

# PN Administration CHECKLIST



The **American Society for Parenteral and Enteral Nutrition** (A.S.P.E.N.) champions the best evidence-based practices that support parenteral nutrition therapy in varying age populations and disease states. The appropriate use of this complex therapy aims to maximize clinical benefit while minimizing the potential risks for adverse events.

The **purpose of this checklist** is to promote safe practices by nurses administering parenteral nutrition.

- Perform hand hygiene**
- Use sterile technique when manipulating vascular access device**
- Inspect PN container, check for:**
  - Integrity of container: no defects or leaks present
  - No visible particles or precipitates
  - No oiling, streaking, clumping, or separation
- Confirm correct formulation, check for:**
  - Patient's name on label
  - Match all components listed on the label against the PN order
  - Route of administration (central vs peripheral)
  - Documentation of proper VAD tip placement
  - Start time
  - Infusion rate with taper if appropriate
  - Beyond use date and time
- Verify patient identification**
  - Confirm patient identity using two identifiers
  - Inspect armband (not applicable in home care)
- Initiate PN infusion**
  - Use appropriate size filter on distal end of tubing
  - Spike container
  - Prime tubing
  - Set infusion pump settings using double check
  - Trace catheter system to point of origin
  - Disinfect needleless adapter on VAD hub
  - Connect PN to patient
  - Initiate PN infusion at prescribed rate
- Initiate monitoring protocol which includes:**
  - Patient response
  - Glucose monitoring
  - Serial weights
  - Intake and Output
  - Bloodwork
  - Vital signs