

Check & Inject NY

Syringe Epinephrine Kit for BLS Providers



SKILLS VERIFICATION

Provider: _____

Evaluator: _____

Date: _____

Signature: _____

<u>Skill to be demonstrated:</u> Intramuscular Injection using Syringe Epinephrine Kit	Completed
Identifies patient having ANAPHYLACTIC reaction – verbalizes indications <ul style="list-style-type: none"> • Known exposure to allergen AND at least ONE of the following • Altered Mental Status • Respiratory Distress • Signs of Shock 	
Takes body substance isolation precautions prior to starting process <ul style="list-style-type: none"> • Student must demonstrate skill wearing gloves 	
Identifies proper site for injection	
Cleanses site appropriately	
Verifies the correct drug, the expiration date has not passed, and the contents clear	
Assembles the syringe and needle correctly	
Draws up proper amount of medication <ul style="list-style-type: none"> • 0.15 mg for patient < 30 kg • 0.30 mg for patient > 30 kg 	
Introduces needle at 90° angle to the injection surface	
Depress plunger to administers medication	
Withdraws needle and secures safety device	
Disposes of needle and syringe in proper container	
Covers injection site with adhesive strip	
Verbalizes need to observe patient for desired and adverse side effects	
Verbalizes proper documentation of medication administration	