Queensland Paediatric Emergency Care

Skill Sheets

Intramuscular Injection

Infants and children may require an intramuscular injection for a variety of reasons, such as intramuscular antibiotics or routine vaccinations. Paediatric intramuscular injections must be administered into muscles large enough to accommodate the medication and avoid major nerves or blood vessels. All injections require consent from the caregiver. For most medications, verbal consent will suffice. Immunisations must have documented written consent.

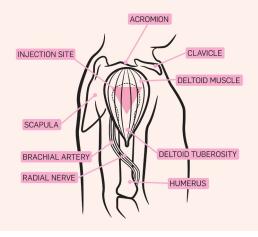


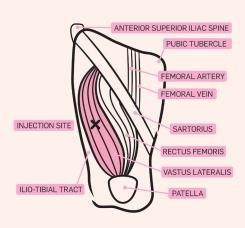
Guide to maximum volume of to be injected into muscular tissue.

Muscle Group		Birth to 18 months	18 months to 3yrs	3 - 6 years	6 - 15 years	> 15 years
	Vastus Lateralis	o.5 mL	1 mL	1.5 mL	1.5 - 2mL	2-2.5 mL
	Deltoid	Not Recommended	0.5ml (only if vastus lateralis unavailable)	0.5 mL	0.5 mL	1 mL

For information on anatomical markers used to identify the Vastus Lateralis and Deltoid injection sites:

<u>Australian Immunisation Handbook: Vastus Lateralis injection site on the anterolateral thigh</u>
<u>Australian Immunisation Handbook: Deltoid injection site</u>









2

PREPARE

Prepare medication according to instructions in the relevant medication preperation guide.



3 PROCEDUR

Position the child to allow for access to the appropriate muscle site (see table from page 1).



Clean the skin with an alcohol wipe. Wait for the skin to dry.



With the injecting needle, pierce the skin at an angle of 90 degrees. Inject the medication into the muscle.



6

Remove and discard needle and syringe into sharps container.



7

Apply dressing to injection site.



It is recommended that filter needles are used to draw up medications in glass vials.

Lidocaine (lignocaine) may be used as the diluent for some medications if compatible. It must be ordered by the medical officer.

It is **not** recommended to aspirate needle on insertion.

The online version of the <u>RCH Paediatric Injectable</u> <u>Guideline</u> provides directions for the preparation of intramuscular medications. The hard copy does not.



ALERT

Always check for allergies prior to medication administration.

Seek the prompt advice of a senior clinican if child displaying any adverse effects suggestive of anaphylaxis. These include but are not limited to: facial swelling, vomiting and rash. Refer to the <u>Allergy and Anaphylaxis</u> <u>Guideline</u> for management of anaphylaxis.

Tips in Children

- Topical anaesthetics can be used in advance to minimize procedural discomfort.
- To minimise discomfort, consider the use of Sucrose 24% in infants. A medical order and parental consent is required prior to use. At some sites Sucrose 24% is a nurse initiated medication check your local policy or procedure. See the Sucrose 24% Skill Sheet for more information. If the solution amount is greater than the recommended volume the muscle can take (see table on page 1), the volume may need to be adminstered across two seperate sites in two seperate needle and syringes.





For further information:

Information on Intramuscular Medication Preparation:

The Australian Immunisation Handbook - Administration of Vaccines

Australian Medicines Handbook: Children's Dosing Companion (QH only)

CHQ Procedure: Medication Administration (QH only)

RCH: Paediatric Injectable Guidelines (QH only)

Clinical Guidelines, Procedures & Forms:

Queensland Paediatric Emergency Care Guideline: Allergy and Anaphylaxis Guideline

Queensland Paediatric Emergency Care: Adrenaline Skill Sheet (in production)

CHQ Immunisation Consent Form

CHQ Pre-Vaccination Screening Checklist

CHQ Tetanus Prophylaxis in Wound Management Guideline (QH only)

Video:

Paediatric Intramuscular Injection

References:

Australian Technical Advisory Group on Immunisation (ATAGI). (2022) Administration of vaccines. The Australian Immunisation Handbook. Accessed Febraury 15, 2023 from https://immunisationhandbook.health.gov.au/contents/vaccination-procedures/administration-of-vaccines.

Australian Technical Advisory Group on Immunisation (ATAGI). (2018) Figure. Figure. Anatomical markers used to identify the deltoid injection site. The Australian Immunisation Handbook. Accessed Febraury 15, 2023 from https://immunisationhandbook.health.gov.au/resources/figures/figure-anatomical-markers-used-to-identify-the-deltoid-injection-site.

Australian Technical Advisory Group on Immunisation (ATAGI). (2018) Figure. Vastus lateralis injection site on the anterolateral thigh. The Australian Immunisation Handbook. Accessed Febraury 15, 2023 from https://immunisationhandbook.health.gov.au/resources/figure-vastus-lateralis-injection-site-on-the-anterolateral-thigh.

Children's Health Queensland Hospital and Health Service. (2022, July 25). Medication Administration. Accessed Febraury 15, 2023 from https://qheps.health.qld.gov.au/ data/assets/pdf file/0015/2122224/proc 01039.pdf.

Children's Health Queensland Hospital and Health Service. (2021, November 29). Pharmacological Procedural Pain Management. Accessed Accessed February 15, 2023 from https://qheps.health.qld.gov.au/ data/assets/pdf file/0031/2372755/proc-00303. pdf.

Hockenberry, M. & Wilson, D. (2018). Wong's Nursing Care of Infants and Children. (11th ed.) St Louis: Mosby.

Plover, C. (2021). Paediatric Injectable Guidelines. 2021 Ed. The Royal Children's Hospital. Accessed February 15, 2023 from https://pig.rch.org.au/monographs/.

This Queensland Paediatric Emergency Skill Sheet was developed and revised by the Emergency Care of Children working group Initial work was funded by the Queensland Emergency Department Strategic Advisory Panel.





Skill Sheet Legal Disclaimer

The information contained in these Queensland Paediatric Emergency Care skill sheets is for information purposes only. It was developed to inform emergency nursing care, but can also be applied by other clinicians acting within their scope of practice. The information has been prepared using a multidisciplinary approach with reference to the best information and evidence available at the time of preparation. No representation, warranty or assurance is given that the information is entirely complete, current, or accurate in every respect. The skill sheets are not a substitute for clinical judgement, knowledge and expertise, or medical advice. Variation from the skill sheets, taking into account individual circumstances may be appropriate. This does not address all elements of standard practice and accepts that individual clinicians are responsible for the following:

- Providing care within the context of locally available resources, expertise, and scope of practice.
- Supporting consumer rights and informed decision making in partnership with healthcare practitioners including the right to decline intervention or ongoing management.

- Advising consumers of their choices in an environment that is culturally
 appropriate and which enables comfortable and confidential discussion.
 This includes the use of interpreter services where necessary.
- Ensuring informed consent is obtained prior to delivering care.
- Meeting all legislative requirements and professional standards.
- Applying standard precautions, and additional precautions as necessary, when delivering care.
- Documenting all care in accordance with mandatory and local requirements.

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