BD Saf-T-Intima™ for Subcutaneous Administration

Points to Practise

Acceptable subcutaneous cannula insertion sites

Avoid the following sites (see syringe pump policy):
- Oedematous areas
- Irradiated sites
- Bony prominences
- Broken skin
- Skin folds / sites near a joint and waistband area
- Localised disease (e.g. abdomen in peritoneal disease)

1. Preparation
   - Hold as shown and rotate the white safety shield to loosen the needle (Fig. 1).
   - Check if the needle bevel is facing up and that the catheter is not over the bevel before insertion.

2. Insertion
   - Textured side of wings must face skin.
   - Grasp the textured sides of wings and bring them together, pinching firmly (Fig. 2A).
   - Using thumb and index finger gently pinch the skin around selected site to identify the subcutaneous tissue (Fig. 2B).
   - Insert the full length of the catheter and needle through the skin at a 30°-45° angle (Fig. 2B).

3. Needle Removal
   - Lay the wings flat on the skin surface and pull the clear safety shield in a straight, continuous motion until the safety shield separates from the safety system (Fig. 3).
   - Place fingers as shown either side of needle (pressure over needle may interrupt needle recoil mechanism).
   - Replace with an end cap when not in use. **ALWAYS** remove clamp from the cannula.

4. Disposal
   - Discard the needle immediately in a puncture resistant, leak-proof sharps container.

5. Stabilisation
   - Secure the catheter and apply a sterile dressing per facility protocol.

HCS central stores order codes:
- Catheter; intimar saf-t yellow (MED65412)
- Connector; needlefree tko valve (MED63763)

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