




Understanding Infusion Therapy Standards of Practice


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44. VASCULAR ACCESS DEVICE (VAD) REMOVAL

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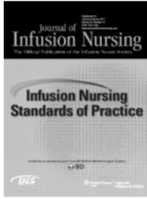


44.3 VADs are not removed based solely on length of dwell time because there is no known optimum dwell time.



2011 vs 2016


- 110 pages to 159 pages
- **350** more references
- Level 1 evidence increased 3.8% to 5.8%
- Level 5 evidence decreased 67% to 46%

Strength of the Study Reference	Evidence Description
1	Meta-analysis, systematic literature review, guidelines based on randomized controlled trials (RCTs), or all-level well-designed RCTs
2	Evidence from anatomy, physiology, and pathophysiology references as outlined in the text of writing
3	Two well-designed RCTs, 3 or more multicenter, well-designed clinical trials without randomization, or randomized literature review of clinical practice trials (practice)
4	One well-designed RCT, several well-designed clinical trials without randomization, or several studies with quasi-experimental designs based on the same population. Includes 2 or more well-designed, nonrandomized studies
5	BDI-designed quasi-experimental study, case-control study, cohort study, cross-sectional study, time-series study, systematic literature review of nonrandomized case-control studies, or controlled before-after studies. Includes historical or descriptive data, case reports, guidelines based on consensus, descriptive study, well-designed quality improvement project, theoretical basis, recommendations from key nursing bodies and professional organizations, or manufacturer directions for use for practice or research. Includes historical or descriptive data or generally accepted for clinical use in research based on patient identification. May also be used as Evidence Category, although it is not a level
6	Opinions, traditions and other criteria not by agencies with the ability to impose consequences, such as the ANCC, Center for Medicare & Medicaid Services (CMS), Occupational Safety and Health Administration (OSHA), and state boards of nursing

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44.2 Vascular access devices (VADs) are removed upon an unresolved complication, discontinuation of infusion therapy, or when deemed no longer necessary for the plan of care.



44. VASCULAR ACCESS DEVICE (VAD) REMOVAL

44.1 The clinical need for each peripheral and nontunneled central vascular access device (CVAD) is assessed on a daily basis.



How does this change your practice?

- Site Selection
- IV Cannula Selection
- Skin Prep
- Securement
- Needleless Connectors
- Flushing



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Questions?

Almost 90% of hospital inpatients receive an IV!
And 100% of them matter.



Taking IV Therapy to the Next Level