

PROTOCOL FOR: IV Push Medication: PeriAnesthetic Approved List of

- POLICY:
1. Refer to Dept. of Nursing Protocol / Procedure for IV Push Medications for basic policies, desired patient outcomes, clinical assessment and care, and procedural steps to be followed, unless otherwise outlined in this protocol.
 2. An order must be obtained by a physician or licensed independent practitioner before administration of an IV push medication except during a Code Blue. A written order will be obtained at the earliest possible time if drugs are administered initially by verbal order.
 3. Registered nurses assigned to the Holding Area, GI Endoscopy Suite, and PACU may administer direct IV push medications by the following routes:
 - a. peripheral IV line
 - b. central venous catheter, proximal port of thermodilution catheter
 - c. implanted portsand must have demonstrated IV medication competency as documented on the unit competency checklist for orientation.

Registered nurses assigned to the OR may not administer medications by the IV route.
 4. The list of drugs approved for IV push administration in the perioperative areas is periodically reviewed by the Clinical Chief of Anesthesiology and are subject to approval of the Pharmacy and Therapeutics Committee.
 5. The master list of all medications approved for administration by JDH registered nurses is located in the JDH IV Medication Guidelines, accessed through the Dept. of Nursing website. Information included is:
 - a. generic name / brand name / medication class
 - b. indications
 - c. approved nursing units for use
 - d. usual adult dose / maximum dose
 - e. monitoring details / side effects / parameters for useAdditional current reference information for methods (i.e. dilution), dosages, and time frames for administration may be found on-line via the Micromedex Drug Information System, Lexicomp system, Physician Desk Reference (PDR), and published Nurse's Drug Guides provide. A pharmacist should be consulted for assistance as needed.
 6. Medications approved for IV push in Preoperative Holding Areas, GI Endoscopy Area, and PACU that are in addition to those approved for all RNs to administer by IV Push route are listed below. The following guidelines apply to routine administration, although during emergencies, rate of

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administration and dosage may vary per physician order.

Medication	Preop	GI	PACU
adenosine			X
atropine		X	X
dantrolene			X
digoxin			X
droperidol		X	X
ephedrine			X
epinephrine			X
fentanyl	X	X	X
flumazenil		X	X
glycopyrrolate	X		X
Hydralazine			X
hydrocortisone			X
hydromorphone			X
labetalol	X	X	X
lidocaine			X
lorazepam		X	X
meperidine		X	X
metoprolol	X	X	X
metaclopramide		X	X
midazolam	X	X	X
morphine	X	X	X
neostigmine			X
nitroprusside			X
norepinephrine			X (titratable)
phenylephrine			X
physostigmine			X
propofol			X (titratable)
scopolamine	X		X
sincalide		X	

7. Narcotics approved for "IV push" administration may also be given as IV bolus infusion to patients via PCA pumps.
8. The physician/advanced practitioner and pharmacist will be notified of any adverse effects from medications, i.e. allergic reactions, unexpected change in vital signs, CNS depression, and the Adverse Drug Reaction procedure will be initiated. Complete psn report, as appropriate.
9. Due to the frequency of access to the line(s) and the continuous infusion of fluids through the lines during procedures, IV Push Medication Administration in the perioperative areas will deviate from the nursing

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departmental policy as follows:

- a. syringes will be attached to the IV line at a stopcock port rather than in-line access port;
- b. no pre- or post-administration flush is necessary in the absence of signs of infiltration;
- c. no aspiration of fluid from the IV line is required prior to administration of medication

10. Administration of IV medications by a per diem or floating RN assigned to the approved areas will be done under the immediate supervision of a permanent staff member until competency of the nurse is confirmed and documented.

APPROVAL: Nursing Standards Committee
Department of Pharmacy

EFFECTIVE DATE: 4/93

REVISION DATES: 12/89, 12/90, 2/92, 3/93, 5/95, 2/96, 5/00, 6/00, 12/02, 6/03,
1/06, 4/09, 8/09