



Management of Infiltration of Irritant Cytotoxic Agent Procedure

Procedure Number
CHC-CYT-005

Version Nos:
4

1. Purpose

This Procedure outlines the process to manage extravasation and minimise harm to patients during the infusion of vesicant and irritant Cytotoxic drugs.

2. Application

This Procedure is to be followed by all clinical staff throughout the West Coast District Health Board (WCDHB).

3. Definitions

For the purposes of this Procedure:

Cytotoxic medications is taken to mean toxic compounds known to have carcinogenic, mutagenic and/or teratogenic potential.

Oncology Nurse Specialist is an oncology trained nurse who is available to act as a resource for medical and nursing staff regarding the administration and management of Cytotoxic medications.

4. Responsibilities

For the purposes of this Procedure:

all *Clinical Staff* are required to:

- provide cares and treatments as per the requirements of this Procedure
- document all observations and cares and treatments given

5. Resources Required

This Procedure requires:

- i) Cytotoxic medication
- ii) Patient's clinical record

6. Process

- 1.00 Where infiltration of the irritant Cytotoxic medication is discovered, stop the infusion and attempt to aspirate any residual vesicant and blood in intravenous tubing, needle and skin site.
- 1.01 Inform medical staff immediately.
- 1.02 Remove the infusion needle.
- 1.03 Advise patient to elevate and rest limb for 48 hours to minimise swelling. Apply appropriate compresses to the area avoiding any undue pressure. Leave for 15 minutes.
- 1.04 Ensure patient has pain relief and possibly antihistamine cream prescribed.
- 1.05 Cytotoxic therapy should be completed through a new venous access device. Estimation of the lost amount through extravasation must be checked and documented. Notify the prescribing doctor as soon as possible. This may need to be re-prescribed. This will be the responsibility of the prescribing doctor.



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- 1.06 Follow incident reporting process and report to nurse in charge.
- 1.07 Document clearly all details of the extravasation and subsequent treatment in the patient's notes.
- 1.08 Reassure the patient, explaining that the site may remain sore for several days and that the area should be observed closely.
- 1.09 If an Outpatient they should be instructed to continue with compresses four times a day for two days. If there is any indication that the site of extravasation is deteriorating, i.e. any increased discomfort or significant change, such as peeling or blistering of the skin, this should be reported immediately to the Emergency/Outpatients Department.
- 1.11 If an Inpatient, compress treatment should be continued for 15 minutes four times a day for 48 hours. The patient should be monitored for pain, erythema, induration and necrosis. If present, report to medical staff. The status of the involved area should be documented until resolution occurs.
- 1.12 Arrange follow-up with the patient - they should be contacted daily for 4 days by an Oncology Nurse Specialist and the above assessments made.

7. Precautions And Considerations

- ➔ Where infiltration of irritant Cytotoxic medication is discovered, stop the infusion and attempt to aspirate any residual vesicant and blood in intravenous tubing, needle and skin site.
- ➔ Advise patient to elevate and rest limb for 48 hours to minimise swelling.
- ➔ Document clearly all details of the infiltration and subsequent treatment in the patient's notes.

8. References

The Cytotoxics Handbook, 1997, 3rd Edition, Radcliffe Medical Press.

Canterbury DHB Policy and Procedure Manual, Christchurch Hospital Vol F Fluid and Medication Management Section 15

9. Related Documents

WCDHB Oncology/Cytotoxic Procedures



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10. Guidelines

Identifying Whether Vesicant Is Non DNA Binding Or DNA Binding.

Description	Drug Names		Treatment
DNA – Binding Vesicant Drugs	Daunorubicin Idarubicin Amsacrine Doxorubicin Mithramycin Dactinomycin	Epirubicin Mitomycin C Dacarbazine Mustine Paclitaxel	Apply cold ice compress to area for 15 minutes q.i.d. for 48 hours avoiding any undue pressure.
Non DNA – Binding Vesicant Drugs	Vinblastine Vincristine Vindesine		e.g. Vinca Alkaloids Apply warm compress to area for 15 minutes q.i.d. for 24 hours avoiding any undue pressure.

Revision History	Version:	4
	Developed By:	Oncology Nurse Specialist
	Authorised By:	Chief Medical Advisor/GM - Operations
	Date Authorised:	December 2004
	Date Last Reviewed:	October 2008
	Date Of Next Review:	October 2010