

IV Piggyback

● SKILL SNAPSHOT

Purpose

- Administers an intermittent secondary IV medication through a compatible primary infusion line using a controlled rate.

When to use

- Ordered intermittent medication in a small-volume bag when secondary administration is appropriate and compatible.

Supplies needed

- Labeled secondary medication; secondary tubing; compatible primary fluid/tubing; smart pump; antiseptic; current compatibility reference.

● PREP + PATIENT SETUP

- Verify medication rights, allergies, concentration, dose, rate, compatibility, primary-fluid status, and line/lumen.
- Assess IV site and patency; review medication-specific labs/vitals.

● VAULT TIP

- After START, watch which chamber drips. The pump screen can be correct while the wrong bag is actually infusing.

● STEP-BY-STEP

1. Hand hygiene; identify patient; explain medication.
2. Compare secondary bag label with MAR/order. Inspect solution, expiration, concentration, and total volume.
3. Confirm compatibility with primary fluid, other infusions, tubing material, and vascular access.
4. Close secondary tubing clamp. Spike bag aseptically, fill drip chamber, and prime secondary tubing completely with medication solution.
5. Disinfect the needleless secondary port located above the primary pump segment; allow antiseptic to dry.
6. Connect secondary tubing aseptically and open its clamp fully.
7. Hang secondary bag higher than primary bag using the manufacturer-provided hanger so hydrostatic backcheck works.
8. Program pump using the secondary/IVPB mode and drug library. Enter correct medication, concentration, rate, and VTBI.
9. Trace tubing from both bags to patient. Confirm primary clamp is open, secondary clamp open, and correct line/lumen selected.
10. Start infusion and observe that secondary fluid is dripping/advancing while primary flow pauses as intended.
11. Monitor IV site, pump, volume, and patient response. Investigate alarms rather than repeatedly silencing them.
12. At completion, confirm secondary bag/tubing cleared as intended and primary infusion resumed at the correct rate.
13. Disconnect/cap or retain secondary tubing per policy and compatibility; reassess site and patient.

● SAFETY REMINDERS

- Back-priming and secondary setup must follow the specific pump/tubing system.
- Incompatible medications require a separate lumen or flushing plan.
- A closed secondary clamp can cause the primary fluid to infuse at the programmed secondary rate.
- Verify primary resumes after completion.

● COMMON MISTAKES

- Secondary bag not high enough.
- Secondary clamp left closed.
- Programming as primary infusion.
- No compatibility or line trace.

● DOCUMENTATION

- Medication, dose, concentration.
- Rate, VTBI, start/stop times.
- Primary fluid, route/lumen, compatibility.
- Site and patient response.
- Pump issues, interventions, notifications.