



Start of Care, Pharmacy Orders and Resources

2023

Learning Goals

By the end of this module, nurse learners will be able to:

Apply knowledge of home infusion therapy to daily nursing practice.

- Identify appropriate NurseLink resources (nurse education, patient education, annual updates, infusion and enteral videos, infusion and enteral teaching guides, pump administration brochure, FAQs, administration of emergency medications video, policies and procedures), for home infusion patients to promote effective learning to safely administer home infusion therapy.
- Recognize start of care responsibilities.
- Identify the components of a delivery slip, patient teaching guide, drug information sheet, product label, and supplemental product label.
- Educate patients effectively.
- Educate patients on temperature of medications for infusion.
- Apply best practice in all modes of administration when teaching and caring for home infusion patients.

Access to Nurse Link



To login, follow the link below and click “*Login to Nurse Link.*”

<https://carepathrxllc.com/nurselink-welcome/>

Password: email nursingsupport@homeinfusion.com

Be sure to bookmark this URL and save your password for future use.

NL Patient Site:

<https://carepathrxllc.com/nurselink-patient/>

Patient
teaching
Videos

Patient
Written
Instructions

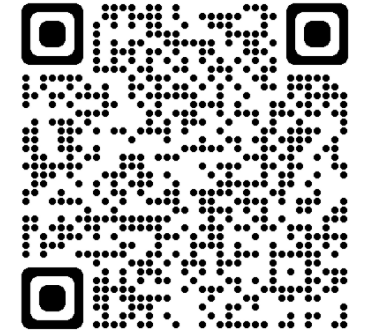
Nursing
P & P

Links to RN
virtual
training

Nurse
Videos

Home
Infusion
Society links

CarepathRX
in the News



Nurse Link

BY CAREPATHRX

As your partner in care, CarepathRx is committed to ensuring unmatched clinical expertise for home infusion and enteral nutrition care. NurseLink equips our home health nursing partners with the education, policies, and resources needed to provide expert patient care in the home setting. Once you become a CarepathRx partner, you will have access to dozens of home infusion policies and procedures by therapy type, continuing education and therapy-specific trainings, and more.

If you are a current partner, please log into NurseLink here with your password. If you would like more information on how CarepathRx is revolutionizing pharmacy care, please contact nursingsupport@homeinfusion.com.

Click to email
Clinical
Nursing Team

LOGIN TO NURSELINK

Click to
access
NurseLink
Resources

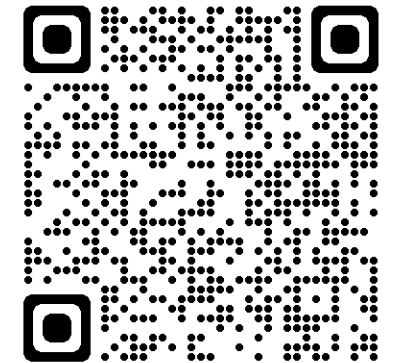
Health System Solutions >

ProCure by CarepathRx

Enter Password

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Online Resources

[Nurselink Welcome -
CarepathRx
\(carepathrxllc.com\)](#)

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NURSE EDUCATION



PATIENT EDUCATION



POLICIES & PROCEDURES



NEWS

NurseLink: Nurse Education

- Annual Update: Home Infusion Nursing Manual
- Pump Brochure: Image and explanation of all pumps
- Education Videos: Patient step-by-step videos and simple nurse instructional videos. Enteral, Infusion and Virtual Education Videos (Enteral Therapy, Specialty Biologics, HIT Basics and TPN)
- Web-Based Training: Virtual training sessions
- Infusion Nurse Resources: List of links to Home Infusion organizations

[Nurse Education - CarepathRx \(carepathrxllc.com\)](http://carepathrxllc.com)



NURSE EDUCATION

— NURSE EDUCATION

ANNUAL UPDATE

ADMINISTRATION PUMP BROCHURE

WEB-BASED TRAINING

EDUCATION VIDEOS

INFUSION NURSE RESOURCES

+

INFUSION NURSE RESOURCES

—

- [Association for Vascular Access \(AVA\)](#)
- [Immunoglobulin National Society \(IgNS\)](#)
- [Infusion Nurses Society \(INS\)](#)
- [LITEVAN: League of Intravenous Therapy Education Vascular Access Network](#)
- [National Home Infusion Association \(NHIA\)](#)
- [The Oley Foundation](#)

Website Videos

Enteral Teaching Videos | Infusion Teaching Videos

Manufacture Videos:

- Kangaroo Joey Pump
- Infinity Pump
- EntraFlo Pump

Carepathrx Videos:

- Gravity Feed
- Bolus Feed
- Solis Pump
- Sapphire Pump
- Freedom 60 Pump
- Elastomeric
- IV Push
- Flushing Your IV Catheter
- TPN Administration
- Gravity Administration
- Mini-Bag Plus by gravity
- Vial Mate by gravity

Note: All patients should watch YouTube video: "[Flushing your IV Catheter at Home](#)"

Enteral Teaching Videos

Kangaroo™ Joey Pump Manufacturer Videos



Using the History feature of the Kangaroo™ Joey Enteral Feeding Pump



Re-priming the pump set for the Kangaroo™ Joey Enteral Feeding Pump



Using the Flush Now feature of the Kangaroo™ Joey Enteral Feeding Pump



Using the Keep Tube Open (KTO) feature of the Kangaroo™ Joey Enteral Feeding Pump

Infinity® Pump Manufacturer Videos



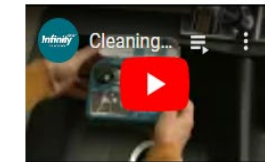
Key Features of the Infinity Enteral Feeding Pump



Operating the Infinity Enteral Feeding Pump



Infinity Enteral Feeding Pump Administration Set



Cleaning and Maintaining the Infinity Enteral Feeding Pump

EntraFlo® Manufacturer Pump Videos



EntraFlo: Pump Operations



EntraFlo: Cleaning the Pump



EntraFlo: Pump Features



EntraFlo: Open System Feeding

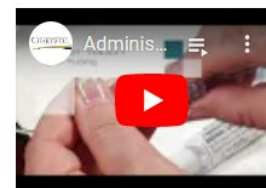
Infusion Teaching Videos



Administering Your IV Push Medication via Prefilled Syringe at Home



Flushing Your IV Catheter at Home



Administering Medication via Gravity at Home

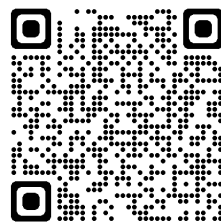


Administering Medication via Elastomeric Easy Pump

Click to share video or copy link



[Training Registration - CarepathRx \(carepathrxllc.com\)](https://carepathrxllc.com)



— TRAINING REGISTRATION

CarepathRx is currently scheduling virtual, in-person or hybrid annual competencies for 2022-2023. We also offer therapy-specific training sessions, new home infusion nurse training, and much more. Browse the sessions below and register to attend a virtual Zoom Session via the links.

Contact CarepathRx's Christie Fisher, National Director, Nursing at christina.fisher@carepathrxllc.com to schedule an in-person session at your office or agency.

[CONTACT US](#)

Click selected training date/time to access Zoom Registration page

HIT Basics for Non-Nurses – 60 Mins.

Attendees: Pharmacists, pharmacy support staff, interns, reimbursement, intake, billing, nurse schedulers, etc.

Description: Providing an overview of Home Infusion Therapy (HIT) and Enteral Therapy, types of IV lines, supply needs, and modes of administration for both enteral and HIT.

