

INJECTION TECHNIQUE for IM or S/C route CSC= Clinical Skills Centre DOP = Direct Observation of Practice

NAME:	DESIGNATION:
WARD/DEPT:	DIVISION:
DATE OF TRAINING:	TRAINER NAME:

	CSC	DOP	DOP	DOP
Decontaminate hands as per policy				-
Identify patient as per policy, asking them to state their first name,				
surname, date of birth. Check that these details & the hospital number				
match those on prescription & wristband. If patient cannot respond or				
is a child, take the identification details from the wristband.				
Explain procedure & gain informed consent as per policy.				
Check the drug has not previously been administered for this time				
Clean tray or receiver into which the drug is to be put				
Put on apron and decontaminate hands as per policy				
Equipment, ensure that packaging is intact & in date.				
Correct needle size for reconstituting the drug (21gauge)/ filter needle				
Correct size of needle for administering the drug (21, 23, or 25 gauge				
depending on route (IM or S/C), site or size of the patient)				
Select appropriate size syringe for the volume to be administered				
70% isopropyl alcohol swabs (for injection site & drug ampoule)				
Drug to be administered and patient drug prescription chart				
Gloves, apron & sharps bin				
Two Registered Health Care Professionals to check prescription :				
(a) Drug (e) route & method of administration				
(b) Dose (f) validity of the prescription				
(c) Date & time of administration (g) signature of doctor				
(d) Diluent as appropriate (h) the prescription is legible				
(i) allergies				
Decontaminate hands as per policy and put on apron/non sterile gloves				
Prepare the drug appropriately using aseptic non touch technique				
 Inspect the solution for cloudiness or particulate matter 				
Tap the neck of the ampoule gently				
 Clean ampoule with alcohol swab & leave to dry. Apply a gauze 				
swab on the neck of the ampoule & snap it open.				
Re-inspect the solution for any glass fragments				
 Tilt the ampoule, withdraw the required amount of the solution 				
 Then tap the syringe to dislodge any air bubbles, & expel air 				
Change the needle. Discard the used needle into the sharps bin.				
Place prepared medication in clean tray with other required equipment				
Remove gloves. Decontaminate hands using Ayliffe technique				
Take prepared medication to patient, identify as above and check for				
allergies. Ensure patient dignity maintained throughout.				
Place patient in an appropriate position and expose the chosen site				
Clean the site with an alcohol swab for 30 seconds. Allow to dry				
Decontaminate hands and apply gloves				
Stretch the skin around the chosen site (IM) or pinch the skin (for S/C)				
Using an appropriate size needle inject site at an angle of 90 degrees,				

	,	•
Document procedure in appropriate place/prescription sheet		
Remove gloves and decontaminate hands		
Ensure patient is comfortable. Check site and dress if appropriate.		
Ensure that sharps & non-sharp waste is disposed of appropriately		
container and apply pressure to site		
Withdraw the needle quickly, dispose immediately into sharps		
before withdrawing the needle		
Inject drug at a rate of 1ml per 10 seconds. Wait another 10 seconds		
1 0		
Pull back the plunger, if no blood is aspirated continue injecting drug		
shaft exposed.		
90 degrees depending on needle length. Leave the third of the needle		
quickly plunging into the skin (IM). For S/C injection the angle is 45 or		

Signature of Clinical Assessor		
Date		

√ = Satisfactory FP = Further practice

V = Satisfactory	r = ruitilei	practice	
Knowledge Assessment	Clinical Skills Centre	DOPS	Final DOPS
What is the correct procedure for identifying unconscious patients?			
What is the importance of using the correct needle for drawing up the drug?			
Why must you wait 10 seconds before removing the needle post injection?			

CANDIDATE'S STATEMENT OF VERIFICATION

I have successfully undertaken a period of supervised practice and have achieved all of the components in the assessment tool. I understand that it is my professional responsibility to adhere to relevant policies and procedure guidelines when undertaking this skill in accordance with guidance from professional bodies and Department of Health. I understand that I may be audited to monitor effectiveness of training provided.

Date achieved:	
Date achieved:	

NB: Signature of assessor in practice if new to skill or signature of Clinical Skills assessor if update

References & Links to policies

- Royal Marsden (2006) Clinical Nursing Procedures. Intranet version (6th Edition)
 WUTH Policies Consent to Treatment, Identification of Patients, Hand Hygiene
 NMC (2002a) Guidelines for the Administration of Medicines, Nursing and Midwifery
 Council, London.
- **NPSA** (2007) *Workforce competence on preparing injectable medicines.* <u>www.npsa.nhs.uk/health/alerts</u>