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Peripheral Intravenous Practice in Emergency Department Best Evidence vs. Reality

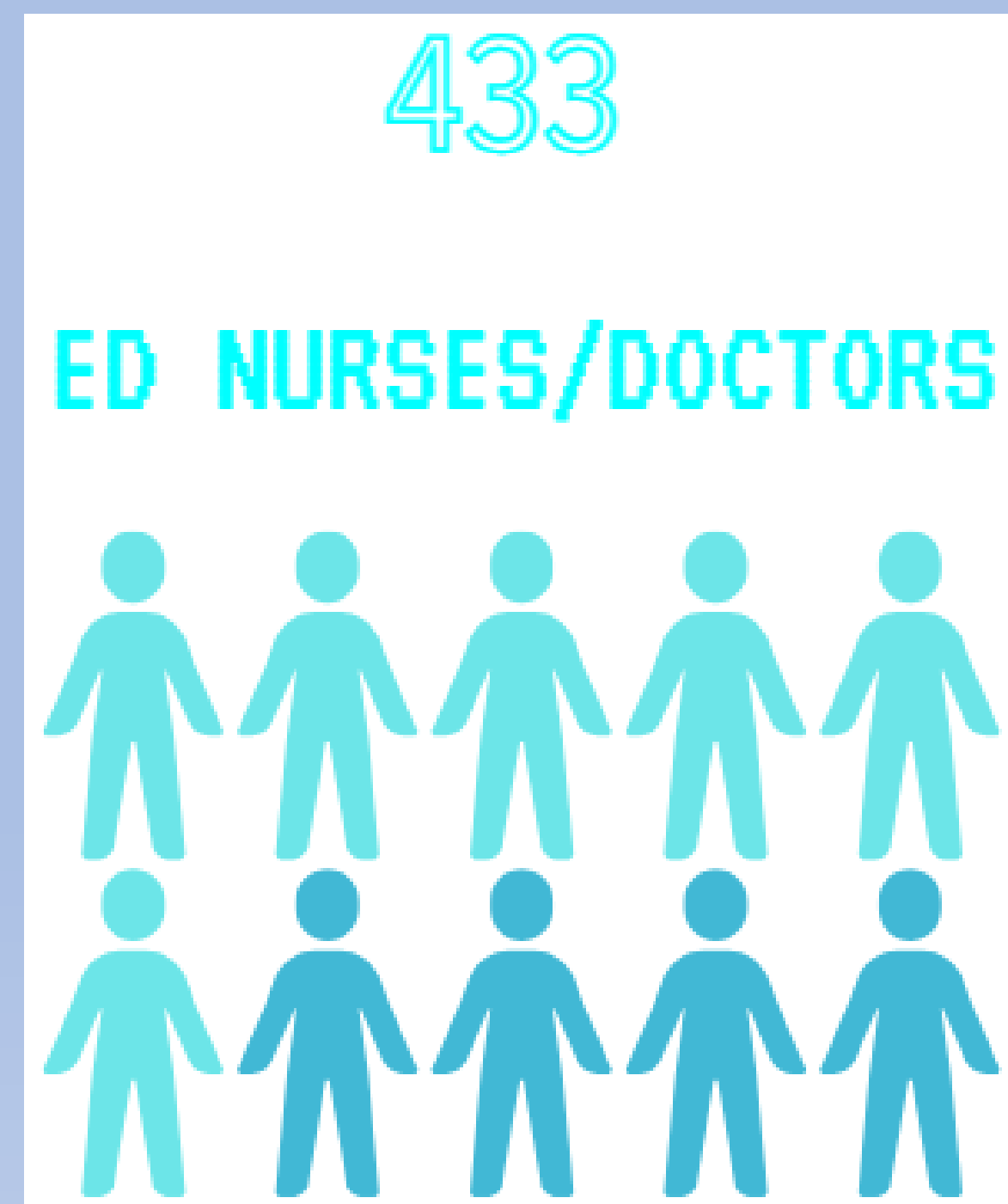
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Background: The first national Peripheral Intravenous Catheter (PIVC) Clinical Standard was launched in 2021 by the Australian Commission on Safety and Quality in Health Care to guide PIVC care. However, clinicians' knowledge, attitude and practice toward the Standard are unknown, especially in emergency department (ED) settings.

Aim: To assess ED clinicians' knowledge, attitude and adherence to the PIVC Clinical Care Standard.

Method: An online **national survey** was conducted in Australia in mid-2022. The **snowballing sampling** method was used. The survey included both 5-point Likert scales and multiple-choice questions.



Knowledge

Adequate knowledge

Half of the participants claimed that they were **unfamiliar** with the Standard.

Attitudes

Positive attitude apart from 2 areas:

- **Multiple insertion attempts** (23% disagree/strongly disagreed)
- **Ongoing PIVC competency monitoring** (32% disagree/strongly disagreed)

Practice

Practice (self-reported) was **not aligned** with the Standard:

- **Routine insertion of idle catheters** (55%)
- Using **antecubital fossa** as 1st insertion site (84%)
- **Insertion without confidence** (46%)
- **Lack of routine reviewing** of ongoing needs of PIVC (40%)



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Some recommendations of the PIVC Clinical Care Standard **may not be practical or acceptable** to ED clinicians.
Strategies are required to facilitate the implementation of the Clinical Care Standard into bedside practice.