



# NEWSLETTER

## MINSIG 2015/2016

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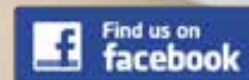
Zurina Mohamad Saleh

#### Member

Fatimah Alias

Hee Kim Lan

Jagjit Kaur



## COMMUNICATION AND RISING COST

MINSIG is extremely pleased with the overwhelming response from the nurses to attend the first workshop for the year 2015. To maintain quality, a cut-off point has been set by MINSIG for all workshops involving hands-on practice. Within the current resources we have at Wisma Jururawat, MINSIG is only able to handle 40 participants per workshop. To our surprise on the day of registration, 53 participants were waiting to register. MINSIG secretariat had informed the respective organisations that the quota for the August workshop had exceeded and to send their nurses instead for the November 2015 workshop. MINSIG has ample evidence to show that lack of communication was not the issue as prompt emails were sent in time. What we are not sure is how did the 13 nurses from other states who had travelled by air and road landed at our doors despite the given information! In the spirit of MNA, we tried our best to accommodate without turning anyone away. Definitely, we faced many hiccups to meet the needs of the participants.

In the post course evaluation, some of the participants commented on the lack of equipment and consumables. There were sufficient IV arms and cannulas for the practical sessions. We did run short of IV trolleys and IV dressings. We do admit that the use of transparent dressings were limited during the

practice sessions. The dressings are not cheap for training although it is cost-effective in the clinical setting. Nevertheless, what was important was for the participants to understand the principles on how it should be applied and why such a dressing is advocated in preventing intravenous cannula related complications. MINSIG has the support of corporate organisations, but just like all of us, they too face the impact of the falling Malaysian ringgit and the imposed GST. MINSIG had to purchase many of the items used during the training session and our aim has never been to generate money, but to impart knowledge and maintain standards. The registration fees are used to cover consumables, learning materials and meals. However, MINSIG is happy with the overall comments given by the participants of the August 2015 workshop. Every comment given is appreciated and it will inspire us to improve further.

MINSIG takes this opportunity to thank Puan Mariam Madhar Ali, President of Malaysian Nurses Association (MNA) for her continuous support of all our activities and sharing our anxieties on the rising cost of training items.

**Jeya Devi Coomarasamy**  
Chairman of MINSIG

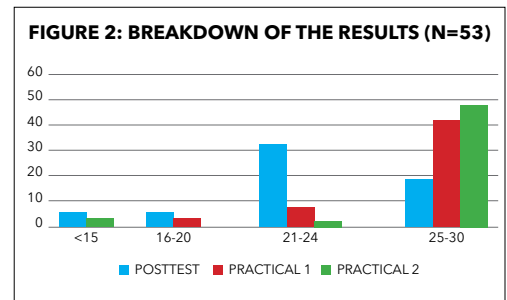
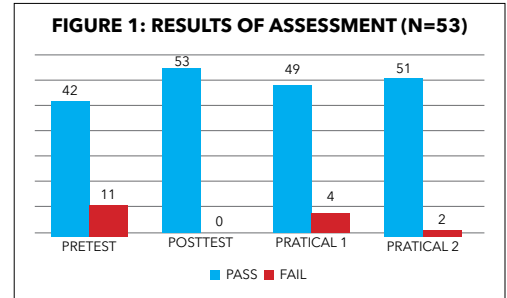
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## MINSIG WORKSHOP 1/2015

The first workshop on the "Insertion and Management of Peripheral Cannula for Adults" was held from 6-8 August 2015. A total number of 53 nurses from as far as Sarawak and Sabah participated in this workshop. This year the workshop has been extended from two days to two and half days to include the topic on documentation. Dr Christine Yeow, Head of Department, Jabatan Kesihatan Awam, Hospital Sungai Buloh joined the MINSIG faculty for the first time and graciously shared her perspective on staff and patient safety issues. She also shared several data on needle stick injuries.

