EXAMPLE Gluteal IM Injection Checklist

NAME: _____ DATE: _____

Evaluation	Completed	Not Completed
1. Confirm the correct patient using 2 patient identifiers		
2. Verify the "5 Rights": Right patient, drug, dose, route, time		
3. Wash or sanitize hands and don gloves		
4. Prepare injection by drawing medication into syringe (if not a pre-filled syringe) ensuring no air bubbles are present, and attach appropriately sized needle for administration based on patient's estimated gluteal muscle mass		
5. Warm the medication-filled syringe to room temperature by rolling it back and forth with the palms of the hands		
6. Ensure the syringe is labeled appropriately with the medication name, strength, volume, lot number, original expiration date, and beyond use date/time		
7. If possible, place the patient in the prone position. If standing, instruct patient to shift body weight to the opposite leg of where the injection will be administered (if injecting in left glute, then shift weight to the right leg). Uncover the area of the injection site.		
8. Identify and verbalize proper intramuscular injection site and technique (for dorsogluteal sites, only inject in the upper outer quadrant) Video: How to inject benzathine penicillin		
9. Clean injection site with alcohol swab		
10. Slowly inject contents of the syringe (approximately 10 seconds per mL)		
11. Withdraw needle and engage safety device		
12. Immediately apply pressure to injection site with gauze		
13. Apply adhesive bandage to injection site		
14. Document procedure in patient's chart, including contents and location of injection, how the patient tolerated the injection and any complications (staff can verbalize the procedures for this)		
15. Provide post-injection education (for benzathine penicillin) a. Ambulate as tolerated to help distribute medication and relieve pressure. Pressure from injection should subside within a few days. b. Monitor for signs and flu-like symptoms of a Jarisch-Herxheimer reaction within 24 hours of receiving the injection. Pregnant women should immediately seek medical care.		

ASSESSMENT (check one): SATISFACTORY _____ REQUIRES ADDITIONAL TRAINING: _____

Comments/feedback given: _____

Examiner Signature: _____ Date: _____