- [JANUARY 12 - 1:30 PM >](#)
- [FEBRUARY 9 - 1 PM >](#)
- [MARCH 9 - 1 PM >](#)

Specialty Biological Infusions (RNs) – 60 Mins.

Attendees: Nurses and nurse schedulers

- [JANUARY 26 - 1 PM >](#)
- [FEBRUARY 23 - 1 PM >](#)

Specialty Biological Infusions (RNs) – 60 Mins

TPN in the Home (RNs) – 45 Mins

Immunoglobulin: IVIG/SCIG (RNs) – 60 Mins.

Enteral Therapy (RD, RNs, RPH, CSS & Support Staff) – 30 Mins.

IV Modes of Administration (RNs, RPH, and Support Staff) – 60 Mins.

Vascular Access Device Management – 60 Mins.

SOC Responsibilities, Pharmacy Orders & Resources (RNs) – 60 Mins.

Chemo Takedown – 60 Mins.

PCA – 45 Mins.



Elastomeric Device (Easy Pump)

- Non-electronic pump that allows patient to remain ambulatory during infusions.
- Rate of infusion is determined by the device selected.
 - Some restrictions due to volume and rate of infusion.
- Bulb of medication slowly deflates as it infuses the medication and is typically placed in a pouch, allowing the patient more mobility during infusions.
- Easier to use for patients with dexterity issues.
- Primarily used for antibiotics:
 - Cephalosporins
 - Cipro
 - Invanz
 - Meropenem
 - Mycamine
 - Oxacillin – continuous and scheduled
 - Zosyn – continuous and scheduled



Joey Enteral Pump

- Infuses tube feedings in "continuous", "intermittent", and "feed & flush" modes.
- Formula and pump are typically placed in a backpack or pouch, allowing the patient more mobility during infusions.
 - Pole mounted pump available as indicated.

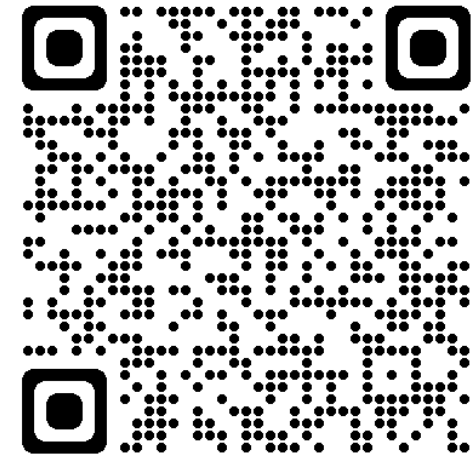


Infinity Enteral Pump

- Infuses tube feedings in continuous and intermittent modes.
- Formula and pump are typically placed in a backpack or pouch, allowing the patient more mobility during infusions.
 - Pole mounted pump available as indicated.
- Lighter weight than the Joey Pump.

ADMINISTRATION PUMP BROCHURE

- Pump Brochure: Image and explanation of all pumps
- [CarepathRx Administration Pumps Overview \(flippingbook.com\)](http://flippingbook.com)





<https://carepathrxllc.com/nurselink-patient/>



PATIENT EDUCATION

— PATIENT EDUCATION

NurseLink aims to not only provide agency education and training, but also to help further caregiver and patient education throughout their time on service with you. We know that the more comfortable your patients are with their therapy and administration, the better the therapy outcome.

INFUSION VIDEOS

INFUSION TEACHING GUIDES

ENTERAL VIDEOS

ENTERAL TEACHING GUIDES

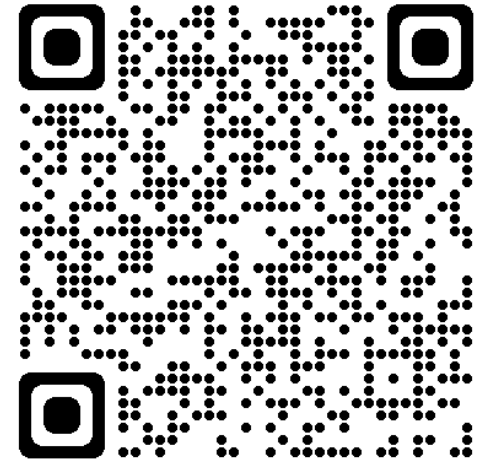
PHARMACIST FAQs



NURSE FAQs



EMERGENCY MEDICATIONS



Patient Teaching Guides

Click on a therapy button to expand/collapse the teaching guides for that therapy.

Antibiotic

CADD Prizm Pump

- CADD Prizm Battery Change Procedure
- CADD Prizm Battery Change Procedure (Español)
- CADD Prizm Power Pack Instruction for Usage

CADD Prizm Pump

CADD Prizm Pump

CADD Prizm Pump

Pole Mounted

Pole Mounted

Pole Mounted

Pole Mounted

Partial Dose I

Partial Dose I

Continuous S

Continuous S

CADD Solis Pump

CADD Solis A

CADD Solis A

Cadd Solis Pu

Cadd Solis Pu

CADD Solis P

CADD Solis P

Pole Mounted

Pole Mounted

Pole Mounted

Pole Mounted

Cadd Solis Ad

Cadd Solis Ad

Elastomeric

Administerin

Administerin

Freedom 60 Pum

PROCEDURE FOR INFUSION AND DAILY BAG WITH TUBING CHANGE:

1. Clean work area. Wash hands thoroughly. Gather supplies
2. Prepare your prefilled syringes for flushing your IV Catheter as instructed by your nurse.
3. Remove CADD tubing from package. Remove the blue clip from the top of the cassette by pulling up on the blue clip. This will prevent unintended gravity flow.
4. Remove protective tab from entry port of medication bag.
5. Remove the cover from the spike on tubing and insert spike into medication bag using a pushing- twisting motion. **DO NOT TOUCH SPIKE.**
6. **FOR INITIAL INFUSION ONLY:** Press the Power button on the right side of pump. Pump will make a series of beeps. Main screen will appear with pump mode showing and **"READY TO BEGIN"** in center of screen.
7. Open cassette latch lever 90 degrees and attach new tubing to pump (hook hinged end first). Push up on the cassette until it firmly clicks into place OR place the pump upright on a firm, flat surface and then press down on the latch side of the pump until the cassette clicks into place. Close Latch.
***NOTE:** Do not force latch. If you are unable to latch the cassette with minimal to no resistance, the cassette is not in the proper latching position. Unlatch the cassette and repeat the process. Top of screen will flash "High Volume or Standard Administration Set Latched".
8. Check the pump screen; if **RESET RESERVIOR VOLUME TO _____ ? ML** appears, press **"YES"** on keypad. *****This question will not appear during initial infusion****

Patient Step-by-Step Teaching Guides

[Nurselink Patient - CarepathRx \(carepathrxllc.com\)](https://www.carepathrxllc.com)



Delivered to patient with 1st delivery.



Detailed instruction on how to administer home IV and enteral therapies.



Infusion Teaching Guides [Patient Infusion Guides - CarepathRx \(carepathrxllc.com\)](https://www.carepathrxllc.com)



Enteral Teaching Guides [Patient Enteral Guides - CarepathRx \(carepathrxllc.com\)](https://www.carepathrxllc.com)



PATIENT EDUCATION

CADD Solis Administration Procedure: Bag or Cassette Change in PCA Mode

Properly administering your medication at home is important to your safety. In the event of an emergency, call 911.

