## National Patient Safety Goal #13: Patients'Active Involvement in Their Own Care: Preventing Chemotherapy Extravasation

Lisa Hartkopf Smith, RN, MS, AOCN®, CNS

The Joint Commission National Patient Safety Goal #13 is to encourage patients' active involvement in their own care as a patient safety strategy (Joint Commission, 2009). The U.S. Department of Health and Human Services, Agency for Health Care Research and Quality (2009) agrees that the single most important way to prevent errors is for patients to be active members of the healthcare

The most important aspect of managing chemotherapy extravasation is prevention. The Oncology Nursing Society has developed guidelines to prevent extravasation, including patient education.

team. For patients receiving vesicant chemotherapy, playing an active role in promoting safety can help prevent chemotherapy extravasation.

Vesicant extravasation is one of the most feared complications of chemotherapy (Schrijvers, 2003) because of resultant tissue destruction and potential long-term complications.

The most important aspect of managing chemotherapy extravasation is prevention (Schrijvers, 2003). The Oncology Nursing Society (Polovich, White, & Kelleher, 2005) has developed guidelines to prevent extravasation, including patient education. The National Quality Forum (2006) has developed a set of 30 safe hospital practices to reduce the risk of patient harm. A key practice that focuses on patient education is Safe Practice #2, which states that healthcare professionals should ask each patient to "teach back" in his or her own words important information about the proposed treatment or procedure.

Information to teach patients to prevent harm from extravasation includes: (a) the risk of extravasation, (b) signs and

> symptoms to report, (c) interventions to prevent dislodgement of IV access, and (d) the availability of central venous access devices if peripheral access is poor (Schulmeister, 2008). Examples of teaching handouts that include this information are depicted on the next page.

By ensuring that patients understand information to prevent extravasation, such as the patient education sheets in appendices 1 and 2, nurses can empower patients to help prevent and detect harmful chemotherapy extravasation.

Author Contact: Lisa Hartkopf Smith, RN, MS, AOCN<sup>®</sup>, CNS, can be reached at lsmith2@ohio health.com, with copy to editor at CJONEditor@ ons.org.

## References

- Joint Commission. (2009). Standards improvement initiative. Retrieved January 28, 2009, from http://www.jointcommission .org/NR/rdonlyres/D619D05C-A682-47 CB-874A-8DE16D21CE24/0/HAP\_NPSG\_ Outline.pdf
- National Quality Forum. (2006). Safe practices for better bealthcare: 2006 update. Retrieved January 28, 2009, from http:// www.qualityforum.org/pdf/reports/safe\_ practices/txspexecsummarypublic.pdf
- Polovich, M., White, J.M., & Kelleher, L.O. (Eds). (2005). Chemotherapy and biotherapy guidelines and recommendations for practice (2nd ed.). Pittsburgh, PA: Oncology Nursing Society.
- Schrijvers, D.L. (2003). Extravasation: A dreaded complication of chemotherapy. Annals of Oncology, 14(Suppl. 3), iii26-iii30.
- Schulmeister, L. (2008). Case and commentary: Chemotherapy extravasation. Retrieved January 28, 2009, from http://www.webmm.ahrq.gov/case .aspx?caseID=169
- U.S. Department of Health and Human Services, Agency for Health Care Research and Quality. (2009). 20 tips to help prevent medical errors. Patient fact sheet. Retrieved January 28, 2009, from http:// www.ahrq.gov/consumer/20tips.htm

Lisa Hartkopf Smith, RN, MS, AOCN<sup>®</sup>, CNS, is an oncology clinical nurse specialist at Riverside Methodist Hospital in Columbus, OH. Mention of specific products and opinions related to those products do not indicate or imply endorsement by the *Clinical Journal of Oncology Nursing* or the Oncology Nursing Society.