



The Johns Hopkins Hospital Peripheral Intravenous Line Insertion Competency Checklist



Name: _____ Date: _____ Unit: _____ ID #: _____

CHECKLIST ITEM	Needs Review
1 Verifies physician's order & pt's identification	
2 Washes hands before entering patient's room	
3 Explains procedure to the pt	
4 Gathers/Sets up supplies & equipment	
5 Dons gloves	
6 Applies tourniquet	
7 Assesses appropriate vein	
8 Applies alcohol w/ friction in a circular motion & allows alcohol to dry	
9 Applies Chloraprep over area cleaned with alcohol for 30 seconds and allow to dry	
10 Performs venipuncture while stabilizing skin w/ the non-dominant hand	
11 Enters skin @ a 10 to 30 degree angle. Decreases angle when skin has been penetrated	
12 Advances catheter 1/3 of the way & checks for blood return in flashback chamber	
13 Pulls stylet back while advancing catheter gently into the vessel & assures safety device locks	
14 Removes tourniquet	
15 Applies digital pressure beyond catheter tip & hold catheter @ hub then grips pads to turn it in either direction(right or left) to remove from hub	
16 Connects j-loop to hub & aspirates for blood return	
17 Flushes with at least 2ml (per protocol) of 0.9% NSS	
18 Applies transparent occlusive securement dressing	
19 Secures j-loop w/ tape on pt's extremity	
20 Labels dressing w/ initial, date, time & gauge	
21 Removes gloves and washes hands	
22 Document in pt's medical record (includes date, time, catheter gauge & length, number of attempts, site, blood return, amount of NSS flushed & pt's tolerance to procedure).	
23 If unsuccessful, (no more than 2 attempts) consider 2 nd clinician and documents appropriately.	

3.13.17

Please document all attempts

Successful	Date	Comments	Preceptor	Initials
YES NO				
YES NO				
YES NO				
YES NO				
YES NO				
YES NO				
YES NO				
YES NO				

- Must demonstrate 4 successful insertions then can perform without supervision

Validator's Signature: _____

Initials: _____