



The Importance Of Labeling Intravenous Tubing

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Introduction

In hospitalized adult patients, does using intravenous tubing labels compared to not using labels decrease medication errors and decrease waste?

One of the most common reasons of hospital errors occur during the use and administration of intravenous (IV) medications. Proper labeling directly impacts the rate of medication administration errors common across hospital settings (United Ad Label, 2017). Unlabeled tubing increases the risk for unnecessary waste and increases hospital expenses. The goal of proper tubing labeling is to reduce the potential risk for medication errors.

Current Evidence

During a multisite study by Schnock et al. consisting of 10 hospitals and 1164 medication administrations, 60% of infusions contained one or more errors (2017). Violations of IV labeling and tubing change policies (which vary between hospitals) accounted for approximately 65% of the observed mistakes (Schnock et al, 2017).



Unfortunately, there is no current evidence regarding unnecessary waste of IV tubing.

Clinical And Research Implications

The labeling of all medications, containers, and solutions is a risk-reduction activity consistent with safe medication management and is a 2017 National Patient Safety Goal (The Joint Commission, 2017).

Primary IV tubing is to be changed every 96 hours (4 days) (SMHC, 2018). Without labels, IV tubing could be unnecessarily discarded up to eight times in a 96 hour span. This is a waste management and cost issue.

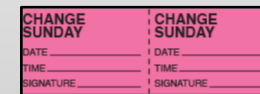
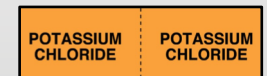
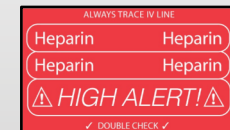
Future Research Trials Include:

- Identify benefits from proper tubing labels
- Impact of unlabeled tubing on hospital waste management
- Cost-effectiveness of labeling tubing to decrease unnecessary disposal

Clinical Recommendations

All IV tubing labels should be easily visible and accessible in the medication room. Directing staff with signs pointing to the labels could increase the use of labels.

IV LABELS HERE



Risk Reduction Strategies:

- Setting up infusions one at a time
- Label all infusions with type of medication, high alert (if applicable), and date of expiration
- Raising awareness of the risk of IV errors (Wollitz & Grissinger, 2014)