

SUBCUTANEOUS INJECTION (SC)						
Document Owner:	E. Levasseur	Program/Service Area:	Centre for Prehospital Care	Issue Date: April 2009		
Revision Date	November 2023					
Approval:	Chair, CPC Program Council : Corey Petrie		Frequency: As requi	red.		
Signature:	Comp feter					

Purpose: To ensure a consistent standardized practice for administering medications via subcutaneous injection

	Content	Details / Visual Component
1.	Ensure that the patient qualifies for the appropriate medical directive, or contact a Base Hospital Physician (BHP) for further direction.	
2.	Communicate the need for the medication and its effects to the patient and/or family member whenever possible	
3.	Check medication for proper labeling and for an expiry date	
4.	Refer to the correct medical directive for correct dosages.	
5.	Select a site without excessive pigment, nodules, lesions or hair when possible. Choose a site that has not recently been used.	Common injection sites are the outer aspects of the upper arms and thighs.
6.	Injection volume 0.5 to 2 ml. If the patient requires more than 2 ml of medication, prepare another injection site.	Use syringe with a needle length of $\frac{1}{2}$ - $\frac{5}{8}$ inch and a gauge size between 24 – 26
7.	Cleanse the area with an alcohol swab, wiping with firm pressure from injection site outward in a circular motion. Allow skin to dry.	
8.	Hold the syringe between the thumb and forefinger of dominant	
	hand. Pull cover straight off the needle with non-dominant hand.	
9.	Elevate the subcutaneous tissue by "pinching" the injection site.	
10. 11.	With the bevel up, insert the needle at a 45-degree angle in one quick motion to allow for insertion into the subcutaneous layers of the skin.	
- TT.		



	Content	Details / Visual Component
12.	After the injection, withdraw the needle at the same angle it was inserted. Use an alcohol swab to massage the site.	This helps distribute the medication and promote absorption by dilating blood vessels in the area and increasing blood flow.
13.	Discard the needle in the sharps container without recapping	
14.	Assess the patient closely for any change in condition following medication administration.	
15.	Discontinue the medication if adverse effects occur or as directed by a BHP.	
16.	Document the procedure on the patient care record as per the Ministry of Health and Long Term Care Emergency Health Services Branch Ambulance Call Report Documentation Standards and your Service Provider policy which includes: • name of the medication • dose and concentration of the medication • time of administration • route/site of administration • amount of wastage for any controlled substance accompanied by a co-signature	
17.	Document patient condition before and after medication administration.	

Expected Outcome: Successfully administer medication via subcutaneous injection