# CARONDELET, AVFD, and TPFD EMT PERIPHERAL IV ACCESS and MAINTENANCE ADMINISTRATIVE GUIDELINE: ADULT AGE 15 or OLDER

This AG is approved for use by an EMT-Basic that is approved to initiate a Peripheral (Arm) IV by the District and the District's Medical Director that has:

- Received initial training; and
- Completed a skills lab every year; and
- Has maintained documentation of five successful IVs annually

District approved EMT-Basics, can initiate a Peripheral (Arm) IV only, EMT Basics are not permitted to:

- Start a Saline Lock
- Draw Blood

# **INCLUSION**

This AG can be used on adult patients (age 15 and older) where an IV is listed in any approved AG

# **EXCLUSION**

This AG cannot be used on patients under the age of 15 nor any patient excluded in any approved AG

#### **Patient Excluded**

Initiate proper BLS and ALS care using the AG most appropriate for the patient's clinical presentation

OR

Contact online medical direction authority

#### **Patient Included**

# **ORDERS**

# Peripheral IV

Normal Saline or Lactated Ringers as appropriate

# **Fluid Bolus**

One fluid bolus if patient meets criteria outlined in an approved AG for a fluid bolus; cannot repeat

# **Special Notes**

- \* Patients that receive a peripheral IV need to have a follow-up ALS assessment.
- \* BLS transport of a patient with a peripheral IV is appropriate only if the patient:
  - o Meets criteria for BLS transport in the BLS Transport AG; and
  - o IV was initiated for fluid therapy only and patient's vital signs have returned to those listed as appropriate o for BLS transport in the BLS Transport AG.

Approved: 4/29/22