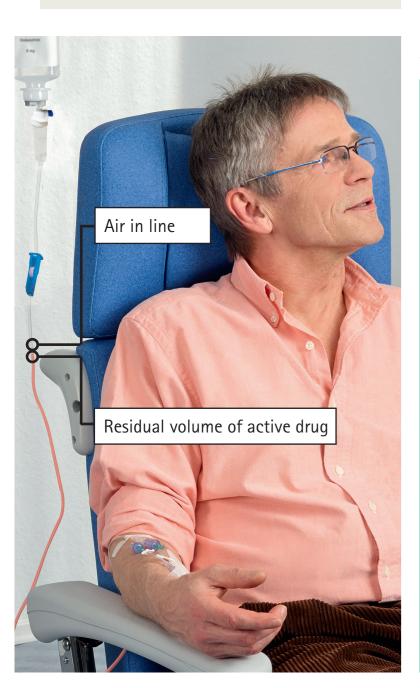




Underdosing - the forgotten residue

40%

of the active prescribed drug may not be administered due to residual volume¹



How underdosing occurs

When an infusion ends, the line of the administration set remains part-filled with air and residual volume of prescribed drug^{2,3}.

Failure to flush the line post infusion, can result in up to 40% of the prescribed drug being discarded, reducing the likelihood of delivering the expected therapeutic effect to the patient¹.

Why is underdosing a problem



Patient's condition may worsen leading to therapy failure as the volume of drug in the patient's blood stream may not be sufficient to be therapeutic⁴.



Underdosing is accumulative with more than one total dose being disposed of over a course of IV antibiotics².



Risk of patients requiring a longer stay in hospital.



Risk of increased antimicrobial resistance.



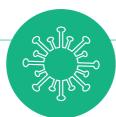
It is a medication error.

Underdosing case studies



Calculations performed at Hull University
Teaching Hospitals showed that an
antibiotic regime prescribed for 12 weeks,
and underdosage of 16 ml per infusion
set, resulted in the equivalent of

12 missed doses⁵.



Studies at Salisbury NHS
Foundation Trust highlighted that 60% of all fluids underdosed were IV antibiotics⁶.



The total cost of wasted drug being discarded at Salisbury NHS Foundation Trust equated to

£25,5176.

Line flushing guidance

In 2021 the National Infusion and Vascular Access Society issued line flushing guidance highlighting that administration methods must be improved to minimise the risk of underdosing and 'to ensure that all of the prescribed medicine is administered'.

Scan the QR codes to find out more about the issue of underdosing and how organisations have implemented line flushing solutions;



The issue of underdosing
Mark Santillo, Pharmaceutical Consultant
and Former Chair of NHS Pharmaceutical
Quality Assurance Committee



Implementing IV administration line flushing guidance in Critical Care Kate Holland, Critical Care Sister, Royal Bournemouth Hospital

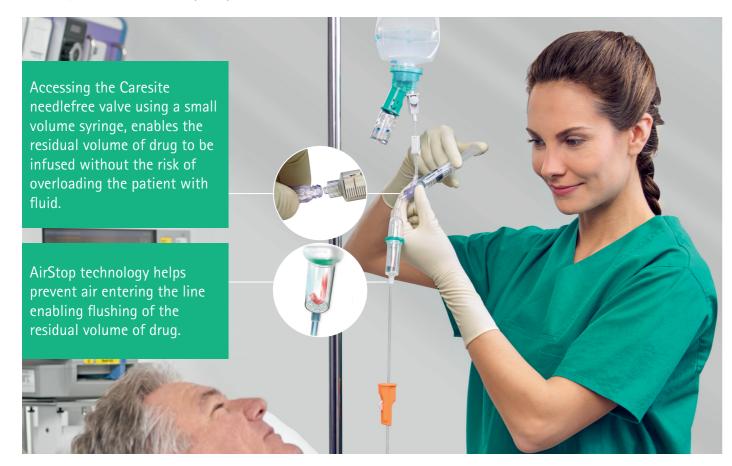


Line flushing guidance changing the way we do things
Andrew Barton, Nurse Consultant,
IV Therapy and Vascular Access,
Frimley Health NHS Foundation Trust

Intrafix® SafeSet Flush

Solutions for total dose delivery

Gravity and volumetric pump administration - ward use



For ward-based patients, the administration set line can be flushed via the Caresite® needlefree injection port above the drip chamber, using a small volume flush syringe.

