

NURSING SKILLS CHECKLIST

Administering IV Push Medications

Date: _____ Facility: _____

Nurse's Name: _____

PROCEDURE	YES	NO	N/A
Review physician order:			
1. Present on chart.			
2. Correctly written.			
Review medication in appropriate drug reference for recommended rate of infusion and potential side effects.			
Check resident allergies.			
Perform hand hygiene and don gloves.			
Medication:			
1. Check label for correct medication name, dosage route, rate of administration, and expiration date.			
2. Check order against label.			
3. Check resident identification.			
Administration directly into IV catheter:			
1. Aspirate for presence of blood return then flush IV line with appropriate type and volume of flush.			
2. Give IV push medication at prescribed rate.			
3. Flush IV line at the same rate as the medication was given to clear medication from the catheter with appropriate type and volume of flush.			
4. Remove gloves and perform hand hygiene.			
Administration into IV tubing:			
1. Make sure IV is flowing freely.			
2. Cleanse Y-site of tubing with antiseptic wipe.			
3. Attach medication syringe to y-site of IV tubing and administer the medication at the prescribed rate stopping intermittently to allow IV fluid to flow.			
4. Return infusion to the prescribed rate.			
5. Remove gloves and perform hand hygiene.			
Documentation:			
1. IV push medication correctly recorded on the MAR.			
2. IV site documentation recorded in nurses notes.			

Evaluated By: _____