SUPPLIES:

- Cassette (with tubing attached) **OR**
- CADD tubing and medication bag (CADD tubing)
- Alcohol or antiseptic wipes
- 4 AA batteries for emergency backup
- Rechargeable battery/ A/C adapter
- CADD Solis key
- (2) Sodium Chloride (Saline) prefilled syringes
- (1) Heparin prefilled syringe

SASH FLUSH PROCEDURE:

- S** Saline ___ ml
- A** Administer medication as instructed by your nurse
- S** Saline ___ ml
- H** Heparin ___ ml (if required)

PROCEDURE:

1. Gather supplies. Clean work area. Wash hands thoroughly for at least 20 seconds.
2. Check medication label for name, drug, frequency, and expiration. Inspect the medication bag or cassette for any cracks, leaks, particulate matter, and clarity of medication. Contact us for any discrepancies or concerns.
3. Prepare your prefilled syringes for flushing your IV Catheter as instructed by your nurse.
4. Remove Medication Cassette or CADD tubing from package. If a medication bag and CADD tubing is used, the medication bag will need to be spiked at this time.
 - a. Remove protective tab from entry port to medication bag.
 - b. Remove cover from spike on CADD tubing and insert spike into medication bag using a pushing-twisting motion. **DO NOT TOUCH SPIKE.**
5. Press "**STOP/START**" button to stop pump.

PATIENT EDUCATION

CADD Solis Administration Procedure: Bag or Cassette Change in PCA Mode

6. Close all tubing clamps and disconnect the tubing from IV catheter as instructed by your nurse.
7. Insert the pump key (hex key side) into the keyhole and turn counterclockwise to the open lock position.
8. Open pump latch lever 90 degrees and remove cassette/tubing from the pump.
9. Discard the used Medication Cassette **OR** tubing with attached medication bag as instructed by your nurse.
10. Attach new cassette/tubing to pump (hook hinged end first). Push up on the cassette until it firmly clicks into place **OR** place the pump upright on a firm, flat surface and then press down on the latch side of the pump until the cassette clicks into place. Close Latch.

Note: Do not force the latch. If you are unable to latch the cassette with minimal effort and without force, the cassette is not in the proper latching position. Unlatch the cassette and repeat the process. The top of the screen will read "Cassette Partially Unlatched" or "Cassette Unlatched and Removed".

11. Once the cassette/tubing is properly attached "**Reservoir Cassette Latched**" message will appear on display.
12. Turn the pump key clockwise to close the lock position and double lock it to start the pump.
13. When "**Reset THE Reservoir Volume to ___ml?**" appears on display, press "**Yes**" to reset volume to the original programmed value.

PRIMING TUBING AND STARTING PUMP

14. When the new cassette/tubing with medication bag is attached, the pump may automatically prompt you to prime the tubing. Cassettes come already primed. If your medication comes in a bag, you may need to prime the Remote Reservoir Adaptor tubing.
15. Pump will then ask, "**PRIME TUBING?**" Press "**YES**" on keypad (**IF NOT PRE-PRIMED**). Make sure clamps on tubing are open and turn pump on its side (**latch-side down**) to assist with the removal of air bubbles.



[Policies & Procedures - CarepathRx \(carepathrxllc.com\)](#)



POLICIES & PROCEDURES

— POLICIES AND PROCEDURES

CarepathRx policies and procedures provide our nursing partners with the strategy and guidelines needed to establish safe and effective infusion therapy in the home setting.

A. GENERAL

+

B. CATHETERS

+

C. OTHER ADMINISTRATION ROUTES

+

D. THERAPIES

+

— POLICIES AND PROCEDURES

CarepathRx policies and procedures provide our nursing partners with the strategy and guidelines needed to establish safe and effective infusion therapy in the home setting.

A. GENERAL

- Flushing Catheters [NUR-001](#)
- Intravenous Therapy Principles [NUR-002](#)
- IV Lines and Care; Quick Reference [NUR-003](#)
- Blood Culture Collection [NUR-004](#)
- Drug Level Drawing Times [NUR-005](#)
- Lab Draw Protocol [NUR-006](#)
- Antimicrobial Lock Therapy Central Venous Access Device [NUR-010](#)
- Management of Allergic/Anaphylactic Reactions [NUR-012](#)
- IV Push Medication via Syringe [NUR-013](#)
- Withdrawing Medication from a Vial [NUR-014](#)
- Administration of Cathflo Activase in Adult Patient [NUR-015](#)
- Infiltration and Phlebitis [NUR-121](#)
- Vesicants, Chemotherapeutic Agency and Vascular Access Recommendations [NUR-208](#)

Click policy
number to view

FLUSHING and LOCKING CATHETERS

Section: Nursing

Compliance: ACHC Infusion Pharmacy

INS STANDARDS: 8, 10, 11, 12, 13, 16, 17, 18, 20, 21, 36, 41, 59

ACHC STANDARDS: DRX2-10D, DRX5-1D,

DRX5-5E, DRX7-8I, DRX7-21A

TJC STANDARDS: IC.02.01.01, MM.05.01.07, MM.06.01.01, MM.06.01.03,

NPSG.01.01.01, PC.02.01.01, PC.02.01.03, PC.02.02.05, PC.02.03.01

Policy ID: NUR001

Effective: 1/1/21

Reviewed: 12/21/22

Revised: 12/12/22

Approved by, Title and Date Approved: Kathleen Patrick, President, 1/1/21, 5/1/21,
12/21/22

I. POLICY

Flushing and locking of catheters are essential to ensure a well-functioning catheter. Flushing and locking of catheters prevent occlusion due to thrombolytic obstruction or precipitates. Flushing techniques and sufficient flushing volumes are essential to maintain catheter function, to prevent delays in treatment and decrease necessity for replacement. Vascular Access Devices (VADs) are flushed and aspirated for a blood return with each nursing VAD assessment. VADs are flushed after each infusion to prevent complications which may arise from incompatible medications and to clear the line. Each lumen of a VAD is locked after the final flush to decrease risk of occlusion. **DO NOT** use Heparin locking solution for Peripheral Intravenous Catheters (PIVCs). **Use only preservative-free solutions with neonates and infants to prevent toxicity. NEVER USE STERILE WATER FOR FLUSHING VADs**

II. PROCEDURES

A. Supplies for Flushing and Locking:

1. Gloves
2. Preservative-free 0.9% sodium chloride prefilled syringe(s)
3. Locking solution (heparin prefilled syringe) **NOT FOR USE WITH PIVCs or Groshong catheters**. Neonates and pediatric patients (0.5 to 10 units/ml); adults (10units/ml) or (100units/ml for Implanted Port)
4. Antibiotic/antimicrobial locking solution, if ordered
5. Antiseptic wipes
6. 10 ml syringe for aspiration of antibiotic/antimicrobial locking solution if one was used

B. Identify patient using 2 identifiers.

C. Review prescriber's order or standard protocol. Verify the medication or solution matches the

right patient, right dose, right route of administration, rate of administration, total volume to infuse, and expiration date.

D. Perform hand hygiene (refer to CarepathRx (2022). Hand Hygiene, NUR 018).

E. Clean and disinfect work area using an appropriate disinfectant.

F. Explain procedure and educate patient/caregiver:

1. Aseptic technique and hand hygiene
2. Inform patient that they may experience a disturbance in taste odor with flushing. This is thought to be a result of substances leaching from the prefilled plastic syringe due to sterilization methods.
3. How to administer the medication, frequency, route, and dose if patient will be doing self-administration.
4. Signs and symptoms of a reaction
5. Signs and symptoms of access complications
6. Safe storage of medication and supplies
7. Disposal of medications, supplies and equipment
8. The appropriate provider of treatment (the prescriber OR the pharmacist; BOTH the prescriber and the pharmacist) to contact during business hours, the availability of an answering system to receive calls during evenings, nights, weekends and holidays and the accessibility of a Pharmacist, Nurse, and Dietician 24 hours a day, 7 days a week. Notify pharmacy by calling the number listed at the top of the medication label; (Refer to CarepathRx (2022). BEST PRACTICE GUIDELINES, NUR 002; II. ALGORITHM FOR NOTIFICATION OF PHARMACIST AND PROVIDER).

