

Intra-Peritoneal (IP) Additive Loading and Administration Assessment Form

Limitations for Practice: Registered Nurse
Clinical Nurse Specialist
Clinical Nurse Consultant

Objective:

To ensure IP additive loading and administration is performed according to best practice guidelines reducing the risk of infection and ensuring patient safety.

Background:

1. IP additive loading and administration assessment and competency is compulsory for 4S and ED nursing staff prior to attending to the procedure.
2. Nursing staff with no exposure to IP additive loading and administration must observe the procedure then practice under supervision by a PD competent nurse.
3. The assessor will advise the number of practice sessions the nursing staff requires prior to a final assessment.
4. Simulated practice sessions are encouraged until technique is safe and satisfactory for a final assessment.
5. Final assessment is to be performed on a patient.
6. Final assessment is to be carried out by a PD competent nurse.
7. IP additive loading and administration competency is to be renewed every 5 years.
8. A reassessment may be necessary in line with protocol revisions.

Note:

1. Keep the original copy of your completed assessment form for your record.
2. Forward a copy of the completed assessment form to the CNE and PD unit.

Intra-Peritoneal (IP) Additive Loading and Administration Assessment Form

Name: _____ Pay No: _____
Print. Signature

Please initial appropriate box

Action	P1	P2	P3	P4	P5	C
1. Ascertains type of peritoneal dialysis and regimen						
2. Refers and follows the appropriate PD WPIs (i.e. APD or CAPD) to set-up						
3. Checks medication chart for IP additive/s order (Ensures IP additive is administered prior to PD fluid infusion)						
4. Refers to corresponding IP additive PD CBR or WPI						
5. Checks necessary blood levels as indicated						
6. Refers to PD CBR for IP additive compatibility (for multiple additives)						
7. Collects equipment and additive						
8. Counterchecks additive to medication chart with another RN						
9. Completes additive label						
10. Cleans trolley						
11. Performs small handwash						
12. Prepares additive/s as per PD CBR or WPI and places on top of cleaned trolley						
13. Disinfects the PD fluid bung/s with alcohol swab for 1 minute						
14. Performs 1 minute handwash						
15. Uses smaller gauge needle (21 G) to inject additive to the PD fluid bung/s						
16. Applies additive label to bag						
17. Continues with appropriate PD infusion procedure as per PD WPI						
18. Signs for additive on medication chart with another RN						
19. Discards used equipment appropriately						
20. Documents procedure done and hands over to the next shift						

Practice 1 (P1) Assessor's name & initial _____ Date _____

Practice 2 (P2) Assessor's name & initial _____ Date _____

Practice 3 (P3) Assessor's name & initial _____ Date _____

Practice 4 (P4) Assessor's name & initial _____ Date _____

Practice 5 (P5) Assessor's name & initial _____ Date _____

Competent (C) Assessor's name & initial _____ Date _____