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HOME CARE OF AN INTRAVENOUS (IV) SALINE LOCK

You have had an IV saline lock placed in your arm in order to provide intravenous access for administering medications over the next few days. We use the IV saline locks for those patients who may have difficult veins to access. By inserting this device, we can avoid having to insert an IV each day you come to have an infusion. Because of the risk of infection, this should never be done for convenience, and should only be reserved for patients with nearly impossible vein access.

The IV Saline Lock consists of 3 parts: the catheter tube which is in your vein, the attached extension tubing, and the cap that seals the tubing. Because the IV Saline lock provides direct access to your bloodstream, there will be a dressing placed over the site to keep it clean and minimize the risk of infection.

You may have this IV Saline lock for up to 72 hours, at which time it must be removed. During this period of time, it is important to watch for any signs of infection which can include fever of 100 degrees Fahrenheit or higher and / or swelling, tenderness, or redness at the IV site. Should you have any of these symptoms or if you notice any signs of leakage or blood draining, please call the office immediately.

IV Flush Instructions:	IV Flush Ordered at Home.	IV Flush Not Needed	
If this is checked, your phys	sician has ordered that you flush	the IV Saline Lock at home	
with 3-5 cc of Normal Salin	ne at the following time:	·	

- Wash your hands.
- Prepare equipment.
- Remove the prefilled saline syringe from the package.
- Hold the syringe upright, and slowly advance the plunger to remove any air. Replace the cap.
- Swab the valve on the IV tubing with alcohol. (Do not remove valve). Keep valve from touching another surface. If valve becomes contaminated, wipe valve with alcohol wipe.
- Remove the cap from the syringe and twist syringe into the valve, unclamp tubing and slowly draw back on plunger until you see a small amount of blood return. Then inject the normal saline. However, if flushing is difficult or you do not see a blood return, or if there is resistance, pain, leaking or swelling, do not continue flushing and call the office.
- Remove syringe and re-clamp the tubing.
- Discard syringes in a firm plastic or metal container (bleach bottle or coffee can). You can throw away in regular trash, not recycling trash.
- If catheter becomes dislodged and falls out, apply pressure to the site until any bleeding stops and apply a band-aid.