

Royal Brompton Hospital

Home Intravenous (IV) therapy service





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This leaflet is a general guide to the Home Intravenous (IV) therapy service and intravenous (IV) medicine. It does not replace the need for personal advice from a qualified healthcare professional. Please ask us if you have any questions.

The Home Intravenous (IV) therapy service

Welcome to the Home Intravenous (IV) Therapy service. Home IV therapy allows patients to have treatment in their own homes. Many people prefer having IV therapy in their own homes rather than in hospital. It means they can be more independent, spend time with loved ones and continue with work or study.

This leaflet provides patients and carers with information about how to safely give IV therapy at home. The booklet complements the face-to-face training that our nursing teams provide and the videos on the Royal Brompton and Harefield hospitals website.





What is IV therapy?

IV therapy is medicine given intravenously (through the veins) straight into the bloodstream. IV therapy is sometimes called parenteral antibiotic therapy.

Different types of long thin flexible tubes called IV lines are used for IV therapy. The IV line chosen for your treatment will depend on your veins and how long you will need this medicine.

The IV line is inserted into your vein and is held in place by a dressing. Depending on your treatment the IV line will:

- stay in place for the whole of the IV medicine course
- or need to be changed when required

We will explain what will happen during your course of treatment.

When you have home IV therapy, you still need to come to the hospital for the first dose of medicine you have been prescribed.

During your visit to the hospital, a nurse will teach you or your carer how to give the IV medicine.

You will be asked to wait for at least one hour in hospital after being given the first dose. This is so we can check the medicine does not give you any side effects (also called adverse reactions).

If the nurse is confident that you have learned to safely give IV medicine at home, you will be discharged with your IV medicines.

Sometimes people need more time to learn how to give IV medicine. If this happens to you, your nurse will discuss the other options available.

When you go home

A member of your healthcare team will explain what will happen when you go home.

Once you complete your treatment, you will need to come back to the lung and heart day unit. At this appointment, you will have blood tests and be reviewed by the medical team. You may also be offered a physiotherapy appointment on the same day, if it's needed.

You can contact your clinical nurse specialist team if you have a concern at any stage of your treatment. See **Contact us** list on page 16.

Blood tests during your home IV therapy

If blood tests are needed for your IV medicine, we will discuss them with you. We will arrange an appointment for your blood tests in hospital or with healthcare services closer to your home.

If you need blood tests, it is **very important** that you have them at the right times. IV medicine blood tests are usually carried out to make sure that your dose is within the correct therapeutic (treatment) range.

If the medicine level is above the acceptable range, it could lead to kidney damage or hearing loss. If the medicine is below this range, the medicine will not be working as it should be.

If you feel unwell while having home IV therapy

If you feel unwell while having home IV treatment or develop new symptoms, stop the medicine, and contact your healthcare team for advice.



New symptoms could include:

- a headache
- temperature
- fever or shivering
- flushing (warmth and rapid reddening of your neck, upper chest, or face)
- feeling sick (nausea) or vomiting
- mild wheezing

If you have symptoms of a severe allergic reaction (anaphylaxis) such as:

- chest pain
- a rash
- pins or needles or tingling of lips
- swelling of the lips, tongue, or throat
- bluish discolouration of the lips, fingers, or toes
- wheezing, difficulty breathing or swallowing,
- or you collapse

Please note: some changes to skin colour may be harder to see on brown and black skin.

Stop taking the medicine immediately. Dial 999 and ask for an ambulance. Say that the emergency is ‘**anaphylaxis**’ (severe allergic reaction).

Remember:
Royal Brompton Hospital does not have an accident and emergency (A&E) department.

What to do if you have other concerns

Speak to a member of our team if you have any concerns. Please contact your clinical nurse specialist if, at any time, you do not want to continue with your home IV therapy. Or if you feel unable to cope with the treatment. We can discuss the different treatments available. See **Contact us** list on page 16.

How to deliver medicine through an IV line

When you visit the hospital, your nurse will teach you how to prepare and deliver medicine through an IV line. You will be given plenty of time to ask questions and practice giving your medicine. **Allow yourself sufficient time to learn this skill. It may take you several hours.**

It is very important that you know how to deliver medicine through an IV line.