G. Gather all equipment on a clean, disinfected, aseptic field.

H. Inspect equipment and supplies for product integrity and function before use; inspect packaging for damage; inspect vial(s)/cassette/bag for cracks, particulate matter, and clarity of medication. verify expiration date.

I. Immediately prior to equipment assembly, hand hygiene is repeated, and non-sterile gloves are donned.

J. Prepare medications or solutions for infusion according to medication label or package insert.

K. Flushing Procedure:

1. Use aseptic non-touch technique whenever accessing hubs, connectors, or injection ports, and whenever the catheter lumen is opened or connected to other devices
2. Remove alcohol disinfection cap if one was used. Cleanse needleless connector with antiseptic swab, applying vigorous friction to hub for 30 seconds. Allow to dry for 60 seconds.
3. If antibiotic/antimicrobial locking solution was used, withdraw using 10 ml syringe prior to flushing.



NEWS

NEWS

CarepathRx Announces Home Infusion Partnership with Yale New Haven Health

📅 October 12, 2022 📁 News

CarepathRx to provide comprehensive home infusion services to the Yale New Haven Health System patient population across five hospitals...

[Read More](#)

CarepathRx and Orlando Health Announce Home Infusion Collaboration

📅 September 12, 2022 📁 News

CarepathRx and Orlando Health recently announced a multi-year home infusion management service agreement to benefit patients across the systems' ten hospitals...

[Read More](#)

CarepathRx Chief Human Resources Officer Leah Silver named 2022 Front of the Front Line Award Finalist

📅 September 8, 2022 📁 News

This prestigious honor from HRO Today recognizes excellence within healthcare HR leadership...

[Read More](#)

BioPlus Introduces the BioPlus V: Virtual Pharmacy Tool

📅 August 22, 2022 📁 News

BioPlus V is the only virtual pharmacy tool that provides comprehensive visibility for prescribers into every step of their patients' specialty medication journey...

[Read More](#)

CarepathRx and Antelope Valley Medical Center Announce Inclusive Home Infusion Partnership

📅 August 16, 2022 📁 News

Antelope Valley Medical Center is the only full-service, acute-care hospital serving northern Los Angeles County...

[Read More](#)

Delivering Fast and Easy Access to More Generic Oncology Medications

📅 July 13, 2022 📁 News

BioPlus Specialty Pharmacy today announced the expansion of its "Hope Delivered in 24 Hours" program for oncology meds...

[Read More](#)

CarepathRx On Call

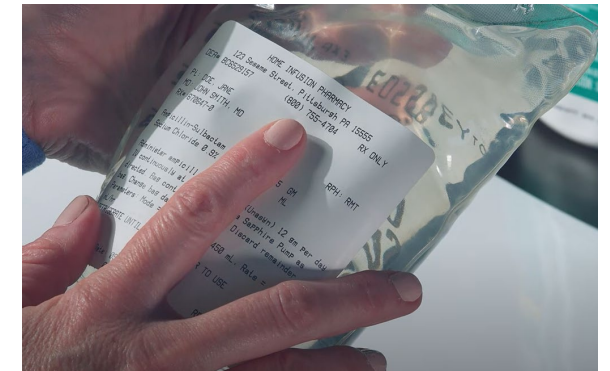
24 / 7 Access to the Clinical Pharmacy team

For after-hours, weekend and holiday support, troubleshooting, and delivery needs:

- CarepathRx Pharmacist
- Local pharmacy support varies by pharmacy.
- Dietitians
1-877-ENTERAL
- Nurses
- Delivery



Contact the pharmacy by calling the phone number at the top of the medication label.



SOC Visit Responsibilities

Review the **Patient Welcome Guide**

- Patient Specific Documents:
 - Pharmacy orders (product label and supplemental product label)
 - Patient Teaching Guide (step-by-step administration instructions)
 - Drug information sheets.
 - Delivery slip

Educate patient and caregiver on therapy administration and troubleshooting.

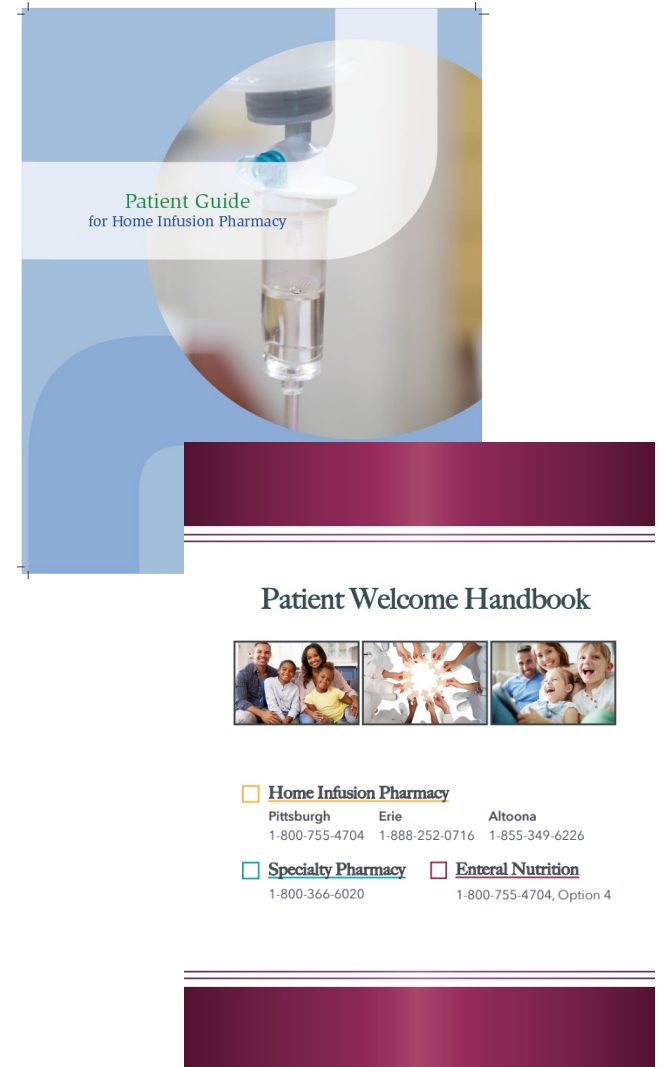
- Supplies, medication usage and storage.
- Use patient teaching guide and video resources

Remind patients pumps must be returned to the pharmacy when therapy is completed.

- Not disposable




The pharmacy must speak to the patient before to each delivery to assess the patient and for medication and supply ordering.

- Complete inventory of drugs and supplies
- Delivery needs
- Response to therapy
- Answer patient questions



The image shows the cover of a 'Patient Welcome Handbook' for Home Infusion Pharmacy. The cover features a large circular image of a clear plastic infusion pump with a drip chamber. The text 'Patient Guide for Home Infusion Pharmacy' is overlaid on the image. Below the image is a dark purple horizontal bar. Underneath the bar, the title 'Patient Welcome Handbook' is centered. Below the title are three small square images: a family of four, a group of people holding hands, and a family with a child. At the bottom of the cover, there is contact information for Home Infusion Pharmacy, Specialty Pharmacy, and Enteral Nutrition.

