the pre-prepared fluid line as per ANTT (***Can skip if line primed with both male and female closed system connections already attached and used to prime*)
9. On the work administration area, remove outer protective bag and dispose into cytotoxic ziplock bag. Place gauze under the medication bag ports, remove port cap and insert closed system bag spike
10. Attach pre-prepared hazardous or cytotoxic medication bag to the cleaned female connector on the by clicking the two closed system components together.
11. Ensure all connections secure and hang cytotoxic/hazardous medication bag onto IV pole.
12. Remove gloves and perform hand hygiene
13. Place line in pump and close pump screen
14. Unclamp allowing the hazardous/cytotoxic medication to run into burette
15. Perform medication checks and complete 2nd cytotoxic time out – *Patient Bedside Time Out* on eMR iView
16. Program rapid prime within medication profile of pump library, open all clamps on the line
 - Rate = 400mL/hour
 - Volume to be infused (VTBI) = 18mL
17. Stay at patient bedside while rapid priming
18. Once rapid prime completed, program medication administration using the pump library
19. Perform hand hygiene, dispose of waste and doff PPE as per policy