

ADULT INTRAOSSEOUS PROCEDURE

ALWAYS USE STANDARD PRECAUTIONS

INDICATIONS

- Patient in extremis, cardiac arrest, profound hypovolemia, or septic and in need of immediate delivery of medications / fluids and immediate IV access is not possible

CONTRAINDICATIONS

- Absolute contraindications:
 - Recent fracture of involved bone (less than 6 weeks)
 - Vascular disruption proximal to insertion site
 - Inability to locate landmarks
- Relative contraindications:
 - Infection or burn overlying the site
 - Congenital deformities of the bone
 - Metabolic bone disease

EQUIPMENT

- Intraosseous infusion needle and/ or mechanical device
- Commercially prepared chlorhexidine with alcohol swab or ampule. If patient has allergy to chlorhexidine, use alcohol swab only.
- Sterile gauze pads
- 10-12 ml syringe filled with 10 ml saline
- IV NS solution and tubing with 3-way stopcock
- Supplies to secure infusion
- Pressure bag
- **Lidocaine 2%** (Preservative Free)

PROCEDURE

- Aseptic technique must be followed at all times
- Position and stabilize chosen site
- Prepare insertion site using aseptic technique
- Air or gauze dry
- Insert IO needle according to manufacturer's directions
- Confirm placement
- Attach primed extension set and flush with 10 ml of saline
- If patient awake and/or responsive to pain, infuse 2% **Lidocaine** 20-40 mg over 30-60 seconds. Wait 30-60 seconds before fluid infusion. May repeat Lidocaine in 15 minutes if needed.
- If resistance is met, remove needle, apply pressure to site and attempt at secondary site
- Attach pre-flooded IV tubing
- Stabilize as recommended by manufacturer
- Fluid administration requires pressure bag
- Monitor insertion site and patient condition