Abstract
Reliable securement of peripheral venous cannulae (PVC) is an important factor in their maintenance. This audit in a district general hospital compares the occurrence of PVC restarts between a 3-month period in 2010 and the same 3 months in 2011. The only difference in the PVC care bundle between these dates was the implementation of an advanced securement dressing for cannulae in 2011. Results show a significant increase in cannulae attaining the maximum local protocol duration of 72 hours during 2011. Also, restarts owing to dressing influenced factors (dislodgement, infiltration and leakage) were significantly lower in 2011 when the new dressing was used. The total number of PVC restarts during the comparative audit periods was 9% lower in 2011 compared with 2010. This data suggests that better PVC securement is leading to an overall reduction in PVC insertions but further evidence is required to support this conclusion.