

Arrow EZ-IO Proximal Humerus Identification & Insertion Technique – Adult

Identify the proximal humerus:

Using either method below, adduct elbow, rotate humerus internally:

1. Place the patient's hand over the abdomen with arm tight to the body
2. Place the arm tight against the body, rotate the hand so the palm is facing outward, thumb pointing down

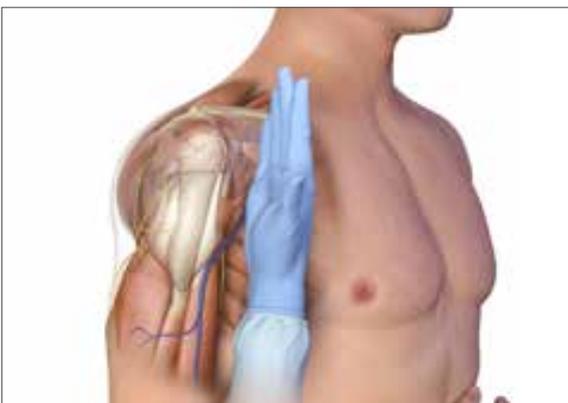


Place your palm on the patient's shoulder anteriorly.

- The area that feels like a "ball" under your palm is the general target area
- You should be able to feel this ball, even on obese patients, by pushing deeply



Place the ulnar aspect of your hand vertically over the axilla.



Place the ulnar aspect of your other hand along the midline of the upper arm laterally.



Place your thumbs together over the arm.

- This identifies the vertical line of insertion on the proximal humerus.



Palpate deeply up the humerus to the surgical neck.

- It will feel like a golf ball on a tee – the spot where the “ball” meets the “tee” is the surgical neck.



- The insertion site is 1–2 cm above the surgical neck, on the most prominent aspect of the greater tubercle.



Insertion:

- Use aseptic technique
- Prepare supplies:
 - Prime EZ-Connect Extension Set: unlock clamp, prime set and purge air
 - Adult responsive to pain:** Prime EZ-Connect Extension Set with lidocaine. Note that the priming volume of the EZ-Connect Extension Set is approximately 1.0 ml
 - Infant/child responsive to pain:** Prime EZ-Connect Extension Set with lidocaine; priming volume of the EZ-Connect Extension Set is approximately 1.0 ml. For small doses of lidocaine, consider administering by carefully attaching syringe directly to needle hub (prime EZ-Connect Extension Set with normal saline)
 - Adult or infant/child unresponsive to pain:** Prime EZ-Connect Extension Set with normal saline
 - Open EZ-Stabilizer package
- Locate the insertion site
- Clean insertion site per protocol. Stabilize extremity
- Attach Needle Set to EZ-IO Power Driver and remove Safety Cap from Catheter
- Point the needle tip at a 45-degree angle to the anterior plane and posteromedial
- Gently press needle through the skin until the tip touches the bone. The 5 mm black mark must be visible above the skin prior to insertion
- Squeeze the trigger and apply gentle steady pressure. In the event of Driver failure, disconnect the Power Driver, grasp the Needle Hub by hand and advance into the medullary space while twisting back and forth



Stabilize hub and remove Driver and Stylet. Place Stylet in an appropriate sharps container.



- Place the EZ-Stabilizer Dressing over the Catheter hub.
- Attach primed extension set, firmly secure to Catheter hub with clamp open.
- Remove adhesive from back of EZ-Stabilizer Dressing and apply dressing to skin.
- Confirm placement.
- Flush the EZ-IO Catheter with normal saline (5–10 ml for adults; 2–5 ml for infants/children). May require multiple flushes.
- Prior to flush, consider 2% preservative-free and epinephrine-free lidocaine IO for patients responsive to pain – follow institutional protocols/policy.
- Deliver medication and fluids as ordered. Administer medications in same dose, rate, and concentration as given via peripheral IV. For optimal flow infuse with pressure.

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