



A patient guide to administration of subcutaneous immunoglobulin replacement therapy

– using manual push technique

This piece of patient information is a step by step guide to administering your immunoglobulin replacement technique via manual push technique. You should follow these instructions carefully, and if you experience any problems please contact your immunology nurse.

Building healthier lives

UHB is a no smoking Trust

To see all of our current patient information leaflets please visit
www.uhb.nhs.uk/patient-information-leaflets.htm

STEP 1: Preparing for your injection

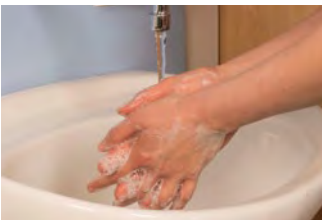


- Gather the equipment needed

Equipment list:

Mat / clean surface	Syringe(s)
Sharps box	Cotton wool
Immunoglobulin vial(s)	Alcohol wipe
Butterfly needle(s)	Micropore tape
Mini spike	Infusion log

STEP 2: Preparing for your injection



- Clean your working area using a disposable disinfectant wipe. Then thoroughly wash your hands with soap and water and use a clean towel to dry them



- Open the equipment packaging onto your clean working area
- Inspect each bottle of immunoglobulin carefully;
 - Check that you have the correct dose
 - Check the expiry date
 - Ensure the bottle is not damaged
 - Ensure the immunoglobulin is clear

<p>Do not use the bottle of immunoglobulin if:</p>	<p>What to do:</p>
<ul style="list-style-type: none"> • The bottle is cracked or broken • The protective cap is missing • The expiry date on the label has passed 	<ul style="list-style-type: none"> • Record the batch number of the immunoglobulin in your injection diary and state the reason why you are not going to use it • Then throw away into the sharps box
<p>Do not use the bottle of immunoglobulin if:</p>	<p>What to do:</p>
<ul style="list-style-type: none"> • The immunoglobulin looks cloudy or contains particles 	<ul style="list-style-type: none"> • Record the batch number of the immunoglobulin in your infusion diary and state the reason why you are not going to use it • Inform the immunology team • Do not throw away the bottle - keep it to give it to the immunology team

STEP 3: Preparing your immunoglobulin



- Take the mini spike and pull off the cap

- Put the immunoglobulin bottle onto the flat surface and push the spike through the rubber stopper



- Put the immunoglobulin bottle onto a flat surface and push spike through the rubber stopper



- Attach the syringe onto the mini spike



- Carefully turn the bottle up side down and gently pull back on the plunger. The immunoglobulin will fill the syringe



- Take the immunoglobulin filled syringe off the mini spike and expel air gently pushing the immunoglobulin up to the base of syringe



- Immediately attach the syringe onto the injection needle tubing and push on the syringe plunger. This will push the immunoglobulin into the tubing expelling the air out of the line. Stop pushing on the plunger when you see immunoglobulin appear at the end of the injection needle

STEP 4: Preparing the injection site



- Select an area on your abdomen or thigh for your injection
- Use a different site from the last time you injected immunoglobulin. Your immunology team will inform you how many injection sites you need and use how much immunoglobulin to infuse into each site
- Clean the skin at each site with an antiseptic wipe and let the skin dry

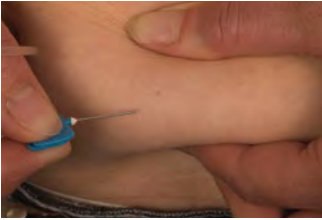
Tips for selecting an area to inject;

- New sites should be at least 5cm away from a previous site
- Never inject into areas where the skin is tender, bruised, red or hard
- Avoid small veins which are visible on the skin surface
- Avoid injecting into scars or stretch marks

STEP 5: Inserting your injection needle



- Pinch an area of skin as shown in the picture below. Try to ensure the skin surface is firm as this will help to insert the needle



- Insert the needle under the skin at a 45 degree angle



- Secure the needle with micropore (surgical) tape
- To make sure you have not accidentally inserted the needle into a vein pull back gently on the syringe plunger. If you see any blood enter the tubing, take the needle out of the injection site, remove the needle / tubing from the syringe and discard in the sharps box
- Attach another injection needle and tubing to the filled immunoglobulin syringe and push on the syringe plunger to fill the immunoglobulin into the tubing expelling the air. Re-insert the needle into a different site. Check again that you are not injecting into a blood vessel

STEP 6: Injecting your immunoglobulin



- Press the syringe plunger to inject the immunoglobulin. Your immunology team will instruct you on the length of time to inject. Inject at a speed which is comfortable. You may experience stinging as you inject so you may need to slow down the speed

STEP 7: Completing your infusion and cleaning up



- Once you have injected all the immunoglobulin. Remove the micropore tape and take the needle out of the infusion site and discard the needle, tubing and syringe into the sharps box



- Cover the injection site with gauze, tape or plaster



- Clean your working area and wash your hands

STEP 8: Recording your injection information



- Record the injection in your infusion diary. There is a removable sticker on the side of the immunoglobulin bottle that you can peel off and stick in your infusion diary. This contains the batch number of your immunoglobulin. Ensure you complete all sections in your diary and bring this with you to clinic appointments

Contact details

Stella Spurrier (Medical Secretary to Dr Richter and Prof Lane) 0121 371 4375

Emma Knight (Immunology Clinical Nurse Specialist) 0121 371 4850

Immunology Department – Queen Elizabeth Hospital Birmingham
Mindelsohn Way, Edgbaston, Birmingham B15 2GW Tel: 0121 627 2000