

Venous Infusion Extravasation Risk

This is an estimate of risk for phlebitis or local tissue injury due to extravasation from any intravenous infusion device. Risk derived from available evidence, CCHMC data and CCHMC expert opinion, subject to review and change as further evidence becomes available.

For Treatment of Extravasation, Refer to CCHMC Policy P&T II-112

This does not apply in situations of emergency medical treatment.

If a medication is not on this list, please refer to the CCHMC formulary or contact pharmacy (6-4291) for information

Red

Higher Risk

Acyclovir
Amiodarone
Caffeine Citrate
Calcium (*all salt forms*)
Dextrose > 12.5%
Doxycycline
Esmolol
Mannitol 20% & 25%
Promethazine
Potassium >60 mEq/L
Sodium bicarbonate \geq 3%
Sodium chloride \geq 3%
TPN > 950 mOsm/L
Vasopressors such as Dopamine

Antineoplastic Medications

Extravasation treatment:

Refer to the Hazardous Medication Procedure

HM-Pro-003 & HM-Pro-006

Yellow

Intermediate Risk

Acetazolamide
Allopurinol
Amikacin
Amphotericin B (conventional)
Arginine
Ciprofloxacin
Dextrose 10% to \leq 12.5%
Diazepam
Erythromycin
Ganciclovir
Lorazepam
Midazolam
Morphine
Ondansetron
Nafcillin
Iodine based (CT) Radiology Contrast
Phenobarbital
Phenytoin
Potassium \leq 60 mEq/L
TPN \leq 950 mOsm/L
Vancomycin

Green

+ Lower Risk

Aminophylline
Amphotericin B Liposomal
Ampicillin
Ampicillin/Sulbactam
Cefazolin
Cefotaxime
Ceftazidime
Ceftriaxone
Cefuroxime
Clindamycin
D5LR
Dextrose < 10%
Fentanyl
Fosphenytoin
Furosemide
Gadolinium Based (MRI) Contrast
Gentamicin
Heparin
Imipenem
IVIG
Lactated Ringers
Lipids
Magnesium sulfate (bolus)
Meropenem
Methylprednisolone
Normal saline
Pentamidine
Piperacillin

NOTE:
No intravenous infusate is "safe".
Gross extravasation, even of normal saline, may result in serious harm including compartment syndrome, causing ischemia and loss of tissue or permanent loss of limb function.

Piperacillin/tazobactam
Ticarcillin
Ticarcillin/clavulanate
Tobramycin

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