A pre-test/post-test was given at the start and end of the programme to determine how much the participants had gained from the given theoretical input. This was followed by two practical examinations to test the skill learned. The results are as shown in Figure 1. There was 100% passes in the post-test. Whereas, in the practical examination a total of 6 participants failed. Figure 2 shows the final scores for the post-test and the practical examination. The passing mark is 15 out of 30 marks. Overall, the results were commendable. Nevertheless, only participants who had passed the practical were allowed to continue and complete the final part of the assessment. To get a certificate of accomplishment with a validity of two years, these participants are requested to cannulate 20 patients witnessed by competent medical professionals. The log sheet has to be send to the secretariat within the time frame given.



"We are here to learn!"



"Oh dear it is not what I had expected!"



"I have been doing it, but what is the answer!"



"Have I done it right, Prof?"



"Let me help you"



"That is good. She is documenting what she did"



"A selfie before we leave!"



"I hope I can remember the important steps"

*"Tell me and I forget. Teach me and I remember. Involve me and I learn." - Benjamin Franklin (1706-1790)*

# SHORT PERIPHERAL INTRAVENOUS CANNULA

## 1. INTRODUCTION

A short peripheral intravenous cannula (PIC) is a hollow tube that is used for accessing a vein. The tip of this tube terminates in a peripheral vein of an extremity. There are many brands available in the market with various safety engineered mechanisms. It is up to the user to determine which brand to purchase based on current evidences available. The safety of the health care professional and the patient are important determinants for decision-making.

## 2. INDICATIONS

Short PIC is recommended when infusion therapy is required for less than one week (Alexander et al., 2010).

## 3. CONTRAINDICATIONS

Short PIC is not recommended for

- continuous vesicant therapy
- pH solution or medication that is infused is less than 5 or greater than 9
- solutions with an osmolarity more than 600mOsm/L
- dextrose concentration which is above 10%

Such solutions can cause blistering and tissue necrosis if it leaks into the tissue. To prevent any untoward incidents, a central vascular access device is recommended instead of a short PIC (INS, 2011; Alexander et al., 2010).

## 4. TYPE OF CANNULA

The cannula can be made of different material. Studies are still being undertaken as some of these materials are known to cause thrombogenicity (Alexander et al. 2010). Fewer complications have been associated with Teflon or polyurethane cannulas compared to those made of polyvinyl chloride or polyethylene (Hindley, 2004). Silicone is considered to be least thrombogenic (INS, 2011).

Commonly used is the over-the needle cannula which is a soft plastic cannula with a rigid, plastic hub. Inside the cannula is a hollow metal stylet. The angled bevel protruding through the distal tip of the cannula enables puncturing of the skin, subcutaneous tissue and vessel wall. The stylet is removed immediately after insertion. Only the soft plastic cannula is left in place.

All cannulas have to be radiopaque to facilitate location of cannula emboli in the event of cannula shearing or fracture (Alexander et al. 2010). Ideally, a cannula should have a flashback chamber for visual indication to show successful insertion into the vein.

## 5. GAUGE AND LENGTH OF CANNULA

Cannulas are available in various gauges (16-24) and lengths (25-44mm). The gauge indicates the actual lumen size. When the number of the gauge is large, the lumen is smaller. The smallest gauge with the shortest length is used to minimize the risk of damage to the vessel intima and prevent complications such as phlebitis. There must be a good blood perfusion around the cannula. For most medical and surgical patients, a 20-24 gauge cannula is used (INS, 2011). In older adults 20-24 gauge cannulas are recommended. When large volume of fluid has to be infused over a very short period of time, a cannula with a largest gauge and shortest length that can accommodate the vein is recommended. Normally 14-16 gauge cannula is used (INS, 2011). An 18 gauge cannula is recommended for surgical patients and for rapid administration of blood.

## 6. CONCLUSIONS

The choice of cannula depends on the condition of patient, accessibility of the vein and duration of therapy. However, the patient has to be carefully observed for complications as a result of the device.

