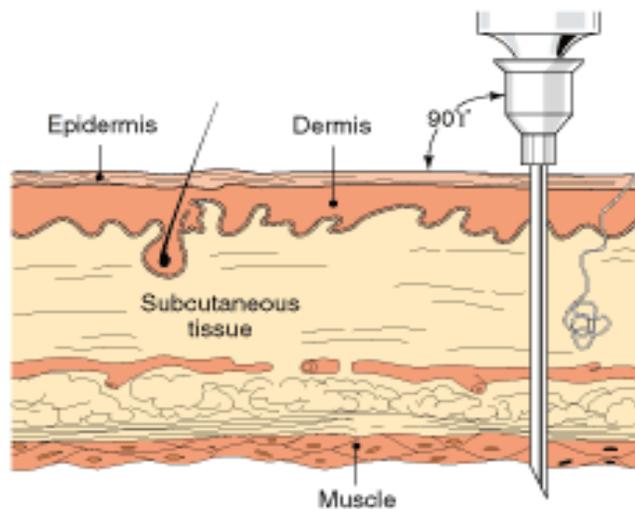


# Intramuscular (IM) Self-Injection

## What is an Intramuscular Injection?

An intramuscular injection, as illustrated in the figure below, delivers medication deep into the muscle tissue. This allows the medication to be quickly absorbed into the bloodstream for action.



## Step 1: Setting Up for the Injection

Find a comfortable, well lit working place and inject at the same time each day.

1. Remove medication from the refrigerator and let it reach room temperature.
2. Make sure it is the medication your doctor prescribed. Check the expiration date on the vial. Do not use a medication with an expired date. If the medication has particles or is discolored, do not use it and check with your pharmacy.
3. Clean your work area.

#### 4. Wash your hands.

Hand washing is one of the most important things you can do to prevent infection. Wash your hands at these times:

- before and after doing any procedure,
- before and after removing gloves,
- after handling any contaminated waste or body fluid,
- after personal hygiene (such as using the bathroom or blowing your nose),
- and before eating.

You will need an antibacterial soap or you may use an antiseptic gel or hand rub that does not require water.

#### **Supplies:**

Antibacterial soap

Paper towel

#### **Procedure:**

Wet your hands and wrists under running water.

Scrub vigorously with an antibacterial soap for 15 seconds. Work lather between fingers, under nails, over palms and on backs of hands and wrists.

Rinse hands and wrists and dry with a clean paper towel.

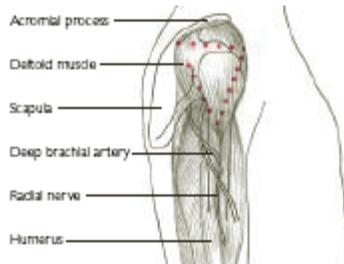
Turn off faucet with a paper towel.

#### 5. Assemble supplies:

- Medication
- Disposable syringe and needle
- Alcohol swabs
- Puncture proof disposal container

## Step 2: Selecting and Preparing the Injection Site

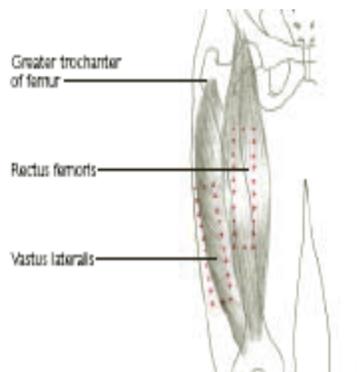
The following are sites for injections. *Alternate the injection site each time you inject to avoid soreness at any one sight.*



**Deltoid**

Find the lower edge of the acromial process and the point on the lateral arm in line with the axilla. Insert the needle 1" to 2" below the acromial process, usually two or three fingerbreadths.

