Short Peripheral Catheter (SPC) Checklist

**Think Safety, Insert Safely**

**Preinsertion assessment:**
- Review patient’s medical record for appropriate vascular access device (VAD) and ordered therapy
- Perform venous assessment for proper site selection
- Perform venous palpation to evaluate vein quality
- Identify/select appropriate short peripheral catheter (SPC) device type/gauge
- Consider use of topical/local subcutaneous anesthetic
- Consider use of visualization technology for patients with difficult-to-find veins

**Short peripheral catheter insertion:**
- Perform hand hygiene before insertion
- Adhere to aseptic technique during insertion
- Use appropriate personal protective equipment (PPE) for insertion
- Apply appropriate skin preparation (eg, chlorhexidine), and allow sufficient drying time
- Consider use of transdermal anesthetics or intradermal injections for pain management
- Use no-touch technique on selected site after skin preparation
- Obtain brisk blood return and assess patency
- Adhere to appropriate method for catheter stabilization
- Apply appropriate dressing to catheter site (eg, transparent semipermeable membrane [TSM])
- Document insertion and patient education according to *Infusion Nursing Standards of Practice*

**Short peripheral catheter site assessment/monitoring:**
- Perform hand hygiene and don nonsterile gloves
- Assess need for short peripheral catheter daily
- Assess catheter site using gentle palpation for signs of infiltration, phlebitis, and other complications
- Inspect integrity of dressing on catheter site
- Change dressing as indicated
- Replace short peripheral catheter when clinically indicated
- Follow INS-recommended frequency of site assessment
- Document assessment, interventions, and patient education

**Short peripheral catheter removal:**
- Remove SPC as indicated
- Use proper hand hygiene and don nonsterile gloves
- Apply digital pressure until hemostasis is achieved/apply dressing
- Document removal, follow-up assessment, and patient education

**Safety strategies for consideration:**
- Develop organization’s policies and procedures on SPC; review/revise periodically
- Provide recurring education/training of nurses and HCPs on SPC placement, assessment, monitoring, and removal
- Provide annual SPC competency assessment; monitor clinician performance with prompt feedback
- Monitor proper documentation of SPC procedure
- Develop surveillance process using quality indicators, such as but not limited to, the occurrence/rate of phlebitis, infiltration, and infection
- Promote reporting of adverse events and/or occurrences for performance improvement
- Monitor compliance of infection prevention practices and Standard Precautions

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