

# PIV315: Complications with Vascular Access Devices – Part 1

Worksheet - Practice Activities

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Completion education. No accredited nursing contact hours awarded.

Name: \_\_\_\_\_

Date: \_\_\_\_\_

**How to use this worksheet.** These are hands-on practice activities, not the post-test. Work through them using the study guide: define the terms you'll use at the bedside, work the case, and self-rate the actual steps of the skill.

## Part 1 — Key Terms

Fill in a plain-language definition for each term the way you would explain it to a new colleague.

| Term                      | Your definition |
|---------------------------|-----------------|
| Chemical phlebitis        |                 |
| Bacterial phlebitis       |                 |
| Chemical Cause            |                 |
| Onset: Within hours Signs |                 |
| Prevention                |                 |
| Bacterial Cause           |                 |
| Onset                     |                 |
| Signs                     |                 |

## Part 2 — Applied Case Work

**Scenario.** You are caring for a patient whose plan of care directly involves **Complications with Vascular Access Devices – Part 1**. Working from this module's content, document (a) your initial assessment, (b) the technique or decision you would choose and the rationale, (c) the complications you are watching for, and (d) the key documentation points. Reference the lesson sections that informed your reasoning.

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## Part 3 — Skills & Decision Self-Check

For each action from this module, mark how confident you are. Anything you mark “Review” is where to focus before the post-test and at the bedside.

| # | Key action / decision                                                                                                                                | Got it | Review |
|---|------------------------------------------------------------------------------------------------------------------------------------------------------|--------|--------|
| 1 | Regular assessment: Identify early signs before progression to severe grades.                                                                        |        |        |
| 2 | Proper insertion: Minimize mechanical trauma; use ultrasound guidance where indicated.                                                               |        |        |
| 3 | Appropriate vessel and catheter selection: Match device to vessel and therapy; reduce chemical phlebitis by choosing a suitable route for irritants. |        |        |
| 4 | Aseptic technique: Meticulous asepsis at insertion and every hub access, with disinfection of the connector.                                         |        |        |
| 5 | Stabilization: Secure the catheter to prevent movement and dislodgement.                                                                             |        |        |
| 6 | Regular flushing: Maintain patency and prevent occlusion on a defined schedule.                                                                      |        |        |
| 7 | Prompt removal: Remove unnecessary lines immediately to shorten the window of risk.                                                                  |        |        |
| 8 | Patient education: Teach patients to report pain, swelling, and warmth to enable early intervention.                                                 |        |        |

## Part 4 — Notes & Questions for Your Educator

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