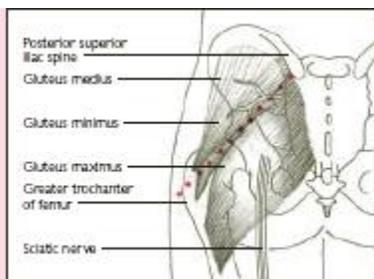
Typical injection: 0.5 ml (range: 0.5 to 2.0 ml)



**Vastus Lateralis**

Use the lateral muscle of the quadriceps group, from a handbreadth below the greater trochanter to a hand breadth above the knee. Insert the needle into the middle third of the muscle parallel to the surface on which the patient is lying.

Typical injection: 1-4 ml (range 1-5 ml)



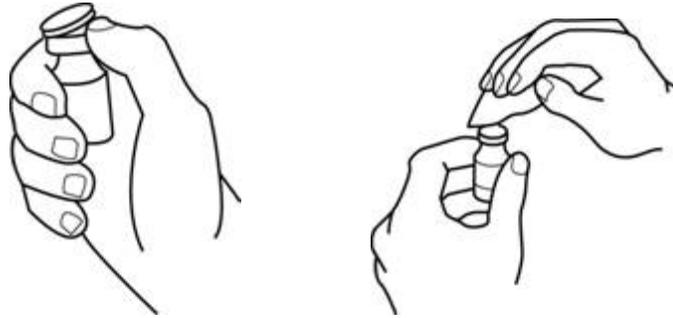
**Dorsogluteal**

Inject above and outside a line drawn from the posterior superior iliac spine to the greater trochanter of the femur. Or, divide the buttock into quadrants and inject in the upper outer quadrant, about 2" to 3" below the iliac crest.

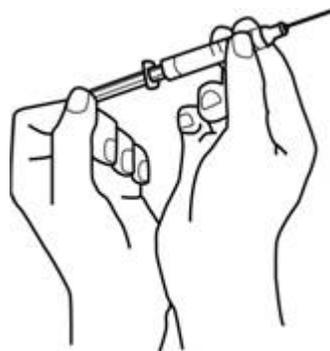
Typical injection: 1 to 4 ml (range: 1-5ml)

### Step 3: Preparing the Dose

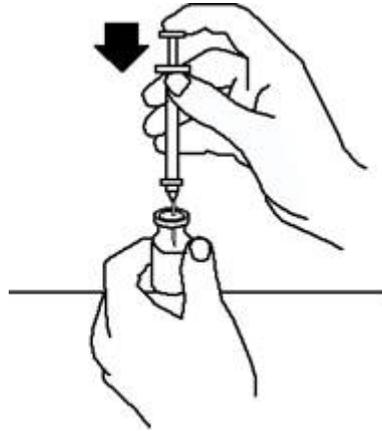
Take the cap off the vial. Clean the rubber stopper with one alcohol swab.



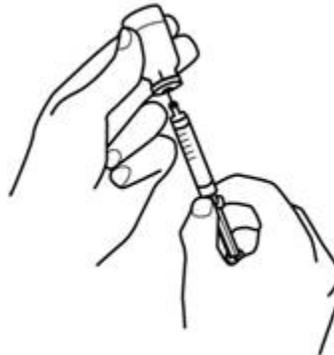
1. Check the package containing the syringe. If the package has been opened or damaged, do not use that syringe. Dispose of that syringe in the puncture-proof disposal container. If the syringe package is undamaged, open the package and remove the syringe.
2. Pull the needle cover straight off the syringe. Then, pull back the plunger and draw air into the syringe. The amount of air drawn into the syringe should be the same amount (mL or cc) as the dose that your doctor prescribed.



3. Keep the vial on your flat working surface and insert the needle straight down through the rubber stopper. Do not put the needle through the rubber stopper more than once.
4. Push the plunger of the syringe down and inject the air from the syringe into the vial.



5. Keeping the needle in the vial, turn the vial upside down. Make sure that the liquid is covering the tip of the needle.



6. Keeping the vial upside down, slowly pull back on the plunger to fill the syringe with the medication to the number (mL or cc) that matches the dose your doctor prescribed.

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