Patient Welcome Handbook

Home Infusion Pharmacy
Pittsburgh Erie Altoona
1-800-755-4704 1-888-252-0716 1-855-349-6226

Specialty Pharmacy **Enteral Nutrition**
1-800-366-6020 1-800-755-4704, Option 4

SOC Visit Responsibilities

- Medication Safety
- Home Infusion Pharmacy Contacts and Info
- Enteral Nutrition Contacts and Info
- Medication Storage
- Infection Control
- Troubleshooting
- Home Safety
- Patients Patient's Bill of Rights & Responsibilities
- Patient Consent/ Authorization & Assignment of Benefits
- Advance Directive Information
- Medicare DMEPOS Supplier Standards
- Medicare Prescription Drug Coverage and Your rights
- Infection Control Statement
- DME Warranty Information
- Notice of Privacy Practices

Therapy Education

- Remind patients pumps must be returned to the pharmacy when therapy is completed.
 - Pumps are not disposable!
- How to administer therapy.
- Pharmacy and Nursing contacts.
- Supply reordering
 - Patient must speak to the pharmacy to schedule delivery.



Infusion Therapies

- List of supplies and medications needed.
- Complete inventory of supplies, medications and formula in the home.
- Patient's response to therapy.
- Script for order changes & when next doctor appointment is.

Enteral Therapies

- List of supplies and formula needed.
- Complete inventory of formula and supplies in the home.
- Patient's response to therapy.
- Changes in feeding orders
 - Physician order required to increase formula volumes.

Prior to dispensing medication

- Appropriateness (care being provided is still needed)
- Effectiveness (client/patient outcomes/response to care)
- Determining if all needed care/services are being provided
- Change in client's/patient's condition
- Problems or additional patient needs

CAREPATHRx Pump Returns



CarepathRx will contact the patient & arrange pump pick up by UPS.

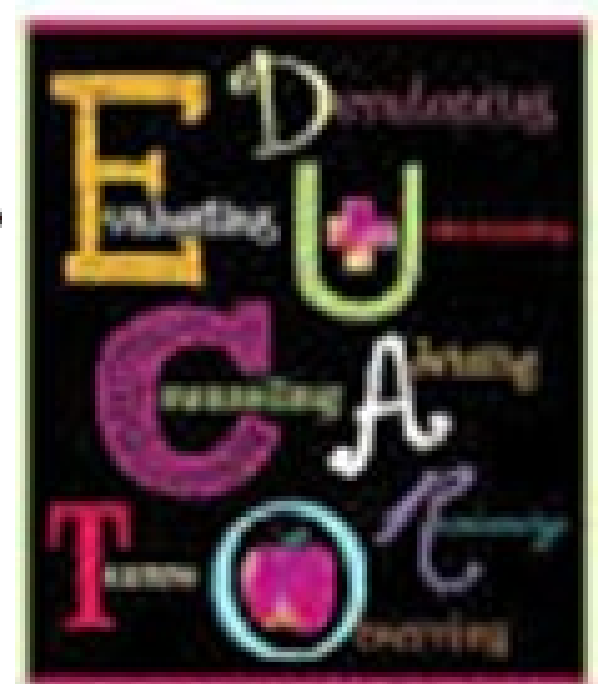
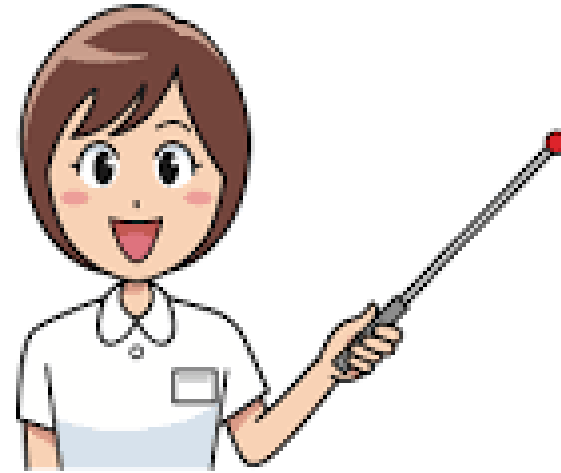
- The pharmacy will print and deliver a UPS shipping label and a padded shipping box to the patient for pump return at end of therapy.
- The patient does not need to be home for the UPS driver to pick up the boxed pump.
- There is no fee to the patient for this service.

Nurses are NOT to remove pumps from patients' homes.

(exceptions may apply)

Contact CarepathRx for equipment return.

START OF CARE EDUCATION



SOC EDUCATION

<input type="checkbox"/>	Verified patient by name and DOB.																
<input type="checkbox"/>	Educated on checking medication label(s) for correct name, date, medication name and instructions.																
<input type="checkbox"/>	Educated on medication therapy and _____ administration mode.																
<input type="checkbox"/>	Explained the necessity of speaking with the pharmacy prior to each delivery. They will need to be prepared to discuss the usages and inventory of their medications and supplies. Explained that this information is important for our clinicians to participate in their continued care partnering with their physicians, home health nurses and their insurance provider.																
<input type="checkbox"/>	Nurse evaluation and assessment of patient willingness and ability to learn home therapy completed. Clinical findings, learning deficits and/or special considerations identified include: _____																
<input type="checkbox"/>	<p>Patient/caregiver instructed in and/or provided with:</p> <table border="0"> <tr> <td>• Rights and responsibilities</td> <td>• Storage & preparation of medications</td> </tr> <tr> <td>• Consent Form</td> <td>• S/S of adverse reactions</td> </tr> <tr> <td>• Purpose, risks, and benefits of therapy</td> <td>• Pump operation/troubleshooting</td> </tr> <tr> <td>• Universal precautions</td> <td>• Line/tube care & dressing change</td> </tr> <tr> <td>• Emergency phone number</td> <td>• Line/tube flushing technique</td> </tr> <tr> <td>• Pharmacy phone numbers</td> <td>• Infection control</td> </tr> <tr> <td>• Home Safety</td> <td>• S/S access device complications</td> </tr> <tr> <td>• Medication information</td> <td>• Aseptic technique</td> </tr> </table>	• Rights and responsibilities	• Storage & preparation of medications	• Consent Form	• S/S of adverse reactions	• Purpose, risks, and benefits of therapy	• Pump operation/troubleshooting	• Universal precautions	• Line/tube care & dressing change	• Emergency phone number	• Line/tube flushing technique	• Pharmacy phone numbers	• Infection control	• Home Safety	• S/S access device complications	• Medication information	• Aseptic technique
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• Emergency phone number	• Line/tube flushing technique																
• Pharmacy phone numbers	• Infection control																
• Home Safety	• S/S access device complications																
• Medication information	• Aseptic technique																

Delivery Slip

- Review to make sure all items have been delivered
- Use to communicate to patient which supplies require reordering during pre-delivery phone call with the pharmacy.

Pharmacy information

Patient information

Medications and flushes

Supply items

DME items

___Bag ___Cooler ___Box ___IV Pole ___Sharps

Call your doctor for medical advice about side effects. You may report side effects to the FDA at 1-800-FDA-1088.

