Peripheral Venous Catheters (PVC) are the most common invasive devices inserted for patients requiring medical treatment.

About 51-59% of all patients undergoing treatment in a tertiary hospital will have at least one PVC *insitu* at any time, and the majority will have one during their hospital stay [1, 2].

The insertion of these devices may cause a range of outcomes, from mild discomfort to extreme pain or anxiety for patients.

However, to date there has been very little research to explore how patients really experience the insertion of these devices.

**The study**

The aim of this study was to gain an understanding of patients’ experiences of PVC insertion.

To do this we conducted a study involving semi-structured interviews using a phenomenological-hermeneutic approach.

Gadamer’s Phenomenological method [3] was used to explore the PVC insertion experience of a purposive sample of patients from medical and surgical wards at a tertiary hospital in Queensland.

Consenting patients were interviewed using a semi-structured technique. The interviews were audiotaped, then transcribed and thematically analysed.

The length of the interviews ranged from five to 30 minutes and was determined by patient responses.

**The findings**

Four themes developed from the interviews, including: competence of the inserter, technique of device insertion, communication between the patient and the inserter, and location of the device.

The overarching finding was that the inserter, good communication, and the site—rather than the device—presented the largest concerns to patients.

Based on these findings the researcher recommends a clear understanding of patient experiences is essential for clinicians and health services to critically reflect upon and improve their insertion practices and patient experiences.

It is also suggested that a responsive attitude toward consumer perspectives will impact positively upon overall patient satisfaction and insertion service provision.

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