INSTRUCTIONAL CHECKLIST: Chemotherapy Take Down C-Series		
Four Steps for Performing Infusions:		
Practice good hand-washing 1 Prepare supplies 2 Disconnect and Flush 3 De-Access Port 4		
Medication infused: Home Infusion Nurse (name, #):		
Practice good hand-washingAlways wash hands when instructedSoap and water preferredHand sanitizer (optional)Wash for a full 20 seconds or rub until dry		
STEP 1: PRACTICE GOOD HAND-WASHING		
Always remember to WASH YOUR HANDS for a full 20 seconds.		
 Soap and water is always preferred. If soap and water are not available, hand sanitizer is acceptable. Make it a habit to wet your hands, apply soap, and lather for 20 seconds (hum the Happy Birthday song twice). If using hand sanitizer, rub a dime-sized amount between your hands until dry. Never wave or blow on your hands to speed up drying. Remember, if you are using gloves, you must still wash your hands. Washing your hands helps reduce your chance of infection. 		
Prepare suppliesAssess DeviceWASH HANDSGather suppliesWASH HANDSArrange SuppliesWASH HANDS		
STEP 2: PREPARE SUPPLIES		
Review what time your chemotherapy was started and validate what time you should be completed. Remain connected to your medication until the required infusion time has be reached.		
 Assess the device through the carrying bag to be sure if has completely collapsed and the center column is flat. In the event you have remaining medication to infuse, contact your pharmacist for direction. 		
U WASH YOUR HANDS.		
JOHNS HOPKINS Elastomeric Chemotherapy Take Down C-Series Page 1 of a		

MEDICINE

- Soap and water are preferred, hand sanitizer optional if soap and water are not available.
- Wash for 20 seconds (hum the Happy Birthday song twice) or rub with hand sanitizer until your hands are dry.

Clean your workspace using a cleaning solution (alcohol/sanitizing wipes or Lysol + paper towels).

Select a dry, hard work surface to set up your supplies.

□ WASH YOUR HANDS.

- Soap and water are preferred, hand sanitizer optional if soap and water are not available.
- Wash for 20 seconds (hum the Happy Birthday song twice) or rub with hand sanitizer until your hands are dry.

□ Collect supplies:

- 2 sets of Gloves (for your protection)
- ✤ 1 Chemotherapy Gown (for your protection)
- 1 Hazard Zip Bag (for gloves and gown post use)
- 1 Large Hazard Bag (for long term storage reusable)
- ✤ 4 Alcohol Pads (to clean your supplies and hub)
- 1 Saline Syringe (to clear your IV line and remove any leftover medication)
- 1 Chemo Sharps Container (to dispose of used C-series and tubing)
- 1 trash bag for garbage

Arrange your alcohol pads, wrapped prefilled syringes, medication bag and dial-a-flow tubing above your SASH mat in their respective location. Do <u>not</u> place any of these items on top of your SASH mat yet.

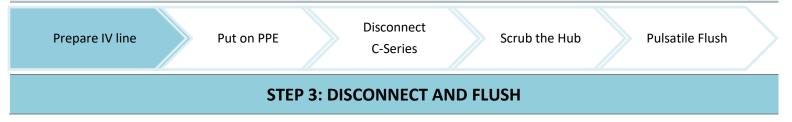
- ✤ "S" = Saline
- "A" = Administer or Antibiotic (includes your prefilled medication syringe)
- ✤ "S" = Saline
- ✤ "H" = Heparin

Prepare your supplies by unwrapping the saline syringe. Check the unwrapped syringes for any air bubbles. If there are air bubbles follow the below steps. Set the syringe above the second S on the SASH mat.

- Remove the protective cap from the syringe and discard.
- Hold the syringe with the end up and plunger at the bottom.
- Pull back on the syringe plunger slightly to break the seal. You will be able to see the air bubble in the syringe.
- Slowly push the plunger to let the air bubble out.
- Once the air is removed, set the syringe above the second S on the SASH mat.
- Arrange your trash bag for easy access, place chemo container within reach, place the alcohol pads in arms reach and the hazard bags should be ready for use at the end of our procedure.

□ WASH YOUR HANDS.

- Soap and water are preferred, hand sanitizer optional if soap and water are not available.
- Wash for 20 seconds (hum the Happy Birthday song twice) or rub with hand sanitizer until your hands are dry.