Created by REXROADRNG2 on 06/12/2020 at 03:06:43 PM EDT Delivery Slip: 1008917 Page 1 of 2
 Printed by REXROADRNG2 on 06/12/2020 at 03:08:52 PM EDT Reprinted by FIDMCL on 07/01/2020 at 03:11:04 PM EDT

Patient: _____ **Ship Date:** 06/12/2020
Address: _____ **Del Date:** 06/12/2020
Next Del Date: 06/18/2020
Physician: MARCHIOLI, C.
Nursing Agency: UPMC SOUTH IV-TEAM 26
Agency Phone: (412) 653-8200, Work Number, Telephone
After Hours: (412) 653-8200, Work Number, Telephone

Delivery Method: Driver
Map Area Code: TEAM 3 UPS

Delivery Instructions:

Directions:

MEDICATIONS

Rx #	Description	Qty Ord	Qty Deliv	Lot #	Exp Date
570410-0	TPN 1.8 Liter w/Fats	5	5		
570411-0	TPN 1.8 Liter clears	2	2		
570419-0	INFLUVITE ("ADULT") MULTI-VITAMIN 10ML	7	7		
570421-0	Famotidine (40mg/4mL) 20mL MDV	2	2		
570423-0	1-20-232 50 Units Heparin/5mL in 12mL syringe(10u... 20 @ 1 EA			20	
570422-0	1-61-043 10mL 0.9% Sodium Chloride/12mL Syringe 22 @ 10 ML			22	

SUPPLIES

Code	Bis	Description	Qty Ord	Qty Deliv
7-01-047		MEDICATION INFORMATION SHEET	1 EA	1
7-00-009		NEW PHARMACY ORDERS	1 EA	1
7-00-019		PRIZM TPN DELIVERY MODE PATIENT INFO GUIDE	1 EA	1
7-00-023		PUMP RETURN BOX	1 EA	1
7-01-010		Administration of TPN via CADD- Prizm Pump	1 EA	1
7-01-012		Drawing Up Medications from a Vial	1 EA	1
5-66-118		CADD 3000ML PUMP BACKPACK	1 EA	1
7-01-014		CADD-Prizm Power Pack Usage Instruction	1 EA	1
7-01-015		3 Liter Backpack teaching sheet	1 EA	1

Delivery Slip: 1008917 Page 2 of 2

PATIENT WELCOME HANDBOOK 1 EA 1

03-01-04-05 SORBAVIEW SHIELD 3.5 X 5.25 (SV353UDT) 3 EA 3

03-02-01-02 SYRINGE, 10CC, 20G X 1" (B09644) 7 EA 7

03-02-02-04 SYRINGE, 5CC, 20G X 1" (B09634) 7 EA 7

03-03-01-01 SHARPS CONTAINER 3 GALLON MAIL AWAY 1 EA 1

03-04-02-01 ALCOHOL PREP SWABS STERILE 100/BOX 1 BX 1

03-04-02-02 DRESSING CHANGE KIT (MSDC 009963) 3 EA 3

03-05-02-02 CADD PRIZM HI VOL W/1.2 MICRON FILTER 21 7381 8 EA 8

03-06-02-01 MICROCLAVE INJECTION CAP (B3300) 4 EA 4

03-06-02-02 EXT SET 12" W/MICROCLAVE VALVE B3312 2 EA 2

03-07-04-01 GLOVE, N/5 UNSIZE MED/FF (EA) 2 EA 2

03-07-04-05 TAPE, PAPER (1") 1 RL 1

5-90-114 PH-01-04-04 BATTERY DURACELL COPPERTOP ALKALINE 9V 2 EA 2

EQUIPMENT

Code	Description	Serial #	Asset Tag	Exp. Return
5-81-500	POWER PACK	982049	C08430	
5-82-125	AC ADAPTER - PRIZM	0004		
5-73-110	CADD PRIZM 6100	768368	C009702	

PACKED BY: _____ CHECKED BY: _____ PACKED BY: _____

Drug Information Sheets

- Delivered to the patient at Start of Care (SOC)
- Review medication and side effects with patient/caregiver

WARNING: 1

POSSIBLE SIDE EFFECTS:

BEFORE USING THIS MEDICINE:

OVERDOSE:

HOW TO USE THIS MEDICINE:

ADDITIONAL INFORMATION:

CAUTIONS:

Patient: NAME

PATIENT EDUCATION MONOGRAPH

Ganciclovir Sodium

Date: Friday, November 6, 2020

Physician: KILARU, SILPA (103385)

Rx: 587708

GENERIC NAME: Ganciclovir (Systemic) (gan SYE kloe veer)

WARNING: Very bad and sometimes life-threatening blood and bone marrow problems like anemia, low platelet counts, or low white blood cell counts have happened with this drug. Change in dose or even stopping the drug may be needed if any of these side effects happen. Talk with the doctor. This drug has caused fertility problems in animals and some humans. Fertility problems may lead to not being able get pregnant or father a child. This may go back to normal but sometimes it may not. If you have questions, talk with the doctor. In animals, this drug has caused harm to unborn babies and cancer. This drug may have the same effects in humans. If you have questions, talk with the doctor. **COMMON USES:** It is used to treat a viral infection of the eyes in people with immune system problems. It is used to prevent cytomegalovirus (CMV) disease after organ transplant. It may be given to you for other reasons. Talk with the doctor.

BEFORE USING THIS MEDICINE: WHAT DO I NEED TO TELL MY DOCTOR BEFORE I TAKE THIS DRUG? **TELL YOUR DOCTOR:** If you are allergic to this drug; any part of this drug; or any other drugs, foods, or substances. Tell your doctor about the allergy and what signs you had. **TELL YOUR DOCTOR:** If you have any of these health problems: Low white blood cell count, low platelet count, or low red blood cell count. **TELL YOUR DOCTOR:** If you are taking imipenem-cilastatin. **TELL YOUR DOCTOR:** If you are breast-feeding. Do not breast-feed while you take this drug. This is not a list of all drugs or health problems that interact with this drug. Tell your doctor and pharmacist about all of your drugs (prescription or OTC, natural products, vitamins) and health problems. You must check to make sure that it is safe for you to take this drug with all of your drugs and health problems. Do not start, stop, or change the dose of any drug without checking with your doctor.

HOW TO USE THIS MEDICINE: HOW IS THIS DRUG BEST TAKEN? Use this drug as ordered by your doctor. Read all information given to you. Follow all instructions closely. It is given as an infusion into a vein over a period of time. Drink lots of noncaffeine liquids unless told to drink less liquid by your doctor. **HOW DO I STORE AND/OR THROW OUT THIS DRUG?** If you need to store this drug at home, talk with your doctor, nurse, or pharmacist about how to store it. **WHAT DO I**

PATIENT EDUCATION

CADD Solis Administration Procedure (Intermittent or Continuous Mode)

Properly administering your medication at home is important to your safety. In the event of an emergency, call 911.

SUPPLIES:

- Medication bag or cassette
- CADD tubing (**change M-W-F for continuous infusions, or daily if intermittent**)
- CADD Solis pump w/ rechargeable battery & AC adapter
- 4- AA batteries for emergency backup
- (2) Sodium chloride (Saline) prefilled syringes
- (1) Heparin prefilled syringe (if indicated)
- Alcohol or antiseptic wipes
- 4-AA batteries for emergency backup
- (1) light blue sterile cap

SASH FLUSH PROCEDURE:

- S** Saline ___ ml
- A** Administer medication as instructed by your nurse
- S** Saline ___ ml
- H** Heparin ___ ml (if required)

PROCEDURE FOR INFUSION AND DAILY BAG WITH TUBING CHANGE:

1. Gather supplies. Clean work area. Wash hands thoroughly for at least 20 seconds.
2. Check medication label for name, drug, frequency, and expiration. Inspect the medication syringe for any cracks, leaks, particulate matter, and clarity of medication. Contact us for any discrepancies or concerns.
3. Prepare your prefilled syringes for flushing your IV Catheter as instructed by your nurse.
4. Remove CADD tubing from package. Remove the blue clip from the top of the cassette by pulling up on the blue clip. This will prevent unintended gravity flow.
5. Remove protective tab from entry port of medication bag.
6. Remove cover from spike on CADD tubing and insert spike into medication bag using a pushing-twisting motion. **DO NOT TOUCH SPIKE.**
7. Press the Power button on the right side of pump. Pump will make a series of beeps. Main screen will appear with pump mode showing and **"READY TO BEGIN"** in center of screen.