Different types of IV lines

- A midline is a thin flexible tube (catheter) about 15 to 20cm long that is inserted into a vein in your upper arm. A midline can stay in place for up to 4 weeks. See picture on page 8.
- A peripherally inserted central catheter (PICC line) is a longer thin flexible tube (catheter) that is inserted into a vein on your upper arm. PICC lines can stay in place for up to 12 months. See picture on page 8.

PICC catheter

End of catheter

Catheter tail with cap

Midline catheter

End of catheter

Catheter tail with cap

- A Portacath is medical device that is put under the skin. It has two parts:
 1. A soft, thin hollow plastic tube (catheter) which is tunnelled under the skin. The tip of the catheter is positioned just outside the heart.
 2. A port or disc (2.5 to 4cm in diameter), which is placed in the chest and attached to the tube.

A Portacath can be left in place for months or years and used when needed. The port (or disc) is accessed with a special needle (called a Gripper or non-coring needle) using the Aseptic Non-Touch Technique (ANTT) technique.

Looking after your IV line

- The dressing needs changing every 7 days by a health professional or if it becomes loose, damp or soiled. Your clinical nurse specialist or the nurse training you will discuss when your dressing may need to be changed.
- The Bionector needs changing every 7 days using the Aseptic Non-Touch Technique (ANTT).
- Keep your IV lines clean and dry.
- Ensure all 4 sides of the dressing are attached to your skin.
- When you have a shower or bath cover your dressing with a waterproof plastic protector.

You can buy waterproof protectors to keep your arm dry when taking a shower from www.limboproducts.co.uk or other similar suppliers. We recommend that patients buy a waterproof protector.

- Do not allow the area where we put in the IV line and the tip of the line to sit in water. When you are having a bath, for example.
- You can move your arm as usual, but please avoid strenuous activities. Lifting heavy things or pets, for example.



A waterproof protector

How to change your Bionector (change every 7 days)

1. Open the Bionector packet, and remove the Bionector, without touching either end.
2. Connect with the 10ml normal saline flush to prime the Bionector.
3. Remove the old Bionector and connect the new Bionector without touching the ends.
4. Flush your line as you have been shown. Use a minimum of 10mls syringe.



A Bionector

Preventing large air bubbles in your IV line

Large air bubbles can cause serious complications if they get inside an IV line (see **air embolism** on pages 11 and 12).

To prevent large air bubbles getting into your IV line:

- always make sure your Bionector is in place and not damaged
- follow the correct technique when flushing your IV line to prevent air entering the IV line

Preventing infection

Before touching your IV line always wash your hands with soap and water.

Check the area where we put in the IV line every day for symptoms of infection. Contact your clinical nurse specialist if you see any symptoms of infection.

Symptoms of infection include:

- a high temperature (fever)
- redness or swelling near where the line is
- pain or tenderness in your arm, chest, neck, and shoulder
- any oozing from the entry site

Possible IV line complications

The IV line moves out of position

You may notice that the IV line looks longer than when it was first put in place. This may be caused by forceful flushing or handling of IV treatment, and very strenuous activities. To reduce this risk, you will have a device called a StatLock to ensure the line is held in place.

Possible symptoms that the IV line has moved out of position include:

- difficulties in flushing your line
- swelling in your arms
- sudden breathlessness and feeling lightheaded

If you experience any of these symptoms, please contact your clinical nurse specialist.

Air embolism or air in the line

One or more big air bubbles get inside the IV line and travel to the vein. Once inside the body, rarely they can block a blood vessel and block the blood supply to a part of the body. This is called an air embolism and needs to be treated immediately.



Possible symptoms of an air embolism include:

- breathlessness
- chest pain
- muscle or joint pains
- confusion
- passing out

Blood clot

A blood clot can form around and inside the midline. A blood clot needs to be treated immediately.

Symptoms of a blood clot may include:

- difficulty in flushing your IV line
- possible throbbing and cramping pain
- breathlessness
- chest pain
- swelling, redness and warmth of the area where the IV line is in place

If you have any of these symptoms contact your medical team or clinical nurse specialist. You may be asked to attend your local A&E with the letter provided by your team. Your IV line may be removed.

