

FREQUENTLY ASKED IV QUESTIONS

How does IV therapy work?

Intravenous (IV) therapy is the delivery of fluids, blood, or medication directly into a patient's system through the veins. The main advantage of IV treatments is the ability to quickly introduce these fluids.

What is IV therapy used for?

4 out of 5 U.S. hospital patients receive an IV¹, making it one of the most commonly used treatments. It can be effective for a number of conditions including:

- > Dehydration
- > Pain management
- > Blood transfusions
- > Cancer treatments like chemotherapy

Is it safe?

80% of admitted U.S. hospital patients receive an IV, yet the current failure rate is 50%.² Although it is considered a routine procedure, like any medical procedure there are risks involved. Patients should talk to their medical team to make sure they are being monitored for possible complications like infiltration, phlebitis and infection.

Does it hurt?

1 out of every 4 Americans has a fear of needles³ and everyone's tolerance to pain is different, but most patients barely feel the placement of a standard IV. Some healthcare providers will pre-treat the skin with a very cold spray to numb the area and minimize discomfort.

Are there any complications?

Minor complications include mild discomfort, bruising, redness, itching, inflammation, and redness at or around the IV site. More serious complications include infiltration, phlebitis, and extravasation. Symptoms to look out for include severe inflammation (swelling), blistering, or a significant amount of pain near or around the IV placement site.

What if I think something is wrong with my IV?

If you experience symptoms such as pain, swelling and/or redness, be your own IV advocate and alert your medical team right away as these can be signs of more dangerous complications.

Who administers the IV?

Normally, Registered Nurses (RNs) administer a patient's IV treatment.

How often do I need it?

This depends on the type of treatment you're receiving and the type of IV being used. It also may differ based on the hospital protocol where you are receiving treatment.

What are the different types of IVs?

Peripheral IVs are most often given to surgical or emergency room patients and aren't typically left in for more than four days.

Central Lines are more invasive, leading directly into the heart and can be left in for several weeks/months.

Midline Catheters are a less invasive method than a PICC line for delivering contents or drawing blood samples. They can be left in the patient for more than five days but less than a month.⁴

Where can I learn more information?

www.myIV.com is the resource to empower and inform patients and caregivers on IVs and IV therapy. We provide answers to any questions related to IVs - from the most basic to complex.



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1 - Intravenous therapy: *BMJ Journals*. <http://pmj.bmj.com/content/80/939/1>

2 - Accepted but Unacceptable: peripheral IV catheter failure: *NIH*. <https://www.ncbi.nlm.nih.gov/pubmed/25871866>

3 - Fear of needles -- nature and prevalence in general practice: *NIH*. <https://www.ncbi.nlm.nih.gov/pubmed/19283260>

4 - When to use a midline catheter: *Nursing2017* http://journals.lww.com/nursing/Citation/2005/04000/When_to_use_a_midline_catheter.49.aspx