<table>
<thead>
<tr>
<th>Date__________</th>
<th>K-Card PIVIE</th>
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<td><strong>K-Card PIVIE</strong></td>
<td><em>Identify a patient with an intravenous medication infusing for at least an hour.</em></td>
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1. **Observe TLC assessment for appropriate TOUCH**
   - RN physically palpates the PIV site above, below, and dependent surfaces where fluid may accumulate (e.g., palm of hand for top of hand PIV).

2. **Observe TLC assessment for appropriate LOOK**
   - RN inspects the site and dependent surfaces of the extremity.

3. **Observe TLC assessment for appropriate COMPARE**
   - RN assesses whether the PIV site is the same size as the other extremity.

4. **Observe PIV dressing/securement**
   - Securement dressing is dry and intact/occlusive and site is visible; use of joint stabilization board if indicated (i.e., at or near joint, unable to independently hold arm straight).

5. **Verify TLC assessment documentation**
   - Documentation: "Please show me where the PIV assessment is charted."
     - Look at 2-hour window for 2 documented PIV assessments within 75 minutes of each other; real time documentation should occur within 2 hours of the physical assessment.

6. **Verify knowledge of PIVIE notification and assessment process**
   - Interview: "What do you do if you discover a PIVIE?"
     - Stop medication(s), leave catheter in place, elevate extremity, and refer to policy
     - Notify Vascular Assess Team/NICU shift leader, and MD
     - Assess and document on PIVIE every 1 hour x2 and then every 4 hours until resolved

7. **Verify patient and family engagement**
   - Interview patient/family: "Have you received education on the importance of your healthcare team checking the IV every hour using Touch, Look, Compare?"

**Reliability Criteria - Card is GREEN if:**
- All items are in compliance

**Follow-Up:**
- Give in the moment praise for keeping the patient safe.
- Insert card into slot with green side showing and document compliance and opportunities on K-Card Daily Results form

**Reliability Criteria - Card is RED if:**
- One or more items are non-compliant

**Follow-Up:**
- Give in the moment coaching and ensure RN addresses non-compliant item(s).
- Insert card into slot with red side showing and document compliance and opportunities on K-Card Daily Results form