Competency Verification Record UVA Health

Ultrasound (US) Guided Peripheral Intravenous Catheter (PIV) Insertion

Employee Name:_____ Date:_____ Employee ID #:_____ Date:_____

Successful completion is documented on the Annual Competency Record (ACR) or Regional Competency Assessment (RCA) or Department Specific Competency (DSC) Form using the following competency statement(s):

Competency Statement(s): Demonstrate Ultrasound guided peripheral intravenous insertions with three (3) successful placements using the ultrasound machine

Evaluator(s): Individual(s) who are qualified to sign the competency statement on ACR or Competency Record Unit-based staff deemed competent in ultrasound guided PIV placement will train each staff member using the training guide below.

Method of validation (circle one):

DO	Direct Observation – Return demonstration or evidence of daily work.
Т	Test: Written or oral assessments, surveys or worksheets, passing grade on a CBL test.
S	Simulation
С	Case Study/ Scenarios: Create/share a story of a situation then ask questions that capture the nature of the competency that is being referenced.
D	Discussion: Identify questions related to a competency and ask orientee to provide an example of their real-life experiences.
R	Reflection: A debriefing of an actual event or a discussion of a hypothetical situation.
QI	Quality Improvement Monitoring: Audits or compliance checks on actual work or documentation to ensure the competency is completed.
N/A	If the specific product or process step is not used in the respective area or by the respective role, then this step is deemed N/A.

Note: This Competency Verification Record is **not** a required part of the permanent personnel record. This form is to be used as a guide for competency check off only; **the Annual Competency Record is used to document competency**. (If competency validation occurs away from the unit, this form can be completed by the validator; the signed form can then be presented to the unit NEC or manager as evidence of competency. The Annual Competency Record is then signed indicating that the competency was validated).

Instructions:

- Demonstrated/documented expertise inserting peripheral intravenous catheters
- Documented confirmation Workday Learning Digital Course or Classroom equivalent
- Successful completion of the Workday Learning Digital Course US PIV post-test

Demonstrated Skill Behaviors for Competency (Critical Behaviors in Bold)	Method of Validation	Evaluator's Initials for insertion # 1	Evaluator's Initials for insertion # 2	Evaluator's Initials for insertion # 3
• Verifies presence of Licensed Provider (LIP) order for insertion of peripheral intravenous (PIV) catheter in the Electronic Medical Record (EMR)	DO			
• Identifies patient utilizing two identifiers (e.g., Name and Medical Record Number)				
Assesses patient for need to utilize ultrasound (US) guidance to obtain intravenous access				
Demonstrated Skill	Method of Validation	Evaluator's Initials for	Evaluator's Initials for	Evaluator's Initials for

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Behaviors for Competency (Critical Behaviors in Bold)		insertion # 1	insertion # 2	insertion # 3
Reviews patient history for medication				
history and allergies				
• Gathers all supplies:				
 Tourniquet 				
○ Tape				
• Transparent PIV dressing (e.g.,				
Versaderm)				
\circ Chlorhexidine Prep (x2)				
• Selected appropriate IC catheter				
(catheter length ranging from				
1.00inch to 1.88inch)				
 Saline flush syringe 				
• IV extension set tubing (IV loop)				
• Needle-less IV connector				
• Sterile water based gel				
 Portable ultrasound machine 				
 Sterile gauzes 				
 Alcohol prep pads 				
 Sterile ultrasound probe cover 				
Explain procedure to patient and family				
• Performs hand hygiene and don non-sterile				
gloves				
Ensures ultrasound machine is cleaned				
prior to use:				
• Wipe off any remaining gel located				
on Vascular probe				
 Decontaminate probe using appropriate disinfectant wipes 				
Turns US machine unit ON				
Identify potential vessel				
 Place tourniquet on to extremity 				
• Set the depth of the US machine to				
its minimum setting				
 Scan for presence of vessel using 				
the vascular probe *				
• Remove tourniquet from extremity				
*HINT: Veins are compressible, with				
Color flow imaging showflash of color				
with squeezing forearm. Arteries are				
not compressible and have pulsatile				
flow on colorflow imaging.				
	Method of	Evaluator's	Evaluator's	Evaluator's
Demonstrated Skill	Validation	Initials for	Initials for	Initials for
Behaviors for Competency (Critical Behaviors in Bold)	, andation	insertion # 1	insertion # 2	insertion # 3
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 Preparation of site and US probe: Wipe off gel from site Re-apply tourniquet Prepare skin with Chlorhexidine swab, scrub for 30 seconds and allow to dry Cleanse probe with Chlorhexidine scrub and allow to dry Cleanse probe with Chlorhexidine scrub and allow to dry Apply sterile US gel to probe (Optional) Apply sterile US cover to the probe using two people (one person acceptable if two are not available) Apply sterile gel above selected 				
insertion site				
 Place catheter (Transverse view) Select smallest catheter gauge and shortest length that allows for half of the catheter to rest within the lumen of the vessel Hold US probe so orientation mark is consistent with orientation mark on screen Center the vessel in the center of the screen by sliding probe side to side Center the probe over the center of the vessel Ensure hand is stabilized and will remain so for the duration of procedure Place needle under skin (using center of probe as landmark) and direct slowlytoward vessel using appropriate angle When flash is obtained, lower angle of catheter and advance 1-2 mm further Advance catheter off needle Set aside ultrasound probe in secure position Connect IV extension set tubing primed with saline Remove tourniquet Discard needle in the biohazard sharps container Wipe gel from around catheter using sterile gauze 				
Demonstrated Skill Behaviors for Competency (Critical Behaviors in Bold)	Method of Validation	Evaluator's Initials for insertion # 1	Evaluator's Initials for insertion # 2	Evaluator's Initials for insertion # 3
Confirms blood return, easy flush and absence of swelling or tenderness at site				

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Places appropriate PIV dressing to secure site		
• Evaluates patient's response to procedure		
Disinfects US machine per hospital/manufacturer policy		
 Documents procedure utilizing the Avatar in the EMR Select "Ultrasound guidance used" 		
Discards supplies and performs hand hygiene		

Critical Elements:

References:

Competency Verified by:

		Date:
Evaluator's Name (printed)	Evaluator's signature	
		Date:
Evaluator's Name (printed)	Evaluator's signature	
		Date:
Evaluator's Name (printed)	Evaluator's signature	