



<b>Department:</b>	Nursing		
<b>Document:</b>	Internal Policy and Procedure		
<b>Title:</b>	Changing IV Solution, Tubing and Dressing		
<b>Applies To:</b>	All Nursing Staff		
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## 1. PURPOSE:

- 1.1 To decrease opportunity for growth of microorganisms by removing possible medium for infection.

## 2. DEFINITONS:

- 2.1 Replacing of new IV solution, tubing and dressings to prevent occurrence of infection.

## 3. POLICY:

- 3.1 Changing of IV solution tubing and dressing must be done in an aseptic manner.

## 4. PROCEDURE:

- 4.1 Check IV solution and medication additives with Physician's order.
- 4.2 Gather all equipment and bring to bedside, having equipment available saves time and facilitates accomplishment of task.
- 4.3 Ensures that patient receives the correct IV solution and medication as ordered by physician.
- 4.4 Verify the patient using 2 identifier (four names for Saudi or Complete name for Non-Saudi and Medical Record Number).
- 4.5 Explain procedure to patient, to lessen patient's anxiety.
- 4.6 Perform hand hygiene, prevent the spread of microorganisms.
- 4.7 Wear gloves
- 4.8 To change IV solution:
  - 4.8.1 Inspect the new solution bottle/bag for cracks, leaks, expiry date and other damages.
  - 4.8.2 Check the solution for discolouration, turbidity and particles.
  - 4.8.3 Note the date and time the solution was mixed.
  - 4.8.4 Clamp the tubing when inverting to prevent air from entering the tubing, keep drip chamber half full.
  - 4.8.5 If replacing a bag/bottle, remove the cap/seal from the new bag/bottle and wipe the rubber port with an alcohol swab, clamp the line, remove the spike into the old bag/bottle and insert the spike into a new bag/bottle, hang the new bag/bottle and adjust the flow rate.
  - 4.8.6 Label the bag/bottle with date, time and initial of the nurse.
  - 4.8.7 Document on the nurse's progress note.
- 4.9 To change IV tubing:
  - 4.9.1 Reduce the IV flow rate, remove the old spike from the bag/bottle and hang on the IV stand. Place the cover of the new spike loosely over the old one.
  - 4.9.2 Keep the old spike in an upright position above the patient's heart level; insert the new spike into the IV bag/bottle.
    - 4.9.2.1 Prime the IV tubing. Hang the new IV bag/bottle and prime IV set on the IV stand, and then stop the flow rate in the old tubing.

- 4.9.2.2 Put on sterile gloves.
- 4.9.2.3 Exchange old tubing for new tubing at cannula hub.
- 4.9.2.4 Holding cannula firm with one hand, disconnect old tubing and quickly insert new tubing, open regulator and observe for back flow into the new tubing to verify that the needle or cannula still in place.
- 4.9.2.5 Adjust the clamp and regulate fluid flow rate, or place tubing into infusion pump.
- 4.10 To change tubing connected directly into the hub of the IV access cannula.
  - 4.10.1 Loosen tape at IV insertion site. Wear gloves. Carefully remove dressing and plaster.
  - 4.10.2 Place sterile gauze square under needle hub.
  - 4.10.3 Place new tubing close to patient's IV site and slightly loosen protective cap.
  - 4.10.4 Clamp the old IV tubing. Steady the needle hub with non-dominant hand until change is completed. Remove tubing with dominant hand using a twisting motion, to stabilize needle and prevents inadvertently dislodging it.
  - 4.10.5 Set old tubing aside. This maintains sterility of IV set up. Use of gentle pressure helps prevent blood from exiting the hub when tubing is removed: while maintaining sterility, carefully remove covering or cap from the new IV set and insert sterile end of tubing into the needle hub, twist to secure.
  - 4.10.6 Open the clamp on the IV tubing and check the flow.
  - 4.10.7 Reapply sterile dressing, to deter entry of microorganisms at site.
  - 4.10.8 Regulate the IV flow at the prescribed rate.
  - 4.10.9 Label IV tubing date, time.
  - 4.10.10 Record in the nurses progress note:
    - 4.10.10.1 Location and status of IV site, dressing, fluid and tubing.
    - 4.10.10.2 Size and type of cannula.
    - 4.10.10.3 Report of pain at site.
    - 4.10.10.4 Patient's response.

## 5. MATERIALS AND EQUIPMENT:

- 5.1 IV solution
- 5.2 IV tubing
- 5.3 Sterile gauze or cotton
- 5.4 Alcohol swab
- 5.5 Disposable gloves
- 5.6 Plaster
- 5.7 IV stand
- 5.8 IV infusion pump

## 6. RESPONSIBILITIES:

- 6.1 Nurse

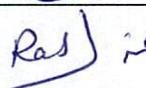
## 7. APPENDICES:

- 7.1 N/A

## 8. REFERENCES:

- 8.1 Jean Smith Temple And Joyce Young, Nurses Guide To Clinical Procedures, 5TH Edition, Lippincott Williams And Wilkins, Pages 388-393.
- 8.2 Nursing procedures and protocols Lippincott Williams and Wilkins. Pages 201-202.

**9. APPROVALS:**

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