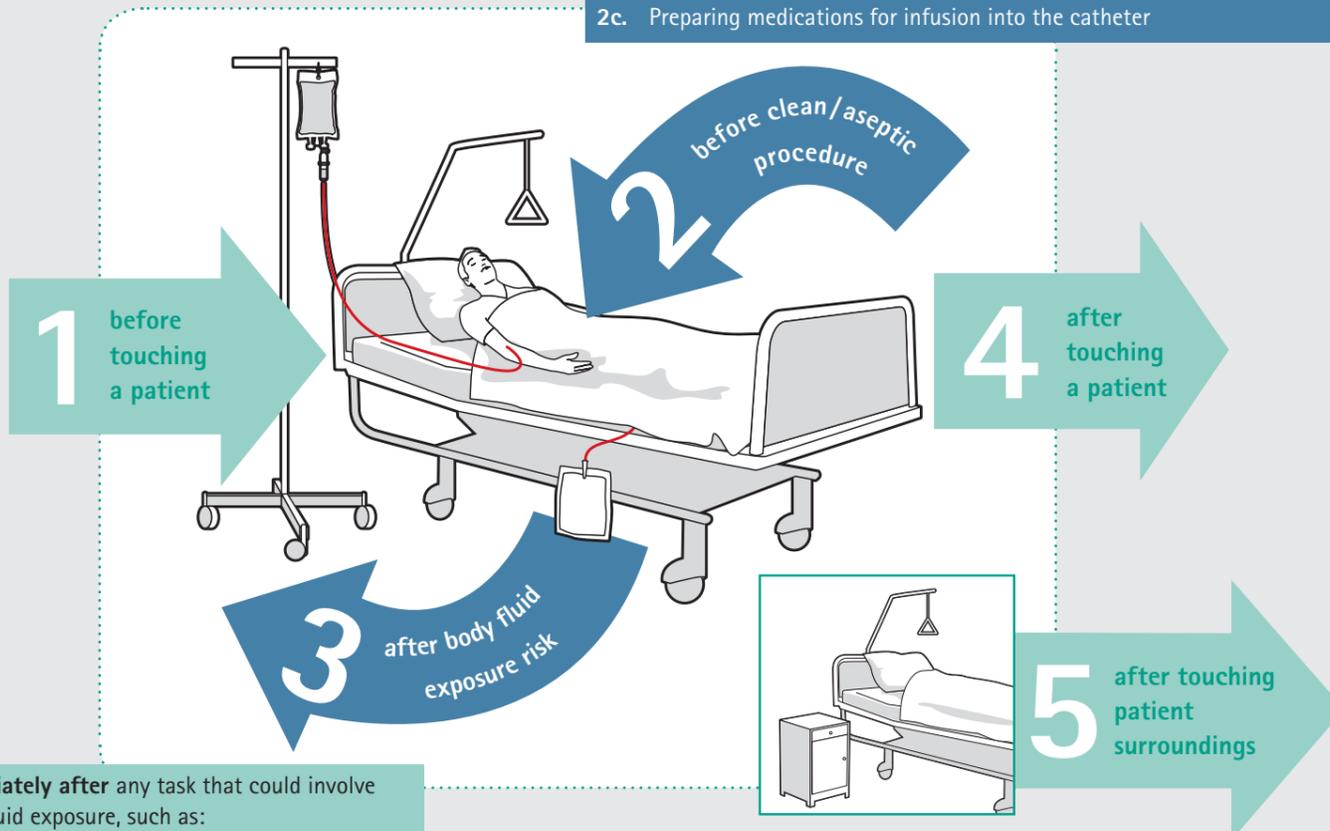


**Immediately before** any manipulation of the catheter and the associated intravenous medication administration system, such as:

- 2a. Catheter insertion or removal (before putting on clean, non-sterile gloves), dressing change, drawing blood, or before preparing associated equipment for these procedures
- 2b. Accessing (opening) the administration set and infusion system
- 2c. Preparing medications for infusion into the catheter



**Immediately after** any task that could involve body fluid exposure, such as:

- 3a. Inserting or removing the catheter
- 3b. Drawing blood

\*Based on the 'WHO hand hygiene improvement approach' posters, URL: [http://www.who.int/entity/gpsc/5may/EN\\_PSP\\_GPSC1\\_5May\\_2015/en/index.html](http://www.who.int/entity/gpsc/5may/EN_PSP_GPSC1_5May_2015/en/index.html)  
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## KEY ADDITIONAL CONSIDERATIONS FOR PERIPHERAL VENOUS CATHETER

1. **Indication:** Ensure that a peripheral venous catheter is indicated. Remove the catheter when no longer necessary/ clinically indicated.
2. **Insertion/maintenance/removal**
  - 2.1 Prepare clean skin with an antiseptic (70% alcohol, tincture of iodine, an iodophor, or alcohol-based 2% chlorhexidine gluconate) before catheter insertion.
  - 2.2 Wear clean, non-sterile gloves and apply an aseptic procedure (with non-touch technique) for catheter insertion, removal, and blood sampling.
  - 2.3 Replace any dry gauze-type dressings every 2 days.
  - 2.4 Consider scheduled catheter change every 96 hours.
- 2.5 Change tubing used to administer blood, blood products, chemotherapy, and fat emulsions within 24 hours of infusion start. Consider changing all other tubing every 96 hours.
3. **Monitoring:** Record time and date of catheter insertion, removal and dressing change, and condition (visual appearance) of catheter site every day.



# MY 5 MOMENTS FOR HAND HYGIENE

Focus on caring for a patient with a peripheral venous catheter\*

Effective