## 7. REFERENCES

- Alexander, M., Corrigan, A., Gorski, L., Hankins, J., & Perucca, R. (2010). *Infusion Nursing: An evidence-based approach*. St Louis: Saunders.
- Hindley, G. (2004). Infection control in peripheral cannula. *Nursing Standard*, 18(27), 37-40
- Infusion Nursing Society (INS) (2011). *Policies and procedures for Infusion Nursing*. (4th Ed.).

## V. I. P. Score (Visual Infusion Phlebitis Score)

VIP score should be evaluated during each shift and documented on the observation chart

<p><b>I. V. site appears healthy</b></p>	<p><b>0</b></p> <p><b>No signs of phlebitis</b> <input type="checkbox"/> OBSERVE CANNULA</p>
<p><i>One</i> of the following is evident: ● Slight pain near I.V. site or slight redness near I.V. site</p>	<p><b>1</b></p> <p><b>Possible first signs of phlebitis</b> <input type="checkbox"/> OBSERVE CANNULA</p>
<p><i>Two</i> of the following are evident: ● Pain near I.V. site ● Erythema ● Swelling</p>	<p><b>2</b></p> <p><b>Early stage of phlebitis</b> <input type="checkbox"/> RESITE CANNULA</p>
<p><i>ALL</i> of the following are evident: ● Pain along path of cannula ● Erythema ● Induration</p>	<p><b>3</b></p> <p><b>Medium stage of phlebitis</b> <input type="checkbox"/> RESITE CANNULA <input type="checkbox"/> CONSIDER TREATMENT</p>
<p><i>All</i> of the following are evident &amp; extensive: ● Pain along path of cannula ● Erythema ● Induration ● Palpable venous cord</p>	<p><b>4</b></p> <p><b>Advanced stage of phlebitis or start of thrombophlebitis</b> <input type="checkbox"/> RESITE CANNULA <input type="checkbox"/> CONSIDER TREATMENT</p>
<p><i>All</i> of the following are evident &amp; extensive: ● Pain along path of cannula ● Erythema ● Induration ● Palpable venous cord ● Pyrexia</p>	<p><b>5</b></p> <p><b>Advanced stage of thrombophlebitis</b> <input type="checkbox"/> INITIATE TREATMENT <input type="checkbox"/> RESITE CANNULA</p>

Developed by Andrew Jackson, Consultant Nurse Intravenous Therapy and Care, Rotherham General Hospitals, NHS Trust.



## WORKSHOP ON INSERTION AND MANAGEMENT OF PERIPHERAL INTRAVENOUS CANNULAE IN ADULTS

**DATE** : 19 - 21 November 2015

**TIME** : 0745 - 1630 (Day 1 & 2)  
0745 - 1245 (Day 3)

**VENUE** : Wisma Jururawat, Lot 14A, Lorong Utara A,  
Off Jln Utara, 46200 Petaling Jaya, Selangor.

ORGANISED BY:



### ABOUT THE COURSE

Cannulation is an invasive procedure that is commonly performed in hospital and can be carried out by a range of trained health-care professionals.

This two and half day workshop is designed to provide the participants with the skills and knowledge to perform peripheral intravenous cannulation and its management safely and competently in the clinical area.

### TARGET PARTICIPANTS

- Registered Nurses (Staff Nurses, Ward Sisters, Nurse Managers, Nurse Educators)
- Student Nurses (final year)
- Registered Assistant Medical Officers
- Other interested health care professionals who insert and manage patients with peripheral cannula

### CONTINUOUS PROFESSIONAL DEVELOPMENT (CPD) POINTS

CPD points will be awarded by the Nursing Division, Ministry of Health Malaysia to all participants who have completed the full duration of the programme.

### CERTIFICATE OF ACCOMPLISHMENT

An official Certificate of Accomplishment will be issued to all registered participants who have completed the programme and have fulfilled all required assessments during and after the training workshop. The certificate is only valid for two (2) years and renewable following a refresher course.

