



Study Specific Procedure			SSP No: 008 Version No: 2.0 Supersedes: 1.0 Effective Date:
Title: Cannulation and Cannula Care Procedure			
	NAME	SIGNATURE	DATE
PREPARER	Caroline Ogwang		
REVIEWING AUTHORITY	Shalton Mwaringa		
QUALITY ASSURANCE	Aisha Bwika		
APPROVING AUTHORITY	Caroline Ogwang		

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1.0. PURPOSE:

To outline the procedure of inserting a peripheral intravenous device and obtaining blood samples

2.0. RESPONSIBILITY:

Clinicians, nurses, and fieldworkers

3.0. DEFINITIONS/ABBREVIATIONS

3.1 ICH GCP: International Conference on Harmonisation Good Clinical Practice

3.2 KEMRI: Kenya Medical Research Institute

3.3 SSP: Study Specific Procedure

4.0 EQUIPMENT/ MATERIALS/ REAGENTS

4.1 Appropriate cannula

- i. Infant- size 24/22 G
- ii. Child size 22/ 20 G

4.2 Surgical spirit

4.3 Strapping (adhesive straps)

4.4 Cotton swabs

4.5 2 pair of clean gloves

4.6 Tourniquet

4.7 Scissors

4.8 Heparinised water for injection (0.1mls/500i.u heparin in 500mls sterile water/normal saline)

4.9 Blood sample bottles

4.10 Extension set with a “T”

4.11 Appropriate syringes

5.0 METHODOLOGY

a) Initial cannulation

1. Explain the procedure to the parent/guardian to ensure cooperation. Wash hands with soap and water and dry well.
2. Perform a thorough vascular access assessment. Identify a potential site to be used. Obtain assistance from other health care personnel for patient immobilization. Wear clean gloves.
3. Apply the tourniquet about 6-8 inches above the selected site to distend the veins. Clean the skin using aseptic technique with surgical spirit and allow it to dry. Grasp area below

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the proposed site, using thumb to firmly stabilize the vein and soft tissue. Let an assistant open the cannula package and pass to you.

4. To insert, place the bevel of the catheter in an upward position between thumb and index finger. Hold the catheter at 45° angle above the skin surface. Pierce the skin and underlying tissue to reach the vein. Lower the shaft of the needle until it is almost flat with the skin surface and move needle tip directly over vein. Enter the vein slowly; verify entry by flashback of blood. Remove the tourniquet. Advance the needle and catheter assembly approximately 3-5mm further to ensure entry of the catheter into the lumen of the vein. Slightly withdraw the needle and push the plastic catheter into the vein until the hub meets the skin. Apply digital pressure over catheter tip and withdraw the needle completely.
5. Using a syringe withdraw blood samples and distribute accordingly into the sample bottles. (*refer to blood collection SSP*)
6. If the cannula is satisfactorily inserted, tape it in place. Immobilize the extremity with a splint if needed. Observe the site for swelling, pain, leakage and bleeding. Attach the “T” extension pre-flushed with heparinised saline then further flush the whole set with 1ml of the same.
NB: When flushing lines, the smaller the syringe used, the greater the pressure exerted on the fluid in the line. Avoid using 1ml syringes to flush a blocked line as it may cause veins to rupture and fluid to infiltrate tissues.
7. Complete the procedure by labelling the dressing with date and intended use i.e. drug or blood sampling (for PK participants).

b) Cannula Care and subsequent sampling

1. Attach appropriate syringe at the end of the T extension (syringe A). Using syringe A, withdraw 1ml of blood (contains also heparinised saline/heparinised water for injection), place in a clean kidney dish.
2. Use a second syringe (syringe B), withdraw the required amount of blood. Hand syringe B to an assistant for distribution into the sampling tube(s).
3. Flush the line with 1ml heparinised water for injection/saline. Cork the line and ensure there is no leakage.
4. Discard syringe A as per IP guidelines.

Note:

Indwelling cannulas are a potential source of infection to the patient. A cannula MUST not stay for more than 3 days from initial placement date.

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6.0 APPENDICES: None

7.0 REFERENCES

- FLACSAM Protocol

8.0 DOCUMENT CHANGE HISTORY

Version Table:

Original: Title: Cannulation and cannula care SOP	Dated: 13th Jul 2017	SOP No.: 008	No. Pages: 4
Version: Title: Cannulation and cannula care Procedure	Dated:	SOP No.: 008	No. Pages: 5
Version: Title:	Dated:	SOP No.:	No. Pages:

SOP Review and Updating Logs

DATE	NAME OF REVIEWER	SIGNATURE	REASON FOR REVIEW
26/11/2019	Shalton Mwaringa		<ul style="list-style-type: none">• Periodic SOP review• Adopted the SSP template

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SSP AWARENESS LOG

I, the undersigned below, hereby confirm that I am aware that the accompanying SSP is in existence from the date stated herein and that I shall keep abreast with the current and subsequent SSP versions in fulfilment of Good Clinical Practice (GCP).

Number	Name	Signature	Date (dd/mmm/yyyy)
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STUDY: FLACSAM

SSP TITLE: Cannulation and Cannula care **SSP No:** 008 **Version:** 2.0 **dated:**

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