

INITIATE A SALINE LOCK

For use of this form see TC 8-800; the proponent agency is TRADOC.

TABLES: III

REFERENCES: STP 8-68W13-SM-TG, Task: 081-835-3025, Initiate a Saline Lock.

1. **Soldier** (*Last Name, First Name, MI*)

2. **Date** (YYYYMMDD)

CONDITIONS: Given an intravenous therapy trainer or a Soldier acting as a casualty in a simulated combat environment. You are not in a CBRN environment.
Establishment of appropriate intravenous access by the Soldier Medic could make the difference between a casualty surviving to the next level of care or dying because medications or fluids could not be delivered.

STANDARDS: Perform all measures IAW the standards of evaluation outlined in C168W144/1 Tactical Combat Casualty Care. You must score at least 70% (*12 of 17 steps*) and not miss any critical (*) elements on the skill sheet.

SAFETY:

- o Risk Assessment: Medium. All bodily fluids should be considered potentially infectious; always observe body substance isolation (*BSI*)
- o Precautions: Wear gloves and eye protection as a minimal standard of protection.
- o Environmental: None.

NOTE: Soldier Medics must be observed. (*Evaluator to Soldier Medic ratio is 1:6*).

NOTE: This invasive procedure has the risk of accidental needle stick; this risk is profoundly minimized by adequate direct supervision and ongoing instruction during the practical exercise. See DA Pam 40-11, *Preventive Medicine*.

TEST SCENARIO:

A casualty in your care has been undergoing intravenous fluid therapy. Due to a much improved mental status and a strong radial pulse, you determine that fluids are no longer required; however, you must maintain peripheral venous access. You must convert the IV line to a saline lock and hold fluids; you have been provided the necessary medical equipment.

3. Evaluator's Comments and After-Test Recommendations:

This form was prepared by U.S. Government employees for use in the 68W MOS. Although it contains, in part, copyright material from National Registry of Emergency Medical Technicians, Inc. (*NREMT*) skill sheets ©2000, ©2002, and ©2003, this form has neither been prepared nor approved by NREMT. Use is restricted to guidelines contained in the Preface to TC 8-800.

**INITIATE A SALINE LOCK
GRADING SHEET**

TASK	COMPLETED					
	1ST		2ND		3RD	
	P	F	P	F	P	F
4. EVALUATOR: This procedure is evaluated after DA Form 7595-18-R, Initiate an Intravenous Infusion, has been successfully performed.						
a. * Took/verbalized body substance isolation (BSI) precautions.	<input type="checkbox"/>					
b. Assembled the necessary equipment.	<input type="checkbox"/>					
c. Explained the procedure to the casualty (if conscious) and asked about known allergies.	<input type="checkbox"/>					
d. * Inspected existing IV line to ensure patency.	<input type="checkbox"/>					
e. Prepared and inspected equipment. EVALUATOR: Observe to ensure there is no violation of aseptic technique; if in doubt, discard the needle and/or saline lock connector, obtain new equipment, and repeat the step.	<input type="checkbox"/>					
f. Donned gloves.	<input type="checkbox"/>					
g. Closed the flow-regulator completely.	<input type="checkbox"/>					
h. Removed the IV tubing.	<input type="checkbox"/>					
i. Attached the saline lock connector to the catheter hub.	<input type="checkbox"/>					
j. Applied a transparent dressing, covering both the catheter and the body of the saline lock connector.	<input type="checkbox"/>					
k. * Flushed the saline lock connector with sterile saline. EVALUATOR: Observe to ensure there is no violation of aseptic technique by the Soldier Medic; if in doubt, discard the saline lock connector, obtain new equipment, and repeat the step. EVALUATOR: Administratively gain control of the needle and syringe unit and place it in a sharps container.	<input type="checkbox"/>					
l. Labeled a piece of tape with date/time initiated and their initials; secured the tape over the dressing.	<input type="checkbox"/>					
m. Monitored the casualty and continued to observe the venipuncture site for signs of inflammation.	<input type="checkbox"/>					
n. Removed their gloves and disposed of them appropriately.	<input type="checkbox"/>					
o. Documented the procedure on the appropriate medical form.	<input type="checkbox"/>					
p. * Did not violate aseptic technique.	<input type="checkbox"/>					
q. * Did not cause further injury to the casualty.	<input type="checkbox"/>					
* CRITICAL ELEMENTS						

**INITIATE A SALINE LOCK
EVALUATOR GUIDELINES AND INSTRUCTIONS**

Inform the Soldier Medic of the CONDITIONS and STANDARDS as stated on this form.
Provide an optional scenario, if appropriate. This scenario should reinforce the unique or particular needs of the unit.
Allow sufficient time for the Soldier Medic to extract information from the scenario.
Provide each evaluator with the grading sheet.
Ensure the Soldier Medic has all required materials.
Explain how the exercise is graded.

Resource Requirements:

Evaluator: Grading sheet and applicable scenario.

Soldier Medic: Applicable scenario, medical aid bag stocked with a basic load to include IV solution, administration set, needle and syringe, sterile saline solution, and saline lock connectors.

Additional Scoring Guidelines:

Inspected existing IV line to ensure patency.

- o Opened the flow-regulator clamp.
- o Dropped the solution container lower than the casualty's heart to observe for a backflash of blood into the IV tubing.
- o Rehung the solution container at least 2 feet above the level of the casualty's heart.
- o Adjusted the flow-regulator to a TKO (*KVO*) rate.

Prepared and inspected equipment.

- o Saline lock connector.
- o 18 gauge needle and syringe unit with 5 ml of sterile saline solution.
- o Opened the transparent (*Tegaderm*) dressing and placed it where it was readily accessible.

Removed the IV tubing.

- o Placed a finger (*nondominant hand*) over the vein at the catheter tip and tamponaded the vein preventing blood from flowing out the catheter.
- o Removed the IV adapter (*with dominant hand*) from the end of the catheter.

Flushed the saline lock connector with sterile saline.

- o Cleansed the medication port of the saline lock connector.
- o With the nondominant hand, grasped the saline lock connector and maintained control of it.
- o Inserted the pre-prepared 18 gauge needle and syringe unit; injected 5 ml of sterile saline into the saline lock connector; and removed the needle and syringe unit.