

designed to protect the IV site and allows for visibility of the site. The device also minimizes use of padded boards, splints, or other restraints and tape and maintains skin integrity. The connector tubing or extension tubing can be looped to make it small enough to fit under the protective cover to prevent accidental snagging of the catheter. It is important to safely secure the IV tubing to prevent infants and children from becoming entangled in the tubing and from accidentally pulling the catheter or needle out. Securing the tubing in this manner also eliminates movement of the catheter hub at the insertion site (mechanical manipulation). A colorful and interesting sticker can be applied to the protecting device to add a positive note to the procedure.



FIG 20-17 I.V. House used to protect the intravenous (IV) site.

Finger and toe areas are left unoccluded by dressings or tape to allow for assessment of circulation. The thumb is never immobilized because of the danger of contractures with limited movement later on. An extremity should never be encircled with tape. The use of roll gauze, self-adhering stretch bandages (Coban), and ACE bandages can cause the same constriction and hide signs of infiltration.

Nursing Alert

Opaque covering should be avoided; however, if any type of