

## How to Administer an Intramuscular (IM) Injection to the Deltoid Muscle

**Step 1:** Ask the patient which is their dominant arm. It is recommended to use their non-dominant arm.

**Step 2:** Make sure the entire deltoid is visualized. Have the patient expose their entire arm by removing it from their sleeve, **not** by pulling their collar down over the arm.

**Step 3:** Identify the acromion process. (The bony prominence at the top of the arm)

**Step 4:** To find the “safe zone” of where to give the injection, measure two fingers below the acromion process and visualize an inverted triangle.

- ✓ You can visualize an inverted triangle with your fingers by making a “V” with your 2<sup>nd</sup> and 3<sup>rd</sup> finger on your other hand.

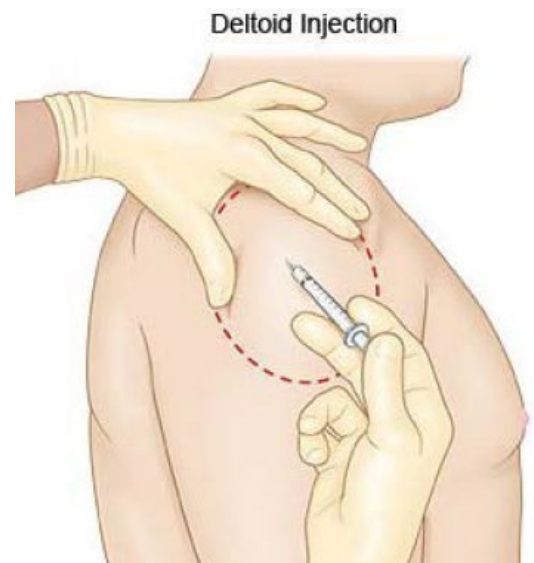
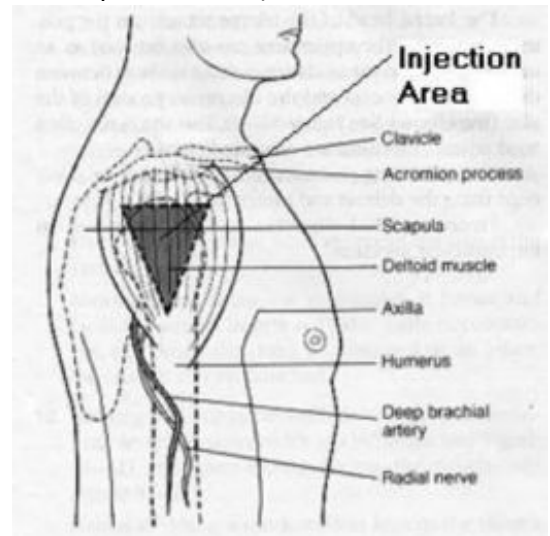
**Step 5:** Clean the skin by wiping the “safe zone” in circles with an alcohol prep pad for a full 10 seconds.

**Step 6:** Draw up the vaccine from your vial in front of your patient. Do not draw up the vaccine until you are ready to administer it to your patient.

**Step 7:** Administer using the Z-Track Method.

- ✓ Do not go so deep that you hit bone.
- ✓ There is no need to aspirate by pulling back on the plunger before injecting the vaccine.
- ✓ Push down on the plunger and inject the entire contents of the syringe.
- ✓ If using VanishPoint syringe, continue depressing plunger to activate automatic needle retraction *while needle is still in patient*. Full dose is administered only when needle retraction is activated.

**Step 8:** Dispose of the used syringe/needle in a sharps container.



\*SIRVA stands for Shoulder Injury Related to Vaccine Administration. This comes from injecting too high and/or too deep in the arm. It may result in patients having chronic shoulder pain and limited range of motion, and require ongoing medical intervention. Proper technique will protect your patient from an injury.