

## Additional Competency – Administration of Medication by Intravenous Push

Administration of medication by intravenous push is the delivery of medication into the vein through an injection port of an existing intravenous line or through a previously placed intravenous catheter with a saline lock. The medication is “pushed” into the existing IV system via a syringe controlled by the nurse or authorized professional.

Intravenous push is the fastest method of delivering medication to the patient’s bodily system. Due to the speed of delivery, intravenous push poses the highest risk for error or adverse effect, often irreversible. Medication administered by intravenous push shall be taken very seriously.

As a form of medication delivery the act of administering medication by intravenous push requires that practitioners practice according to SALPN guidelines (Medication Administration) and meet all SALPN Regulatory Requirements. The SALPN Regulatory Bylaws provide the following:

20. All members shall ensure that they work within their educational preparation, level of competence and scope of practice and comply with the standards of practice set out in the *Standards of Practice for Licensed Practical Nurses* approved and adopted by Canadian regulatory agencies as of April 1, 2013.

21. All members shall conduct themselves in an honorable and ethical manner, upholding the values of truth, honesty, and trustworthiness, and shall observe the standards of conduct set out in the *Code of Ethics for Licensed Practical Nurses in Canada* approved and adopted by Canadian Regulatory Agencies as of April 1, 2013.

### Education

The current Practical Nursing program provides theory and lab pertaining to intravenous initiation and therapy. Therefore, the education must be obtained and completed beyond the basic program to become an individual additional competency for the LPN. Intravenous push education must meet the following standards:

1. Informative learning session inclusive of a written and demonstrated certification process testing the skill, medication preparation, supporting knowledge, policy, and required assessments.
2. Review of current agency policy regarding intravenous push medications.
3. Review of procedure in the event of adverse or unexpected reaction.

\*IV Push Certification is only valid in the agency it is obtained\*

1. It is not at the discretion of the practitioner to administer a medication by direct intravenous push. It must be indicated on the medication order by the ordering professional (Physician, RN (NP)), or by unit policy.
2. Intravenous push should not be chosen for the purpose of saving time or supplies.
3. Intravenous push certification is most beneficial to LPNs working in areas such as:
  - a. Renal Dialysis
  - b. Areas requiring or benefiting from ACLS certification, Operating Room / surgical areas.
  - c. Areas requiring use of reversal drugs or antidotes.

An LPN is accountable not only for the direct intravenous push, but for the decision making and critical thinking associated with each individual circumstance and the knowledge required of each individual medication.

## References

- College of Licensed Practical Nurses of British Columbia. (2010) Practice Guideline: Peripheral Infusion Therapy. Burnaby.*
- College of Licensed Practical Nurse of Nova Scotia (2011) LPNs and Administration of Intravenous Medication. Halifax.*
- Perry, M. & Potter, J.(2009) Parenteral Medications. Clinical Nursing Skills & Techniques (605-620)Toronto.*
- Perry, M. & Potter, J.(2009) Medication Administration. Canadian Fundamentals of Nursing (739-756)Toronto.*