About my medicine

Here is some general guidance about giving medicine and details of your dosage. You will be given detailed step-by-step instructions on a separate information sheet. You can also watch videos on the home IV section of our website (see **More information** on page 18).

Check your medicine is correct before giving IV medicine. Do this by looking at the label/s on the medicine and details on your prescription.

Check these things:

- Is my name on the medicine?
- Is this the correct medicine?
- Is this the correct dose of medicine?
- The expiry date. Do not use the medicine if it is past the expiry date.
- Prepare all the equipment you need. For example, needles and diluents (mixing liquids).
- Check the time. Are you giving medicine at the correct time?



Your nurse will provide you with more information about the medicine you have been prescribed and write the details in the table below.

Name of medicine	What is this medicine for?	What dose needs to be given?	Times of doses

IV medicine can be given in different ways listed below. Your IV medicine will be delivered using (to be filled in by the nurse):

Method of giving treatment	Tick the right box
Pre-mixed syringes	<input type="checkbox"/>
Bolus (giving by injecting)	<input type="checkbox"/>
Ready to use infuser device	<input type="checkbox"/>
Adding medicines to IV saline bags	<input type="checkbox"/>
Infusing using gravity giving sets	<input type="checkbox"/>
Infusing using Sapphire infusion pump	<input type="checkbox"/>

Your nurse will provide you with training and a separate information sheet containing step-by-step instructions for giving your medicine.



Contact us

If you have any questions about your treatment or your IV line contact your nurse specialist or the vascular access team between **9am to 5pm, Monday to Friday**.

You can also call the ward or the lung and heart day unit where you were treated. Phone: **0330 128 8121**, and ask for bleep or extension:

Ward/department	Contact details
Lung and heart day unit	Bleep 1070 / extension 88308
Victoria ward	Extension 88064 / 84779
Foulis ward	Extension 84020 / 84070
Alexandra ward / Paul Wood ward	Extension 82500
Adult cystic fibrosis (CF) team CF clinical nurse specialist (CNS)	Extension 88065 Email: gstt.cfhomecare@nhs.net (Monday to Friday, 9am to 5pm)
Interstitial lung disease (ILD) team / Interstitial lung disease (ILD) CNS	Phone: 07891 583 141 Email: gstt.rbhildnurse@nhs.net (Monday to Friday, 9am to 5pm)
Host defence and primary ciliary dyskinesia (PCD) team	Extension 84862 HD email: gstt.hostdefence-rbh@nhs.net PDC email: gstt.adultpcd@nhs.net (Monday to Friday, 9am to 5pm)

Home IV physiotherapy	Extension 88088 (Monday to Friday, 9am to 5pm)
Adult registrar on-call (Out of hours)	Call switchboard and ask for bleep 7065 (24-hour service)
Specialist respiratory pharmacy team	Email: gstt.respiratorypharmacy- rbh@nhs.net (Monday to Friday, 9am to 5.30pm)
Baxter Healthcare	Phone: 0800 032 4894

Pharmacy medicines helpline

If you have any questions or concerns about medicines that you have received from us, please speak to the staff caring for you or contact our helpline.

Phone: **020 7188 8748** (Monday to Friday, 9am to 5pm)

Email: **gstt.mymedicines@nhs.net**

More information

See videos for more information on our Home Intravenous (IV) therapy service web page.

To access the videos, scan the QR code (right) with your smartphone or tablet.

Or visit our hospital web page using the link below:

www.rbht.nhs.uk/our-services/clinical_support/homeintravenous-iv-therapy-service



If you have concerns about any aspect of the service you have received in hospital and feel unable to talk to those people responsible for your care, call PALS on:

- Royal Brompton Hospital – 020 7349 7715
- Harefield Hospital – 01895 826 572

Or email gstt.rbhh-pals@nhs.net. This is a confidential service.

Royal Brompton Hospital
Sydney Street
London
SW3 6NP
Phone: 0330 12 88121

Harefield Hospital
Hill End Road
Harefield
Middlesex
UB9 6JH
Phone: 0330 12 88121

Website: www.rbht.nhs.uk

Royal Brompton and Harefield hospitals are part of Guy's and St Thomas' NHS Foundation Trust

Language and accessible support services

If you need an interpreter or information about your care in a different language or format, please contact the department your appointment is with.

