

# Intramuscular (IM) Injection

**OBJECTIVE:** To administer an intramuscular (IM) drug to dorsogluteal region.

MATERIALS: IM drug, syringe, clean gloves, alcohol swab, sterile gauze/cotton, adhesive tape.

D: Appropriately done PD: Partially done ND: Not done/Incorrectly done

1. Introduce yourself to the patient. 2. Confirm patient's ID. 3. Explain the procedure and reassure the patient. 4. Get patient's consent. 5. Wash hands. 6. Prepare the necessary materials. (Medication should be drawn up into the syringe beforehand and expiration dates checked.) 7. Check the doctor's order with the drug to be administrated to ensure correct drug and dosage 8. Put on a pair of clean gloves. 9. Position the patient in a prone position and expose the gluteal (buttock) region (maintain the patient's privacy and dignity).  The procedure 10. Identify the injection site*. 11. Clean the site with an alcohol swab using an expanding circular motion or a single wiping from distal to proximal. Do this 3 times with separate swabs. Let it air dry. 12. Take the syringe and open its cap. 13. Hold the syringe (from its barrel) like a pencil or dart with your dominant hand and place a sterile cotton wool between 4th and 5th finger. 14. With your non-dominant hand, taut the gluteal muscle at the site of injection. 15. Insert the needle at a 90 degree angle to the patient's skin in a quick, firm motion. 16. With your non-dominant hand, pull on the syringe's plunger to ensure that you have not entered a blood vessel. (If you aspirate blood, withdraw the needle and repeat the procedure at another site with a new needle.) 17. Inject the drug very slowly. 18. With your non-dominant hand, take the cotton wool and quickly remove the needle while applying pressure with the cotton wool, maintain gentle pressure for a minute. 19. Observe your patient at least 15 min. for any possible adverse effects of the injected drug.  After the procedure 20. Dispose of sharps and wash maste material according to infection control standards. 21. Ensure that the patient is comfortable. 22. Remove the gloves and wash hands.		D: Appropriately done PD: Partially done ND: Not o	D	PD	ND
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1 <b>23.</b> 1 Document the procedure.	23.	Document the procedure.			

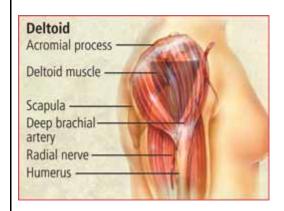
### Identifying injection sites\*

Drug injection sites vary with the administration route. The instructions below describe proper identification of injection sites for I.M. drugs.

You can administer an I.M. injection into the muscles shown below. In these illustrations, specific injection sites are shaded.

### **Deltoid site**

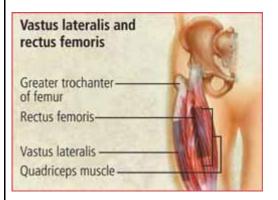
- Locate the lower edge of the acromial process.
- Insert the needle 1" to 2" below the acromial process at a 90-degree angle.



### Vastus lateralis and rectus femoris sites

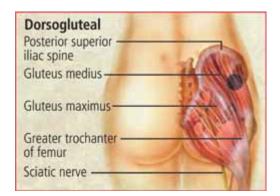
 Find the lateral quadriceps muscle for the vastus lateralis, or the anterior thigh for the rectus femoris.

Insert the needle at a 90-degree angle into the middle third of the muscle, parallel to the skin surface.



### **Dorsogluteal site**

- Draw an imaginary line from the posterior superior iliac spine to the greater trochanter.
- Insert the needle at a 90-degree angle above and outside the drawn line.

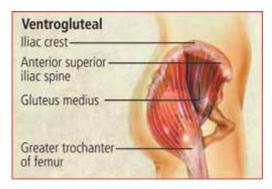


You can administer a Z-track injection through this site. After drawing up the drug, change the needle, displace the skin lateral to the injection site, withdraw the needle, and then release the

### Ventrogluteal site

- With the palm of your hand, locate the greater trochanter of the femur.
- Spread your index and middle fingers posteriorly from the anterior superior iliac spine to the furthest area possible. This is the correct injection site.

Remove your fingers and insert the needle at a 90-degree angle.