Patient Teaching Guides

Teaching Guides and Videos are located on the CarepathRX NurseLink site.

Step by step instruction on how to administer medications.

Resources

Supplies

Set up

Administration

Clean up

WHEN IT IS TIME TO FLUSH YOUR LINE:

1. Clean work area and placemat with a disinfectant wipe.
2. Gather equipment on placemat.
3. Wash hands for 20 seconds with soap and water.
4. Prepare flushes, syringes, and have several alcohol wipes nearby per your teaching sheet.
5. Follow the patient teaching sheet and plan of treatment, located in your patient handbook, to flush your IV catheter.

S - SALINE

A - ADMINISTER MEDICATION

S - SALINE

H - HEPARIN










IMPORTANT

Not all patients will complete every step when flushing the catheter. Your nurse will let you know which steps to complete based on your specific therapy orders.



NEVER TOUCH THE TIP OF ANY SYRINGE.
If touched, discard syringe.

S SALINE	A ADMINISTER MEDICATION	S SALINE	H HEPARIN
 	 Administer Medication (if prescribed)	 	 

Patients are **NOT** taught to check for a blood return

Teach flushing with the **Push Pause Method**

Flush all lumens with adequate amount of saline or heparin to **ensure patency.**

SASH Method

1 . Follow physician orders on POT for flushing volumes

2. Flush before AND after every dose of medication

S – Flush the device with sterile **S**aline
A – **A**dminister the medication / draw blood work
S – Flush the device with sterile **S**aline
H – Flush the device with **H**eparin

3. Unused Lumen(s) - Heparin only Flush

- **once daily**
- **no saline**





Alcohol Caps



Alcohol kills microorganisms by the *friction* of scrubbing the hub and *drying*.
Increased scrubbing and drying time reduces infection risk.

Facility Hub Scrub P&P

- Scrub for 5 seconds
- Allow to dry for 15 seconds
- Scrub once for flushes and medication

Need
Alcohol
Caps

- Cap with alcohol-soaked sponge to cleans hub and covers injection port
 - Alcohol dries and cap becomes a simple cover
- **Must continue to scrub the hub!**
 - Must scrub the hub for 30 seconds before EVERY IV hub access
 - Failure to scrub the hub will result in increased risk of infection
- Single use only

Home Infusion Hub Scrub P&P

- Scrub hub for 30 seconds
- Allow to dry for 60 seconds
- Scrub with new alcohol wipe for each line access (4 alcohol wipes for SASH)

Does NOT
Need
Alcohol
Caps

Product Label

Product label to be reviewed with each dose or bag change.

Pump settings to be reviewed on the pump with each dose or bag change.

Pharmacy contact information at the top of the product label.

Product label components to review:

- Patient name
- Medication name
 - Dose
 - Diluent name and volume
- Administration instructions
 - Plan language instructions
 - **Pump parameters**
 - To be verified on pump with each bag change.
 - How often to change the bag if continuous
- Storage instructions
 - Including how long to warm to room temperature if refrigerated.
- Expiration date

```

                ABC PHARMACY
                2700 Sesame Street, Louisville, KY 40223 (502)
                818-559-1373 Toll Free 800-222-3333
          RX#: 110-6                    FILL DATE: 04/27/2022
          Patient Name                   PRESCRIBER: BRIAN PEPPERS
          Patient Address
          MORGANTOWN
  
```

```

CONTENTS:                               UNITS:    6
OXACILLIN (AUROMEDICS)                   12      GM
SODIUM CHLORIDE 0.9% (BAXTER)            500     ML
DIRECTIONS:
INFUSE 2GM (100ML) DOSE INTRAVENOUSLY OVER 1 HOUR EVERY 4
HOURS VIA PUMP. TOTAL VOLUME TO BE INFUSED = 618ML, KVO
1ML/HR. * CHANGE BAG EVERY 24 HOURS (EACH BAG CONTAINS 6
DOSES)*
*****KEEP REFRIGERATED*****
  
```

```

CONTENTS:
^ cefTRIAxone (APOTEX)
^ SOD CHL 0.9% 100 ML MINI-BAG PLUS (b 100 ML~
DIRECTIONS:
ACTIVATE DOSE IMMEDIATELY PRIOR TO USE AND ADMINISTER
INTRAVENOUSLY OVER 30 MINUTES EVERY 24 HOURS BY GRAVITY
ADMINISTRATION AS DIRECTED. STABLE 24 HOURS AT ROOM
TEMPERATURE OR 9 DAYS REFRIGERATED AFTER ACTIVATION.
STORE AT ROOM TEMPERATURE.
DISCARD AFTER: 05/25/2022    FILLED BY: AGA100
FEDERAL LAW PROHIBITS THE TRANSFER OF THIS DRUG TO
ANY PERSON OTHER THAN THE PRESCRIBED PATIENT.
  
```

```

MD: HARRINARINE MADHOSINGH
RX#: 167506-2                               DOSES: 3
^ DAPTOmycin (BE PHARMACEUTICALS)        1000    MG~
^ SOD CHL 0.9% (B. BRAUN)                 30      ML~
ADMINISTER DOSE SLOW IV PUSH OVER 3-5 MINUTES EVERY 24
HOURS. STABLE 12 HOURS ROOM TEMPERATURE OR 9 DAYS
REFRIGERATED.
*****KEEP REFRIGERATED*****
Original Fill: 04 14 22                    REFRIGERATED
Filled: 04 22 22      ZZAH    Exp Date: 05 01 22
RX#: 167506-2    JASUKOW, ARTHUR N
Fill Date: 04 22 22      EXP DATE: 05 01 22
DAPTOMYCIN 1000 MG IVP
  
```


Supplemental Product Labels

Pharmacy Name
 Pharmacy Address
 Pharmacy Phone Number

RX#: 15-0

Patient Name
 Patient Address

FILL DATE: 11/22/2021
 PRESCRIBER: Ordering Provider Name
 WV 26169

CONTENTS: UNITS: 10
 SODIUM CHLORIDE 0.9% 10ML SYRINGE (BD) 10 ML

DIRECTIONS:
 FLUSH WITH 3ML 0.9% SODIUM CHLORIDE BEFORE AND AFTER IV DOSE ADMINISTRATION.
 STORE AT ROOM TEMPERATURE.
 ^NO LAB DRAW FROM LINE UNLESS APPROVED BY PHYSICIAN~
 DISCARD AFTER: 11/22/2022 FILLED BY: LKA100
 FEDERAL LAW PROHIBITS THE TRANSFER OF THIS DRUG TO ANY PERSON OTHER THAN THE PRESCRIBED PATIENT.

CONTENTS: UNITS: 1
 SOLU-MEDROL (PFIZER) 62.5 MG
 ACETAMINOPHEN 325 MG TABLET (MAJOR) 650 MG
 DIPHENHYDRAMINE 25MG CAPSULE (MAJOR) 50 MG

DIRECTIONS:
 Administer acetaminophen 650mg orally prior to PRIVIGEN administration as premed.
 Activate and infuse Methylprednisolone 62.5mg IV over 3-5 minutes prior to PRIVIGEN administration as premed.
 Administer diphenhydramine 50mg capsule orally prior to PRIVIGEN administration as premed.
 STORE AT ROOM TEMPERATURE.
 ^NO LAB DRAW FROM LINE UNLESS APPROVED BY PHYSICIAN~
 DISCARD AFTER: 11/22/2022 FILLED BY: LKA100
 FEDERAL LAW PROHIBITS THE TRANSFER OF THIS DRUG TO ANY PERSON OTHER THAN THE PRESCRIBED PATIENT.

