

INTRAOSESIOUS INFUSION

ADMINISTRATIVE 2.4

I. INTRODUCTION

Use of intraosseous infusion requires medical direction. It is at the discretion of the medical direction authority and must be appropriately documented when used.

II. INDICATIONS

When treating a patient that is hemodynamically unstable and a route for fluids and/or medications is needed.

III. CONTRAINDICATIONS

Fractures in the extremity to be used.

Infection or burns at the site to be used. (Must be weighed against the potential benefits.)

IV. PROCEDURE

Insert IO according to manufacturer's recommendation for the specific device.

V. MEDICATIONS PERMITTED VIA INTRAOSESIOUS INFUSION

All medication and solutions **with the exception of hypertonic saline** may be infused through an IO device.

VI. SPECIAL CONSIDERATIONS

A. In shock situations, only one intraosseous infusion is necessary.

B. If additional site(s) attempted, inform the physician on arrival at the hospital.

C. Be aware of complications which may occur such as:

1. Puncture through posterior cortex
2. Incomplete penetration of the anterior cortex
3. Infection
4. Fluid leaking from puncture site
5. Fat emboli
6. Compartment Syndrome with use of pressure bag (following infiltration)

D. With some IO devices, a tool is needed to remove the IO catheter. Ensure that the removal device is left with the facility if this type of IO device was used.

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