

> IV push GAT—continued from page 5

**Table 1.** Low- and High-Scoring GAT Items in Each Section

Low-Scoring GAT Item	Percent (%)				High-Scoring GAT Item	Percent (%)			
	Mean	Implementation				Mean	Implementation		
		None	Partial	Full			None	Partial	Full
<b>ACQUISITION AND DISTRIBUTION OF ADULT IV PUSH MEDICATIONS</b>									
Adult IV push medications are dispensed in a ready-to-administer form (to minimize the need for manipulation and product re-labeling outside of the pharmacy sterile compounding area).	61%	16%	62%	22%	Only commercially available or pharmacy-prepared prefilled syringes of an appropriate IV solution are used to flush and lock vascular access devices.	94%	0%	14%	86%
<b>ASEPTIC TECHNIQUE</b>									
The medication access diaphragm on a vial or neck of an ampule is disinfected with facility-defined disinfectant solution and allowed to air dry prior to accessing an IV push medication or solution.	81%	6%	34%	60%	A new syringe (and needle as necessary) is used for every IV push injection.	95%	1%	10%	89%
<b>PRACTITIONER PREPARATION</b>									
IV push medications are NOT diluted or reconstituted by drawing up the contents into a commercially available, prefilled flush syringe of 0.9% sodium chloride.	58%	30%	39%	31%	IV push medications are withdrawn from glass ampules using a filter needle or straw, unless specific drugs preclude their use.	93%	2%	14%	84%
<b>LABELING</b>									
Blank or printed, ready-to-apply labels, including sterilized labels, are provided to clinical units where needed, to support safe labeling practices.	71%	18%	33%	49%	Empty syringes are never pre-labeled in anticipation of use.	87%	7%	16%	77%
<b>PRACTITIONER ADMINISTRATION</b>									
Barcode scanning or similar technology is used immediately prior to the administration of IV push <i>flush solutions</i> to confirm identification of both the patient and the solution, unless its use would result in a clinically significant delay and potential patient harm.	57%	31%	38%	31%	An appropriate, facility-defined, clinical and vascular access site assessment of the patient is performed <i>prior</i> to the administration of IV push medications.	88%	5%	17%	78%
<b>DRUG INFORMATION RESOURCES</b>									
Internal facility policies define IV bolus and IV push terms.	50%	45%	18%	37%	Facility-approved IV push medication resources are free of error-prone abbreviations and dose expressions.	91%	5%	11%	84%
<b>COMPETENCY ASSESSMENT</b>									
Competency assessments for IV push medication preparation and administration are standardized across disciplines within the facility and validated <i>on an ongoing basis</i> .	44%	49%	28%	23%	The facility has clearly defined which practitioners have privileges to perform IV push medication <i>administration</i> .	87%	7%	16%	77%
<b>ERROR REPORTING</b>									
Adverse events, close calls, and hazardous conditions associated with IV push medications are reported in confidence to external safety organizations such as ISMP for shared learning.	60%	31%	29%	40%	Adverse events, close calls, and hazardous conditions associated with IV push medications are reported internally within the facility.	88%	2%	26%	72%