<sup>\*</sup> http://books.mcgraw-hill.com/medical/NursesDrugHandbook/safe\_drug\_admin/identifying\_injection\_sites/ldentifyingInjectionSites.php



## **Subcutaneous (SC) Injection**

**OBJECTIVE:** To administer a subcutaneous (SC) drug to upper arm region.

**MATERIALS:** Subcutaneous drug, syringe, clean gloves, alcohol swab, sterile gauze, adhesive tape.

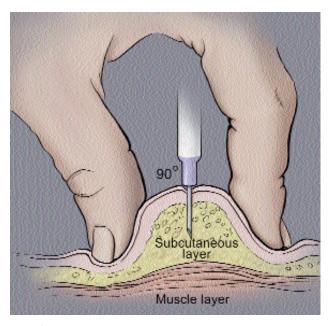
D: Appropriately done PD: Partially done ND: Not done/Incorrectly done

	STEP/TASK	D	PD	ND
	Preparation			
1.	Introduce yourself to the patient.			
2.	Confirm patient's ID.			
3.	Explain the procedure and reassure the patient.			
4.	Get patient's consent.			
5.	Wash hands.			
6.	Prepare the necessary materials.			
	(Medication should be drawn up into the syringe beforehand and expiration dates checked).			
7.	Check the doctor's order with the drug to be administrated to ensure correct drug and			
	dosage.			
8.	Put on a pair of clean gloves.			
9.	Position the patient in a sitting position and expose her/his upper arm.			
	(Maintain the patient's privacy and dignity).			
	The procedure			
10.	, , ,			į
	that has not been used frequently).			
11.				
	from distal to proximal. Do this 3 times with separate swabs. Let it air dry.			
12.	Take the syringe and open its cap.			
13.	, , , , , , , , , , , , , , , , , , , ,			
	sterile gauze between 4 <sup>th</sup> and 5 <sup>th</sup> finger.			
14.				
L_	pinch up*.			
15.				
16.	, 5 1 5			
	With your non-dominant hand, pull on the syringe's plunger to ensure that you have not			
	entered a blood vessel. (If you aspirate blood,			
17	withdraw the needle and repeat the procedure at another site with a new needle.)			
18.	Inject the drug very slowly.  With your non-dominant hand, take the cotton wool and quickly remove the needle while			
10.	applying pressure with the sterile gauze, maintain gentle pressure for a minute.			į
19.				
19.	After the procedure			
20.	Dispose of sharps and waste material according to infection control standards.			
21.	Ensure that the patient is comfortable.			
22.	Remove the gloves and wash hands.			
23.	Document the procedure.			
23.	bocament the procedure.			

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## Identifying subcutaneous (SC) injection sites\*

Drug injection sites vary with the administration route. The instructions below describe proper identification of injection sites for subcutaneous (SC) drugs. Subcutaneous injections can be given in the arms, legs, or abdomen -shown below. In these illustrations, specific injection sites are shaded.

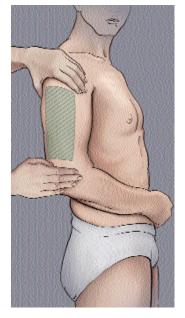


**Fig.1\*:** A subcutaneous injection into the fatty layer of tissue (pinched up to give the injection) under the skin.

### Arm

To locate injection sites on the arms, fold one arm across the chest. Place your hand on the shoulder and draw an imaginary line below your hand. Place another hand on the elbow. Draw an imaginary line down the outer side of the arm and down the center front of the arm, starting at the elbow. The area inside these imaginary lines is where injections are given

(If you are injecting imagine the hand placement.)



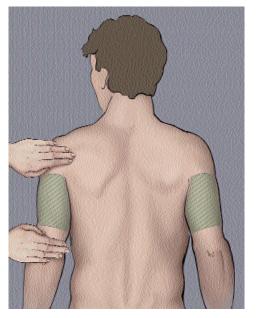


Fig.2\*: Injection sites on the side and on the back of the arm

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### **Thigh**

To locate injection sites on the thighs, sit down, place your hand above the knee, and draw an imaginary line above it. Place your hand at the uppermost part of the thigh and draw an imaginary line below your hand. Draw an imaginary line down the outer side of the leg and down the center front of the leg. The area within these imaginary lines is where injections may be given.

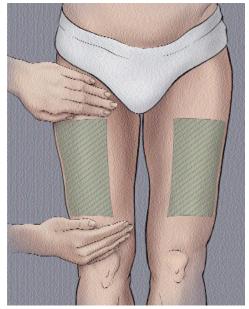
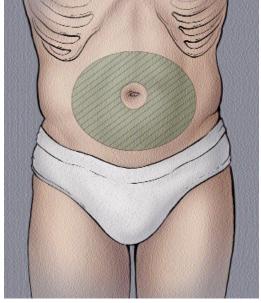


Fig.3\*: Injection sites on the front of the thigh.

### **Abdomen**

To locate injection sites on the abdomen, place your hands on the lower ribs and draw an imaginary line them. Use this area below your hands for injections, as far around as you can pinch up fatty tissue. use a 1inch (2,5 cm) area around the navel.



**Fig.4\*:** Injection sites on the abdomen.

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<sup>\*</sup> www.cc.nih.gov/ccc/patient education/pepubs/subq.pdf