	Put on PPE (Personal Protective Equipment):
	 Chemotherapy gown should fit to cover all areas appropriately. Secure the ties. A family member can assist with securing all ties.
	Put on both sets of gloves one after the other. The gown cuffs should fit over the glove cuffs.
	Remove the C-Series from the carry bag and validate the infusion is complete. If completed, engage the clamps on the port needle tubing and the C-series tubing.
	The light blue thermo-regulator piece toward the end of the tubing is taped against your body. Carefully remove the tape from your body so that the connection from the chemo tubing to your port tubing is visible.
	Disconnect the C-series tubing from your port tubing by grasping the C-series tubing at the connection with one hand and the blue end cap on the port tubing with the other hand. Slowly unscrew the tubing from the end cap careful not to remove the blue end cap from the port tubing.
	Place the C-series and tubing in the chemo sharps container.
	'Scrub the hub' of your IV line with a NEW alcohol pad for at least 15 seconds. (scrub the red smart site)
	 Use an alcohol wipe to scrub the end of the port tubing. Once you have cleaned the hub, hold the hub with two fingers. Keep the hub from touching anything else.
	If your hub touches anything, wash your hands and scrub the hub again with a new alcohol pad.
	 Flush your IV line with saline ("pulse flush"): Hold the hub in one hand. Grasp the saline syringe in the other. Screw the saline syringe onto the blue end cap using a "push and twist" motion. It's like putting a key into an ignition. Once the syringe is connected, open the clamp on your IV line and slowly push 1 to 2 mL of saline at a time. Stop and push 1 to 2 mL more. Repeat this "pulse flush" until the saline syringe is empty. Flushing this way each time helps keep your IV line from getting clogged. Disconnect the syringe from the blue end cap and discard in the regular trash. If you have trouble flushing your IV line, make sure the clamp on your IV line is open. If your clamp is open and
	you are still having trouble, stop and call your home infusion nurse.
Deaccess PortRemove the port dressingSecure the portRemove needlePlace 	
STEP 4: DE-ACCESS PORT	
	Expose the port needle insertion site and dressing. Carefully remove the dressing tape around and over the port needle. Be careful not to pull the needle out during the process.
	Remove the needle:
	 If you have yellow or black plastic wings, pinch the wings together with one hand, while stabilizing port with the other hand, and this will pop out the needle. Discard the needle in the white chemo bucket. If you have a clear or white plastic port needle, hold the white circle against your chest and pull the nub away from the chest. This will remove the needle. Discard the needle in the white chemo bucket.

JOHNS HOPKINS

Elastomeric Chemotherapy Take Down C-Series | Page 3 of 4

Remove PPE (Personal Protective Equipment):

- Remove your gown first. As you take the gown off, fold the outside inward to keep the inside of the gown on the outside. Be careful not to ruffle the gown as to disseminate particle into the air for inhalation. Place the rolled up gown inside the clear hazard bag.
- Remove each pair of glove one pair at a time pealing the gloves inside out as your remove them. Place inside the clear hazard bag and close the bag.
- Place the clear hazard bag in the larger hazard bag and store out of the way or people.

□ WASH YOUR HANDS.

- Soap and water are preferred, hand sanitizer optional if soap and water are not available.
- Wash for 20 seconds (hum the Happy Birthday song twice) or rub with hand sanitizer until your hands are dry.

□ Congratulations! You have successfully disconnected and de-accessed!

Make a habit to:

 \Box Wear the PPE provided for your protection.

□ WASH YOUR HANDS for at LEAST 20 seconds.

- Soap and water preferred (use hand sanitizer if soap or water are unavailable).
- Hum the Happy Birthday song twice.

 \Box Store the large hazard bag in a location away from the direct path of family or animals. The used PPE is considered contaminated with trace materials.

 $\hfill\square$ Contact the agency for any spill or concerns related to your medication.

Disclosure: This project was funded under grant number 1K08HS025782-01 from the Agency for Healthcare Research and Quality (AHRQ), U.S. Department of Health and Human Services (HHS). The authors are solely responsible for this document's contents, findings, and conclusions, which do not necessarily represent the views of AHRQ. Readers should not interpret any statement in this report as an official position of AHRQ or of HHS. None of the authors has any affiliation or financial involvement that conflicts with the material presented in this report.

