

Phlebitis should be documented using a uniform standard scale for measuring grade and severity. Any incidence of phlebitis greater than grade 2 should be reported to the physician and other appropriate healthcare personnel. Ongoing observation of sites should continue for 48 post removal to detect post-infusion phlebitis. All patients with an intravenous access device should have the IV site checked every shift for signs of infusion phlebitis. The subsequent score and action(s) taken (if any) must be documented.

SITE OBSERVATION	SCORE	STAGE/ACTION
IV site appears healthy	0	No signs of phlebitis OBSERVE CANNULA
One of the following signs is evident:  • Slight pain near the IV site OR  • Slight redness near IV site	1	Possibly first signs of phlebitis OBSERVE CANNULA
Two of the following are evident:  • Pain at IV site • Redness	2	Early stage of phlebitis RESITE CANNULA
ALL of the following are evident:  • Pain along path of cannula  • Redness around site  • Swelling	3	Medium stage of phlebitis RESITE CANNULA CONSIDER TREATMENT
ALL of the following are evident and extensive  • Pain along path of cannula  • Redness around site  • Swelling  • Palpable venous cord	4	Advanced stage of phlebitis Or the start of thrombophlebitis RESITE CANNULA CONSIDER TREATMENT
ALL of the following are evident and extensive  • Pain along path of cannula  • Redness around site  • Swelling  • Palpable venous cord  • Pyrexia	5	Advanced stage thrombophlebitis INITIATE TREATMENT RESITE CANNULA
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