Huddle Card: Peripheral IV Catheter (PIVC) Care and Management

Essential PIV care practices that help reduce bloodstream infection risk.

PIVC Leading Practices

Use aseptic non-touch technique when palpating/ inserting	Change transparent dressings every 7 days & PRN	Label dressing with date and your initials	Scrub the hub before EVERY access with sterile alcohol 15 sec scrub + 15 sec dry time	Flush and patency checks when fluids are not actively infusing	Assess PIVC sites; change when clinically indicated by the presence of complication signs and symptoms

Remove PIVCs within 24 hours if started outside of the hospital. ***Excludes Pediatric and NICU patients**

The least invasive and smallest gauge catheters should be used to meet the patient's therapeutic needs.

Signs of Complications

Infiltration
- Edema
- Drainage
- Cool/ pale skin
- Site pain
- Sluggish infusion

Phlebitis
- Redness along vein
- Edema/ warmth
- Hard vein
- Lump in vessel

Extravasation
- Blistering
- Sloughing
- Blanching
- Deep tissue damage
- Tissue Necrosis

Infiltration: Leakage of non-vesicant solutions out of the vein into surrounding tissue

Phlebitis: Irritation / inflammatory reaction within the vein from medication

Extravasation: Leakage of vesicant drugs out of the vein into surrounding tissue

Never flush, apply pressure, or apply a wet compress to a suspected extravasation site

Huddle Card: PIVC Care and Management
Applicable Department: Nursing Units
Reference: Vascular Access Device, Insertion, Care and Maintenance Policy
Created Date: August 14, 2026

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Huddle Card: IV ADMINISTRATION SET MANAGEMENT

Essential IV care practices that help reduce bloodstream infection risk.

Administration Set Type	Change Frequency	Additional Details
Primary and Secondary Continuous infusions	Q 96 Hours / 7 Days	Change entire setup with new vascular access device placement Replace disconnected secondary tubing within 24 hours
Primary Intermittent infusions	Q 24 Hours	All IV bags or Bottles

Medications	Change Frequency	Additional Details
Parenteral Nutrition	Q24 hours or with each new TPN/PN container	Change needless connectors also
Lipid-based infusions	Q 12 Hours	Change lipid emulsions filter along with administration set
Propofol infusions	Q 6-12 Hours	
Hemodynamic and pressure monitoring	Q 96 Hours	Change transducer and flush bag

Blood Product	Change Frequency	Additional Details
FFP & PRBC	After 2 units or 4 hours, whichever comes first	Change needless connector and filter also
Platelets	After each unit	
Granulocytes and Cryo	After each product	

Always **LABEL** IV tubing

*Corporate and INS guidance establishes the minimum standard, while facility- or division-specific guidance should be followed when requirements are more specific or stringent

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