

The Charlotte Hungerford Hospital EMS

AEMT IV Competency

EMS Provider: _____ Agency: _____

Evaluator: _____ Signature: _____

Date: ____ / ____ / _____

The EMT- Intermediate will start an intravenous line using aseptic technique and appropriate equipment. The procedure will be considered successful if the vein is accessed, the catheter and tubing are securely taped, the dressing is labeled correctly, the flow rate is accurate, and the procedure is documented in the patient's care record.

| | | Met | Not Met |
|----|---|---|---------|
| 1 | Review Medical Control (Standing Orders) | | |
| 2 | Confirm patient identification | | |
| 3 | Introduce self to patient and/or significant other | | |
| 4 | Utilize age appropriate approaches to explain procedure | | |
| 5 | Obtain allergy history | | |
| 6 | PPE (Universal precautions) | | |
| 7 | Check solution for: | | |
| | a) correct type | | |
| | b) clarity & particulate matter | | |
| | c) expiration date | | |
| | d) leaks or punctures | | |
| 8 | Attach appropriate IV administration set & purge air from tubing | | |
| 9 | Select & prepare dressing materials & tape | | |
| 10 | Perform venous assessment appropriate for the age of the patient | | |
| 11 | Select appropriate IV cannula & gauge size with respect to age specific needs | | |
| 12 | Apply tourniquet snugly enough to impede venous flow, but not arterial flow | | |
| 13 | Don gloves | | |
| 14 | Select vein based on patient age, venous assessment, and patient history | | |
| 15 | Prep selected IV site per hospital policy | | |
| 16 | Perform venipuncture. Enter skin at 5-10 ⁰ angle while maintaining traction on skin | | |
| 17 | Remove tourniquet | | |
| 18 | Apply sterile dressing to IV site per hospital policy | | |
| 19 | Initiate IV infusion slowly with normal saline & observe IV site for swelling and infiltrate | | |
| 20 | Calculate & initiate prescribed IV flow rate, if applicable | | |
| 21 | Document site, date, cannula gauge size, and name of person establishing the IV | | |
| 23 | Dispose of sharps & medical waste in proper receptacles | | |
| 24 | <p style="text-align: center;">Review Standing orders: Trauma (Note: Paramedic intercept should be requested)</p> <p>1) 2nd and/or 3rd degree burns covering more than 20% of their total Body Surface Area (see Rule of Nines in the appendix)</p> <p>2) Trauma presenting with at least one of the following:</p> <ul style="list-style-type: none"> a) Dyspnea b) Tachycardia c) Hypotension d) Rigid abdomen e) Significant blood loss <p>3) When the mechanism of injury indicates transport to a trauma center and/or a trauma alert</p> | <p style="text-align: center;">Standing orders for medical emergencies (Note: Paramedic intercept should be requested)</p> <p>1) Respiratory and/or cardiac arrest</p> <p>2) Chest pain believed to be cardiac in nature, based on the patient's history and complete patient assessment</p> <p>3) Altered mental status with a history of diabetes</p> <p>4) Moderate to severe dyspnea,</p> <p>5) Anaphylaxis</p> <p>6) Unresponsiveness</p> <p>7) Significant fluid loss</p> | |