CONTENTS: MAB-EMERGENCY MEDS UNITS: 1
 DIRECTIONS:
 IN CASE OF ADVERSE DRUG REACTION:
 Administer Acetaminophen 650mg ONCE. Administer Diphenhydramine 50mg (1ml) IV over 2-5 minutes ONCE or diphenhydramine 50mg capsule by mouth ONCE and activate and administer hydrocortisone 100mg IV ONCE. Epinephrine 0.5mg/0.5ml IM and may repeat ONCE in 5-15 minutes. If symptoms are rapidly progressing or continue NOTIFY PHYSICIAN

MEDICATION LABELS

At a minimum, labels include:

- Name, address, and phone number of the pharmacy
- Date prescription was filled
- Prescription number
- Client/patient name and species, if applicable
- Name and strength(s) of medication or active ingredient(s)
- Quantity or total volume
- Direction for use or administration guidelines (method of administration and rate or duration)
- Prescriber's name
- Beyond-Use Date (BUD) or expiration date, as appropriate
- Storage and handling instructions
- If required, notification that the preparation is compounded
- If medication is reconstituted in the home, the pharmacy will provide:
 - Reconstitution directions
 - Amount of diluent, if applicable
 - Mixing directions, if applicable
 - Final concentration (amount of drug in final volume)

Alert Labels

on Plan of Treatment and Medication Labels
Each pharmacy will have pharmacy specific labels



Will be on the medication label sent to the patient.

To alert medication is not provided as a single dose

- To administer multiple vials/syringes for each dose
- To administer partial dose
 - Will need to be pole mounted on a pump.

A purple rectangular alert label with rounded corners. The text "CAUTION: Parameter Change review pump setting before use" is written in a white, sans-serif font, centered within the label.

Will be on a new Plan of Treatment sent to the patient.

To alert the patient the pump parameters need to be changed before newly delivered medication can be given on the pump in the home.

Medication Temperature for Infusion

Solutions should be at room temperature for infusion. Refer to product label for instructions.

- Most medication to be removed from the refrigerator 4-6 hours prior to their infusion.
- Elastomeric Device (Easy Pumps) must be removed from the refrigerator 6-12 hours prior to infusion.

Instruct to NOT artificially warm the bag or syringe.

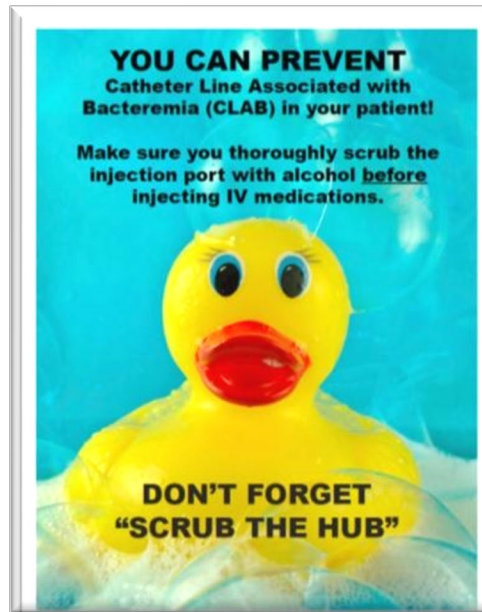
- ⊘ Do NOT microwave
 - ⊘ Do NOT bath in warm water
 - ⊘ Do NOT heat in any way





“Hub scrub” for 30 seconds using alcohol and friction in a twisting motion.

Allow to dry for 60 seconds



TPN patients:
30 second scrub
x2 prior to TPN procedure
with a 60 second air dry
between scrubs

Preventing CABSI *Scrub the Hub for 30 seconds!*

The Catheter Hub is a known source of line infections related Bloodstream Infections (CABSIS).

The CDC recommendations are to “SCRUB” rather than “WIPE” the hubs with alcohol or chlorhexadine before accessing.

SCRUB THE HUB before each use. S.A.S.H requires cleaning the HUB 4 times with 4 new anapestic wipes, one for each IV-line access.

Teach the patient scrupulous Hand Hygiene and maintaining aseptic technique.

FACTORS THAT AFFECT LEARNING

RECEIVING
INFORMATION DOES'T
GUARANTEE LEARNING

COGNITIVE
DEFICITS

FATIGUE

PAIN

ANXIETY

DEPRESSION

FEAR

ASSESSMENT OF LEARNING

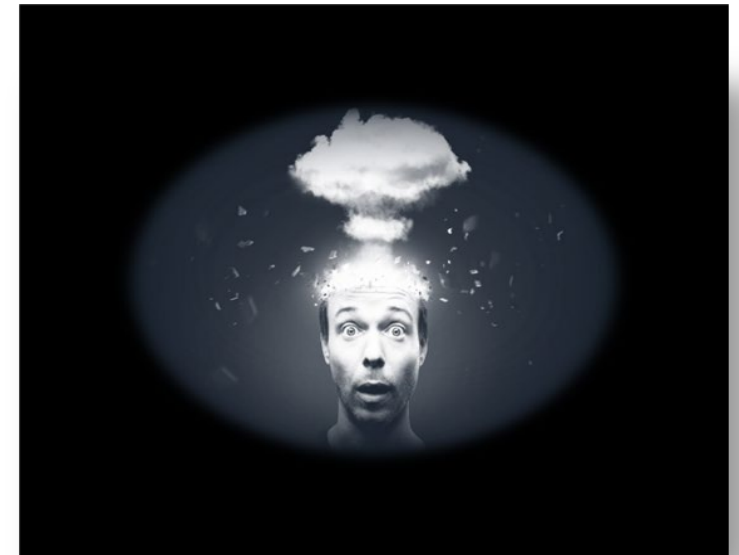
PATIENT/CAREGIVER IS:

- COOPERATIVE AND ABLE TO LEARN
- COOPERATIVE AND REQUIRES ADDITIONAL INFORMATION
- COOPERATIVE AND UNABLE TO LEARN
- UNCOOPERATIVE WITH LEARNING
- IMPAIRED ORIENTATION
- COGNITIVE DEFICITS
- HARD OF HEARING
- LEGALLY BLIND

RECEIVING EDUCATION DOES NOT GUARANTEE LEARNING

At the conclusion of your visit, ask yourself, did I educate my patient on:

- Purpose, risks, and benefits of therapy
- Universal precautions
- Aseptic technique
- Preparation and administration of medications and storage
- Preparations and administration of pre-medications
- Signs and symptoms of adverse reaction
- Preparation and administration of emergency medications
- Line/tube care, troubleshooting education, and dressing change
- Line/tube flushing technique and troubleshooting education
- Signs and symptoms of infection
- Signs and symptoms of access device complications
- Pump functions, troubleshooting and maintenance
- Tubing and bag changes
- Explained the necessity of speaking with the pharmacy prior to each delivery
- Teaching guides provided
- Provided pharmacy phone number
- Emergency phone number
- Assessed understanding of information provided



CarepathRx Contacts:

nursingsupport@homeinfusion.com

Christie Fisher MSN, MBA, RN, CRNI, IgCN
National Director, Nursing
Cell: 412-295-7849

Thank you for participating!

Please reach out with questions or for information on additional training opportunities.