UC DAVIS HEALTH | Center for Professional Practice of Nursing

| Name: | Employee ID #: |
|---|---|
| Unit: | Title: |

PERFORMANCE CRITERIA - Unless otherwise specified all skills will be demonstrated in accordance with the appropriate UC Davis Health policy.

**These skills will be considered complete when all below performance criteria are completed and have been scanned and emailed to: hs-cppn@ucdavis.edu**

| Intrahepatic Implanted Pump Refill | Date Completed (or N/A) | Verifier Initials |
|---|---|---|
| **Intrahepatic Implanted Pump Refill** **# DAHS-NSCIIPR** | | |
| References:<br>1. UC Davis Health Policy 10007 Intrahepatic Implanted Pump Refill<br>2. UC Davis Health Policy 10001 Hazardous Drugs (HD) (Chemo): Safe Handling/Preparation/Administration/Disposal of Waste/Spill Procedures<br>3. Elsevier skills "Safe Handling of Hazardous Medications (Oncology) -CE<br>4. Elsevier skills "Sterile Gloving-CE"<br>5. Medtronic online resources: https://www.medtronic.com/us-en/healthcare-professionals/products/neurological/drug-infusion-systems/synchromed-ii-clinician-programmer.html | | |
| Explain sterile procedure to patient. | | |
| Verification of provider's orders via electronic medical record (EMR), chemotherapy module (BEACON). If any dose reductions or programming changes are needed based on RN assessment, contact provider. | | |
| Perform telemetry with Synchromed Programmer to determine the volume of fluid remaining in the drug reservoir. Calculations are based on previous refill programming. | | |
| Perform hand hygiene. | | |
| Place patient in a supine position, ensuring patient comfort. Assess pump site for signs and symptoms of swelling, redness or tenderness; notify physician if present. Palpate pump to establish orientation and landmarks. Refer to physician and stop procedure if unable to palpate pump or grasp pump firmly. | | |
| If administering chemotherapy, perform independent double check, including verification of eight rights of medication administration as defined in UC Davis Health Policy 4055 Medication Administration. If not administering chemotherapy, check syringe provided by pharmacy against physician order and verify 8 medication rights. | | |
| Demonstrate safe handling techniques and donning of appropriate Hazardous Drug PPE as described in . UC Davis Health Policy 10001 Hazardous Drugs (HD) (Chemo): Safe Handling/Preparation/Administration/Disposal of Waste/Spill Procedures. | | |
| Have a clean, clear workspace for sterile supplies. Perform hand hygiene and don surgical mask.<br>Assemble the required supplies as listed above. | | |
| Using non-sterile gloves, prep skin with 3 sterile alcohol prep pads or sticks. Once dry, using aseptic technique, prep skin with one chlorhexidine swab stick or 3 povidone-iodine swab sticks. Let dry while opening packages and sterile gloves. | | |
| Open refill kit and sterile glove packages. Using sterile technique, drop stopcock into refill kit. | | |
| Perform hand hygiene. Don sterile gloves, additional PPE and assemble tubing set. | | |
| Place fenestrated drape, exposing pump site. | | |
| Locate and palpate the pump. | | |
| Place template over pump, aligning template edges with perimeter edges of pump. With empty syringe attached to stopcock and clamped tubing, insert provided needle through the template's center hole. Continue penetration until the needle stops at the bottom of the pump's septum. The titanium needle stop under the septum will damage the needle tip if excessive force is used. Stop procedure and refer to physician if needle stop cannot be reached with longest (2.0) needle provided in Synchromed refill kit. Consider fluoroscopy to assess pump access port or needle placement if unsure. | | |
| Unclamp tubing and withdraw the fluid from the reservoir using gentle, negative pressure. Empty the reservoir completely (i.e., until air bubbles are present in the extension tubing). The amount withdrawn should approximately equal the previously noted reservoir volume from the current pump status readout from the programmer. Approximately 0.5 ml of fluid will remain in the extension tubing. If there is greater than 1 ml discrepancy between calculated and measured pump residual volumes, RN will consult physician.<br>If fluid removed is chemotherapy, waste drug according to UC Davis Health Policy 1630 Pharmaceutical Waste Management. | | |

UC DAVIS HEALTH | Center for Professional Practice of Nursing

| Name: | Employee ID #: |
|---|---|
| Unit: | Title: |
| PERFORMANCE CRITERIA - Unless otherwise specified all skills will be demonstrated in accordance with the appropriate UC Davis Health policy. | |
| **These skills will be considered complete when all below performance criteria are completed and have been scanned and emailed to: hs-cppn@ucdavis.edu** | |

| **Intrahepatic Implanted Pump Refill # DAHS-NSCIIPR** | **Date Completed (or N/A)** | **Verifier Initials** |
|---|---|---|
| Close the clamp and stopcock and remove stopcock and syringe containing residual medication. Note: The needle and tubing must remain in place. | | |
| Attach the syringe containing the prescribed fluid to the clamped extension tubing set. Verify needle placement to ensure that needle is accurately placed at the bottom of the pump. | | |
| Open the clamp and slowly inject the fluid into the reservoir in 5 ml increments. Do not force the injection. Excessive pressure caused by a full reservoir or too rapid a fill rate may cause damage to the pump or affect infusion accuracy. | | |
| Close the tubing clamp and carefully remove the needle from the pump septum. | | |
| Apply pressure to needle site with 4x4 gauze pad for a full minute or until bleeding stops. | | |
| Remove cleansing agent from skin using soap and water, if appropriate. | | |
| Ensure bleeding has stopped; apply adhesive bandage if necessary. | | |
| Dispose of all components of refill kit into appropriate waste containers. | | |
| Using Medtronic Synchromed Programmer, perform interrogation of pump and reprogram appropriate parameters per MD order. | | |
| 1. Use EMR After Visit Summary (AVS) to outline home cares and education needed for patient and family:<br>a. Purpose and use of the Synchromed infusion pump.<br>b. Possible side effects to watch for with any medication, potential problems and how to deal with them at home.<br>c. Patient should concur with pump alarm date and next refill date (pump must be refilled every 14 days while patient is on active treatment. It may be possible to change to 21 days once active treatment is completed). | | |
| Documentation of the procedure should include:<br>a. Anticipated reservoir fluid volume calculated by the Synchromed programmer<br>b. Actual reservoir fluid aspirated from the pump<br>c. Medication Administration on the Medication Administration Record<br>d. Any problems with any portion of the procedure | | |

| **PRECEPTOR SIGNATURE** | | |
|---|---|---|
| **Signature and Printed Name of Preceptor or other verified personnel who have initialed on this form:** | | |
| Initial: | Print Name: | Signature: |

## PRECEPTEE STATEMENT AND SIGNATURE:

I have read and understand the appropriate UC Davis Health policies and/or equipment operations manual; I have demonstrated the ability to perform the verified skills as noted

| | | |
|---|---|---|
| **Printed Name** | **Signature** | **Date** |

**Scan and email to:** hs-cppn@ucdavis.edu

CREATED JULY 2020
REVIEWED JUNE 2021