

Intravenous therapy

What is intravenous therapy?

Intravenous therapy (IV) is fluid or medicines given into the vein to treat your child's medical condition. A small catheter (plastic tube) is inserted into your child's vein and secured. Once it is in and secure, it should not hurt.

The catheter is connected to a bag of medicine or fluids by a long tube. When the medicine or fluids are given, this is called an "IV infusion".

IV infusions are controlled by electronic computerized pumps for safety. The pumps control the rate (speed) of the infusion so your child gets the right amount in the right amount of time.

Why does my child need an IV?

An IV can give fluids and medicine faster, and in better strengths, than through the mouth or by a shot in the muscle. It is used for purposes such as:

- giving fluids for dehydration
- correcting chemical levels in the blood
- giving blood products
- fighting infections
- relieving pain
- giving long-term treatment (weeks, months, or years)

What are the signs of problems?

An IV can leak or come out of the vein. If this happens, the tissue around the site can be injured, especially with certain medicines. An IV site can also become infected. Our goal is to prevent all blood infections from IV sites.

The nurses will check your child's IV site every hour day and night, to watch for problems. Signs of problems are:

- pink or red skin around the catheter
- puffy skin around or near the catheter site
- pain around the catheter site

How should I help care for my child?

Once the IV is in place, it should not hurt, but your child may not like it. To help us protect your child's IV:

- Don't allow your child to pull on the IV. Use distraction to take your child's mind off of it. Ask Child Life for activities your child can do.
- If an arm immobilizer or soft tie is needed to help protect the IV site, leave it on.
- Help the nurses plan for checking your child's IV before naps and at night. Know that the nurses will need a good light to check your child's IV every hour.
- Keep the bedding off of the IV site.

Frequent hand hygiene is the **most** important way to prevent the spread of germs. Always **wash hands well** with soap and water or alcohol hand sanitizer for at least 15 seconds before giving any care to your child. It's **okay to ask** others to do the same.

When should I call the nurse?

Call the nurse if:

- your child becomes upset with the IV and you need help.
- you notice any of the signs of problems listed above.
- if the IV tubing is pulled loose.
- alarms on the pump sound – the nurses listen for these and will usually come before you call them.
- if a medicine stings or burns. Although some stinging is expected with certain medicines, your nurse may be able to ease this.
- you have any other questions or concerns.

What else do I need to know?

Your child's doctor or nurse practitioner will decide the type of catheter based on the type and length of treatment needed. IV catheters can be:

- **Peripheral** – a short catheter just under the skin.
- **Peripherally inserted central catheter (PICC)** – a long catheter placed in the arm and threaded into a large vein in the chest.

- **Central** – a long catheter threaded through a vein into a large vein in the chest.
- **“Locked line”** – sometimes a child needs an IV for medicine only, and no fluid between doses. If so, after a medicine dose, the nurse will disconnect the bag and long tubing, and flush the IV catheter to keep it from getting plugged.

Education sheets about your child's medicines are available.

Questions?

This sheet is not specific to your child, but provides general information. If you have any questions, please ask your nurse or doctor.

For more reading material about this and other health topics, please call or visit the Family Resource Center library, or visit our Web site: www.childrensmn.org.

Children's Hospitals and Clinics of Minnesota
Patient/Family Education
2525 Chicago Avenue South
Minneapolis, MN 55404
7/07 ©Copyright