The unique combination of AirStop technology at the bottom of the drip chamber and the Caresite® needlefree injection port above the drip chamber, permits the residual volume of active drug only to be administered to the patient, reducing the risk of air embolism and fluid overload which could occur if using a flushing bag.

It was a very seamless transition, training involved in using these sets is very minimal, they are very easy to use⁸

Andrew Barton, Nurse Consultant, IV Therapy & Vascular Access, Frimley Park Hospital

Benefits



Patient receives the full prescribed dose



Flushing the line prevents antimicrobials being discarded which could exacerbate antimicrobial resistance¹



Flushing the line helps to prevent costly drug wastage⁶

Intrafix® SafeSet Flush

Solutions for total dose delivery

Volumetric pump administration for Critical Care/ITU



For patients that are non-mobile, attach your primary line to a large volume compatible diluent and infuse your intermittent drug via the secondary line. This enables flushing of the line in between intermittent infusions, to ensure that the patient receives the total prescribed dose.

This line flushing solution also reduces plastic wastage as the primary line can remain in use for 96 hours,* with only the secondary intermittent drug infusion line requiring changing as and when the infusion has finished.

Whereby for 3 types of antibiotics we would have had 3 infusion sets, we now had 1, with a small piggyback set for each drug⁹

Kate Holland, Critical Care Sister, Royal Bournemouth Hospital

Benefits



A closed system can be maintained reducing the risk of infection



Condensing patient access points into one intermittent line creates nursing time efficiencies**



Significant plastic reduction⁸

^{*}or in accordance with your local policy quidelines

^{**}Applicable to non-mobile patients e.g. those in Critical Care/ITU

Clinical Support



When you choose to introduce SafeSet Flush into your organisation, our dedicated team of Clinical Therapy Specialists will provide you with complimentary ongoing clinical education support, tailored to your requirements.

E-Learning

Access is provided to our SafeSet Flush E-Learning module which covers:

- Overview of Aseptic Non Touch Technique
- Introduction to SafeSet Flush Administration Set
- Why Underdosing Occurs
- Clinical Demonstration
- Knowledge Check
- Frequently Asked Questions



Clinical demonstration video

Access is provided to clinical demonstration videos, highlighting how to flush the residual volume of drug from the line, using a volumetric pump or gravity administration set within different clinical settings.

Scan the QR code and scroll through to watch the SafeSet Flush demonstration videos





Product Codes

Product		Specification	Latex free	BCV*	Tubing length (cm)	Units per box	Product Code	NHSSC
	Intrafix® SafeSet Flush Back Check Valve	Gravity IV administration set with Caresite® needlefree valve, AirStop, PrimeStop and Back Check Valve	•	•	180	25	4110010	FKA796
	Intrafix® SafeSet Flush	Gravity IV administration set with Caresite® needlefree valve, AirStop and PrimeStop		-	180	25	4110000	FSB2389
	Intrafix® Primeline Flush	Secondary administration line		-	35	100	4110001	FSB2183
	Infusomat® Space Line SafeSet Flush	Administration Set for Infusomat® Space Volumetric Pump	•	-	300	25	8250720SP	FKA093

*BCV = Back check valve

Product		Specification	Units per box	Product Code	NHSSC
	O	10 ml pre-filled syringe containing 10 ml NaCl for	100	FM 2512570	FINOSO 4
	Omniflush® 10 ml	use in a General Aseptic Field	100	EM-3513576	FWC594

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B. Braun Medical Ltd | Thorncliffe Park | Sheffield | S35 2PW Tel: 0114 225 9000 | www.bbraun.co.uk