**INTRANOVIOUS THERAPY**

Candidate: 
Date: 
Examiner: 
Signature: 

**Actual Time Started:** ______  **6-minute time limit**

<table>
<thead>
<tr>
<th>Checks selected IV fluid for:</th>
<th>Possible Points</th>
<th>Points Awarded</th>
</tr>
</thead>
<tbody>
<tr>
<td>- Proper fluid (1 point)</td>
<td></td>
<td>3</td>
</tr>
<tr>
<td>- Clarity (1 point)</td>
<td></td>
<td></td>
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<tr>
<td>- Expiration date (1 point)</td>
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</table>

Selects appropriate catheter 
Selects proper administration set 
Connects IV tubing to the IV bag 
Prepares administration set [fills drip chamber and flushes tubing] 
Cuts or tears tape [at any time before venipuncture] 
Takes or verbalizes appropriate PPE precautions [prior to venipuncture] 
Applies tourniquet 
Palpates suitable vein 
Cleanses site appropriately 
PERFORMS VENIPUNCTURE 
- Inserts stylette (1 point) 
- Notes or verbalizes flashback (1 point) 
- Occludes vein proximal to catheter (1 point) 
- Removes stylette (1 point) 
- Connects IV tubing to catheter (1 point) 

Disposes/verbalizes proper disposal of needle in proper container 
Releases tourniquet 
Runs IV for a brief period to assure patent line 
Secures catheter [tapes securely or verbalizes] 
Adjusts flow rate as appropriate

**Actual Time Ended:** ______  **TOTAL 22**

**CRITICAL CRITERIA**

___ Fails to establish a patent IV within three attempts
___ Uses or orders a harmful intervention
___ Exhibits unprofessional behavior

*You must factually document your rationale for checking any of the above critical criteria on the reverse side of this form.*