### REGISTRATION FEES ENTITLEMENT

- Admission to Course Programme
- Course materials
- Meals
- Certificate of Attendance
- Certificate of Accomplishment (upon fulfilment of all assessments required during and after the training workshop)

### CLOSING DATES FOR REGISTRATION

Closing dates for registration are subject to availability of places or one (1) week before the training programme, whichever is earlier. Due to limited places, early registration is highly recommended.

### HOTEL ACCOMMODATION

Participants are advised to make their own arrangement as accommodation is not provided by organisers. The nearest hotel within walking distance is:

Crystal Crown Hotel, Petaling Jaya  
12, Lorong Utara A, Off Jalan Utara  
46200 Petaling Jaya, Selangor  
Tel: 03-7958 4422 Fax : 03-7958 7223

### LIABILITY

The Organisers shall not be held liable for personal accidents or losses or damage to private property of registered participants.

### DISCLAIMER

Whilst every attempt will be made to ensure all features of the training programme mentioned in this announcement will take place as scheduled, the Organisers reserve the right to make last minute changes should the need arise.

For more information, please contact the MINSIG Secretariat:

### Malaysian Infusion Nurse Special Interest Group (MINSIG)

Malaysian Nurses Association  
Wisma Jururawat, Lot 14A, Lorong Utara A,  
Off Jalan Utara, 46200 Petaling Jaya, Selangor.  
Tel: + 603 - 7960 5971  
Fax: + 603 - 7960 8973  
Email: minsig2015@gmail.com

## DAY 1

0745 - 0900	Registration
0900 - 0915	Introduction to Workshop
0915 - 0945	Pre-Course Assessment
0945 - 1015	Overview of best practices in insertion and management of peripheral cannula in adults
1015 - 1045	Preparation for cannulation - I <ul style="list-style-type: none"><li><input checked="" type="checkbox"/> Preparation of patient and equipment</li><li><input checked="" type="checkbox"/> Vascular assessment</li><li><input type="checkbox"/> Site selection</li></ul>

### 1045 - 1115 Morning Tea

1115 - 1145	Preparation for cannulation - II <ul style="list-style-type: none"><li><input checked="" type="checkbox"/> Site preparation</li><li><input checked="" type="checkbox"/> Selection of cannula</li></ul>
1145 - 1215	Preparation for cannulation - III <ul style="list-style-type: none"><li><input checked="" type="checkbox"/> Selection of dressing</li></ul>
1215 - 1300	Procedure for insertion of a peripheral intravenous cannula

### 1300 - 1400 Lunch

1400 - 1430	Legal and Ethical Issues
1430 - 1615	Hands on Practical Session

### 1615 Afternoon Tea & End of Day 1

## DAY 2

0745 - 0900	Registration
0900 - 0945	Staff and Patient Safety Issues
0945 - 1015	Post Cannulation Management <ul style="list-style-type: none"><li>• Flush</li><li>• Administration sets</li><li>• Site rotation</li><li>• Removal of cannula</li></ul>

### 1015 - 1045 Morning Tea

1045 - 1115	Documentation
1115 - 1200	Hands on Practical Session : Documentation
1200 - 1245	Complications of IV Cannulation
1245 - 1315	Discussion

### 1315 - 1400 Lunch

1400 - 1545	Hands on Practical Session
1545 - 1615	Post-Course Assessment I (Theory)

### 1615 Afternoon Tea & End of Day 2

## DAY 3

0745 - 0900	Registration
0900 - 1030	Post-Course Assessment 2: Objective Structured Clinical Examination

### 1030 - 1100 Morning Tea

1100 - 1230	Post-Course Assessment 2 : Objective Structured Clinical Examination
1200 - 1245	Feedback Session

### 1245 - 1315 Lunch & End of Day 3

# REGISTRATION FORM AND PAYMENT

Ms/Mr \_\_\_\_\_

*Name to be appeared on Certificate (write in Block Capitals)*

\_\_\_\_\_  
MNA Membership No (Compulsory)

