

Subcutaneous Injection Procedure

Subcutaneous Injections

Site selection

Some medication is given subcutaneously as it is required to be absorbed more slowly. Fatty tissue has minimal blood supply therefore dispersing medication at the slower, desired rate.

The preferred site is the lower abdomen, ensuring a 2.5cm distance away from the umbilicus. Sites must be rotated.

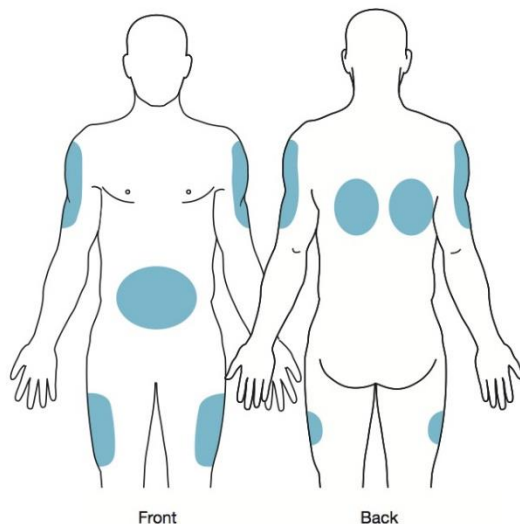
Areas unsuitable for injection are:

- Areas of inflammation or infection
- Lymphoedema or oedema
- Broken skin
- Skin folds
- Scars
- Area with mole or other lesions
- bruises

Practice note:

Always read the specific medication information provided in pack as it is important to know the recommended sites for that medication. Injuries may result if medications are given at the wrong site.

Medication such as Clexane requires the “bubble” of air to be left in the syringe to lock in medication at the end of the procedure.



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Subcutaneous Injection Procedure

Administration of Sub cutaneous injection

Procedure

1. Correctly identify Client.
2. Explain Procedure and gain consent.
3. Hand hygiene
4. Prepare medication checking with current and legal prescription the:
 - Right client
 - Right drug
 - Right dose
 - Right route
 - Right time
 - and Expiry date on medication and diluent

In the community setting these checks may be made with the client, caregiver or other responsible adult person if no other medical professional available.

1. Choose the appropriate site and position client comfortably in the correct position for administration of medication
2. Hand Hygiene
3. Inform client they will feel a pricking sensation as the needle is inserted.
4. Gently lift the skin up between your thumb and forefinger. This will lift the skin from the muscle beneath.
5. Still holding the skin up, insert the needle at a 90 degree angle.
6. Withdraw plunger to assess if in blood vessel. If blood evident, do not inject but remove, change needle and select a new site.
7. If no blood, depress the plunger slowly.
8. When completed, remove needle at the angle inserted and place gauze on site. Do not massage site.
9. Monitor client for signs adverse reaction throughout procedure
10. Cover client and ensure they are comfortable
11. Dispose of equipment and sharps as per sharps disposal policy. **Note: Do not recap needles. Where this is unavoidable use a one handed scoop technique.**
12. Hand hygiene

Documentation

Must include

- Client identified and consent given
- the date and time of Injection
- site chosen
- Medication and dose given
- condition of site post injection
- clients response to injection
- Any adverse effects or issues arising.
- Document date/time on medication chart.

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