

INTRAOSSSEOUS ACCESS

Intraosseous Access procedure:

Proximal tibia (anteromedial surface): 1-3cm below and 1cm medial to the tibial tuberosity

Distal femur: 3cm above lateral condyle in the midline

Distal tibia (medial): 1-3cm above the medial malleolus on the surface of the tibia near the ankle

Humerus

Anterior or posterior iliac spine

- universal precautions
- assembly equipment (Cook IO, EZIO drill)
- immobilize patient (patient unconscious or unaware)
- stabilize insertion area
- cleans the skin with antiseptic
- leave stylet in the needle during insertion (prevents the needle from becoming clogged)
- insert needle through skin over the insertion site
- use twisting motion at 90 degrees with gentle but firm pressure
- continue inserting the needle through the cortical bone until there is a sudden decrease in resistance (needle entering the marrow space)
- *it should stand without support
- remove the stylet and attach a syringe
- aspirate the bone marrow/blood if possible
- attach a t-connector primed with normal saline and flush the site with 10ml of normal saline (monitor for swelling at insertion site and on the posterior side also)
- *if swelling occurs consider identifying another location
- stabilize the IO, place tape over flange
- tape IV tubing to skin to avoid tension on IO needle
- monitor site for signs of swelling and needle displacement