\_\_\_\_\_  
Expired date

\_\_\_\_\_  
Designation

\_\_\_\_\_  
Department

\_\_\_\_\_  
Organisation

\_\_\_\_\_  
Mobile No

\_\_\_\_\_  
Fax Number

Valid e-mail \_\_\_\_\_

Meal Preference:     Vegetarian             Non-Vegetarian

**REGISTRATION FEES:**    MNA Member : RM300.00            Non MNA Member : RM500.00

## PAYMENT METHOD

By Cheque/ Money Order/ Postal Order/Local Purchase Order (enclosed ) \_\_\_\_\_

Date of payment: \_\_\_\_\_

Payable to:

Seminar Persatuan Jururawat Malaysia

Account No    : 8600318539

Bank Name     : CIMB

## Note:

- Please provide copy of the Cheque/ Money Order/ Postal Order to Secretariat.
- All payment must be paid before commencement of the workshop , however undertaking letter or copy of Local Purchase Order is acceptable
- We do not accept any walk in participant

Please register me for the course held on:    • 19 - 21 November 2015

You will not be registered for this workshop unless payment accompanies your application.

## CANCELLATION POLICY

- Cancellations must be notified in writing (e-mail is sufficient) to the MINSIG Secretariat ten (10) days prior to the Workshop.
- 50% of the registration fees will be charged on cancellation after the stated 10 days to cover administration costs. As an alternative to cancellation, your registration may be transferred to another person without incurring any cost penalty.
- 100% of the registration fee will be charged for not showing up without prior notice to MINSIG Secretariat.

Please email / fax the complete form with proof of payment to:

### Malaysian Infusion Nurse Special Interest Group

Malaysian Nurses Association

Wisma Jururawat, Lot 14A, Lorong Utara A,

Off Jln Utara, 46200 Petaling Jaya, Selangor.

Tel : + 603 - 7960 5971

Fax : + 603 -7960 8973

Email: minsig2015@gmail.com

## FOR SECRETARIAT USE ONLY

Receipt No            : \_\_\_\_\_

Confirmation Sent on    : \_\_\_\_\_

REGISTRATION NO:

# SEMINAR ON NURSES ROLE AND PREPAREDNESS DURING DISASTERS



DATE : 5TH SEPTEMBER 2015 (SATURDAY)  
TIME : 0845—1600  
VENUE : WISMA JURURAWAT, LOT 14A, LORONG UTARA A. OFF JALAN UTARA, 46200 PETALING JAYA, SELANGOR.  
REGISTRATION FEES : MNA MEMBERS: RM 100  
NON- MNA MEMBERS: RM 150  
PAYABLE TO : SEMINAR PERSATUAN JURURAWAT MALAYSIA  
ACCOUNT NO: 8600318539 (CIMB BANK)

This seminar is organized by Malaysian Infusion Nurses Special Interest Group (MINSIG) with the support of Journal Club and the mother body, Malaysian Nurses Association (MNA) to provide insight and in-depth information on disaster preparedness. Disaster can be caused by nature or by man. Every nurse must be adequately prepared in the four phases of the disaster management cycle to be able to respond to serious events that can threaten the life of others

The aim of the seminar is towards creating an awareness amongst the nurses of the importance of being well-prepared to face any emergency situations. Speakers who are well-versed in managing disasters will discuss best practices and share effective resources that are needed in times of a disaster.

**REGISTER ONLINE TODAY AT: [minsig2015@gmail.com](mailto:minsig2015@gmail.com)**

Cancellation Policy: Written cancellation of a registration received in the Malaysian Nurses Association (MNA) office at least 10 days prior to the program will be refunded in full. Otherwise, the fee will be retained for administrative costs. If you require further information or have questions, contact Jeya (016-3055514); Zurina (012-6352049); Fatimah (016-6225474). Names of participants and payments must be submitted **before 3 September 2015.**

