

Niki T34[®] Syringe Driver



Syringe Sizes

2 ml to 50 ml: BD, Monoject, Braun, Terumo

Duration

1 minute to 5 days in 1 minute intervals
(not greater than 24 hours duration is recommended)

Alarms – audible and visual

- Occlusion
- End infusion
- End battery
- Load syringe
- Pump unattended
- Technical fault
- Near end infusion (15min from end)
- Syringe empty
- Low battery (15 minutes)
- Syringe dislodged



Syringe driver with motor driven linear actuator

General Principles¹

- Check manufacturer's guidelines and organisation's protocol regarding preparation and set-up for changing the device
- Use aseptic technique when preparing and setting up infusion
- Check microbiological stability, physical and chemical compatibility of drugs used
- Ensure patient and family/carer receive full explanation of how the device works and indications for use
- A prescription from a medical officer or appropriately credentialed nurse practitioner is required before administering any medication
- Use a Luer-Lok[®] syringe to prevent risk of disconnection; recommended minimum syringe size is 20 ml to reduce risk of incompatibility, adverse site reactions, and minimise effect of priming the line
- Use Teflon/Vialon cannula to reduce risk of site inflammation
- When changing extension set and/or cannula, prime line after drawing up prescribed medications, and before connecting to the patient

Prepared by the Centre for Palliative Care Research and Education in conjunction with Palliative Care Australia. Funded by the Australian Government Department of Health and Ageing.

1. Centre for Palliative Care Research and Education. Guidelines for subcutaneous infusion device management in palliative care (Second Edition). Brisbane, Queensland:Queensland Health;2010.

Selection, Preparation and Maintenance of Subcutaneous Cannula Insertion Site¹

- Site selection influenced by whether patient is ambulatory, agitated and/or distressed
- Select a site that is easily accessible eg. chest or abdomen, with a good depth of subcutaneous fat
- Select and use sites on a rotating basis
- Do not position cannula in areas that are:
 - Lymphoedematous or where lymphatic drainage may be compromised, e.g. in women who have had a mastectomy
 - Bony prominences or in close proximity to a joint
 - Inflamed or where there is broken skin
 - Sites of infection or tumour
 - Skin sites that have recently been irradiated
 - Where scarring is present or in skin folds
 - Wherever ascites or pitting oedema are present
- Site longevity varies from 1–14 days. Type of medication and type of cannula used will influence site longevity.

Subcutaneous Infusion Sites

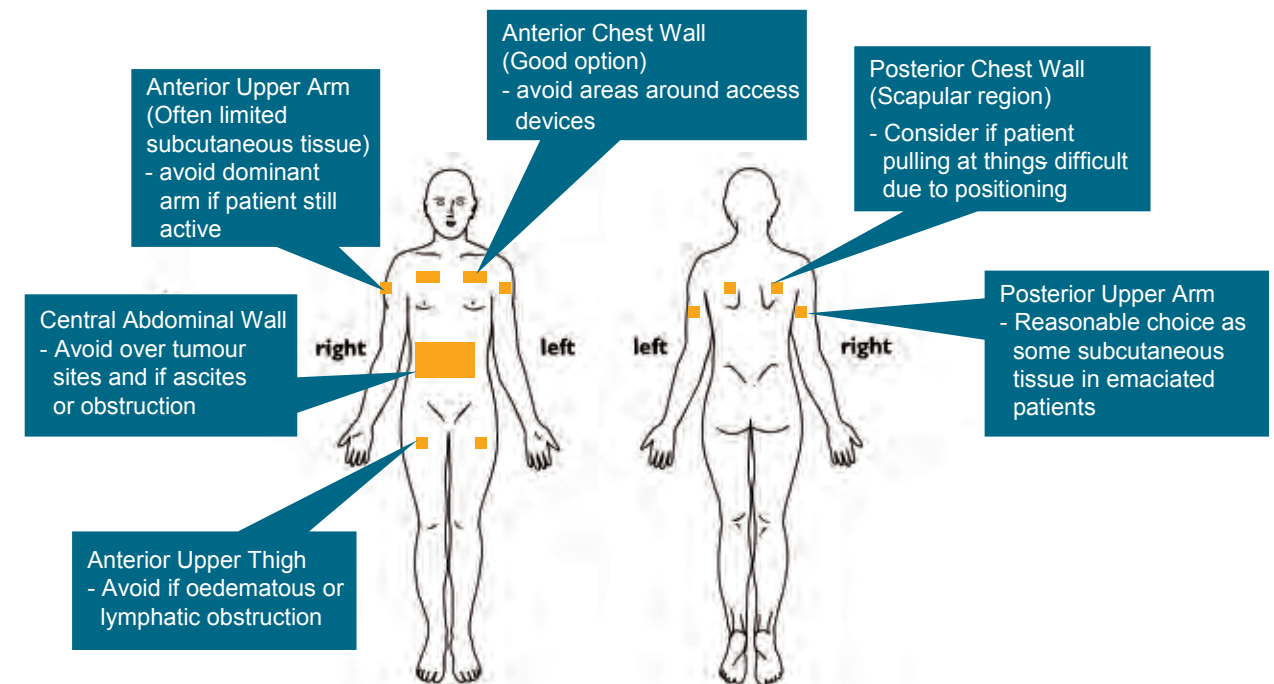


Image courtesy of Hume Region Palliative Care Consortium