

# COMPETENCY VALIDATION for BLOOD DRAWS from CVADs

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Practice Domain	Competency Expectations
<b>Clinical Knowledge And Skill</b>	<ol style="list-style-type: none"> <li>1) Perform procedure according to LHSC guidelines without the need for supervision from advanced/expert peer</li> <li>2) Recognize the need to review the procedure prior to performing the skill</li> <li>3) Perform skill safely with minimal to moderate expenditure of excess time/energy, increasing level of expertise</li> <li>4) There is an expectation and opportunity to perform the skill in your unit <b>at least twice a month on a regular basis</b></li> </ol>
<b>Patient Monitoring</b>	<ol style="list-style-type: none"> <li>5) Obtain independence to assess basic CVAD parameters related to line patency, IV function and complications</li> </ol>
<b>Managing Rapidly Changing Situations</b>	<ol style="list-style-type: none"> <li>6) Troubleshoot and manage common complications without the need of supervision</li> <li>7) Recognize unexpected complications and consults the appropriate assistance/resource</li> </ol>
<b>Teaching/ Coaching</b>	<ol style="list-style-type: none"> <li>8) Able to assess and provide education to patient/family related to required blood sampling</li> <li>9) Obtain independence to answer patient/family questions related to common or possible catheter complications</li> </ol>

❖ To obtain competency, an experienced peer is to review and supervise new staff at least three times or until an adequate knowledge/skill base is obtained\*

\*Many units have recognized unit resources who meet the requirements to supervise the above sampling competency outline. If so, one of these individuals may act as a peer reviewer for observation of your practice. If there is no unit resources, or require additional assistance, contact your PCV Consultant (VH) or IV Team (UH)

## Competency Assessment Tool for Blood Sampling from a CVAD

**❖ Refer to Essential Steps from a CVAD (Section F) for full details**

**Name:**

**Unit:**

<b>Check List Essential Steps</b>	<b>DATE</b>			
<ul style="list-style-type: none"> <li><b>If IV solution infusing:</b></li> </ul>				
1) Gathers and assembles all necessary equipment				
2) Wears a face mask, eye shield and non-sterile gloves throughout the procedure				
3) Maintain closed / clamped system				
4) Cleanses MicroClave Clear® connector with CHG swab and allows to dry 30-60 seconds				
5) Accesses into the MicroClave Clear® by twisting on a 10 ml preloaded NS syringe (PosiFlush) and turbulently, Push/Stop, flushes catheter				
6) Gently draws back appropriate amount of wastage and removes by untwisting syringe				
7) <b>a) PASV PICCs:</b> Twists on 10 ml syringe and withdraws appropriate amount of blood required, removes and attached a BD Blood Transfer Device® to syringe				
8) Flush with 10 ml preloaded NS syringes (PosiFlush) uses a turbulent Push/Stop method, clearing connector and catheter of all blood residue				
9) Transfers blood into tubes by using proper order of draw				
10) Adults: Flush with another 10 ml preloaded NS syringes (PosiFlush) using a turbulent Push/Stop method, clearing connector and catheter of all blood residue				
<b>7b) Other CVADs:</b> Attaches BD Leur-Lok Access Device® and collects blood samples in proper order of draw and flushes with 20 ml (adults) preloaded NS syringes (PosiFlush) using a turbulent Push/Stop method, clearing connector and catheter of all blood residue				
11) Re-establishes IV flow, ensuring all open pathways				
<ul style="list-style-type: none"> <li><b>Or if the catheter is locked and not infusing:</b></li> </ul>				
12) Follows Flushing and Locking to Maintain Patency procedure – Section E Adults or Paediatrics Reminder: Attempted to withdraw wastage prior to flushing				
13) Discards all syringes accordingly				
14) Labels all blood tubes at bedside				
15) Documents procedure on appropriate patient records				
<b>Initials:</b>				
<b>Comments:</b>				
<b>Completion Date:</b>	<b>Signature:</b>			