

INTRAVENOUS ADMINISTRATION SETS CONSERVATION CONSIDERATIONS

Healthcare systems across the nation and the world are experiencing supply chain disruptions and product shortages due to the ongoing influence of COVID-19. Factors such as raw material shortages with subsequent impact on component production, shipping port logjams, freight costs, and more have significantly impacted the availability of critical patient care items and devices in a multitude of categories. Early recognition of potential supply shortages, fully understanding the utilization (where and why) of these products and implementing conservation strategies will support effective management of these products throughout the disruption.



Consolidate: Inventory all stock on hand and consider a central distribution location for disbursement. Large hospital systems may want to contemplate how to approach consolidation efforts, either as a whole system, or at the individual site level.



Collaborate: Engage prescribers and pharmacists to evaluate patient treatment plans in relation to medication management. Opportunities may exist to alter the route of medication administration, allowing for intravenous infused medication to be provided in other routes such as IV push, IM or oral.



Conservation Policies: Enact conservation policies related to the use of primary and secondary intravenous administration sets. Gather a team to review current policies/practices and determine if changes are necessary. Consider lengthening the time between set changes. According to the CDC (2017), "In patients not receiving blood, blood products or fat emulsions, replace administration sets that are continuously used, including secondary sets and add-on devices, no more frequently than 96-hour intervals, but at least every seven days."



Educate: Engage and educate end-users on conservation efforts in relation to the use of intravenous administration sets.



Alternative: Due to the proprietary nature of most primary intravenous administration sets, alternative products may not be feasible due to infusion pump compatibility. However, for secondary tubing consider supplier recommended substitutions, along with alternate options from other suppliers, if available.

References

<https://www.cdc.gov/infectioncontrol/guidelines/bsi/recommendations.html>

<https://www.ismp.org/resources/planning-anticipated-shortage-smart-infusion-pumps-and-dedicated-administration-sets-around-the-use-of-IV-tubing-sets>

Initial or Update	Date	Completed by	Changes Made
Initial review	03.2022	FP	Formatting
Initial	03.2022	JU	Created