

1. DEVICE/EQUIPMENT:

All central venous access devices including single, dual and multi-lumen central venous catheters; dialysis catheters; dilators and guidewires.

2. PROBLEM:

NIAIC has been informed that the MHRA has received several reports of fatalities from haemothorax or haemopericardium following the insertion of these devices. In all cases these were caused by inappropriate choice of design of device for the intended insertion site and over-insertion of dilator or guidewire. Practitioners should be aware that rigid dilators are usually longer than is strictly necessary to dilate the venous puncture site.

3. ACTION BY:

As outlined on page 1.

4. ACTION:

- Careful selection of an appropriate catheter should be made, taking into consideration the size of patient and the intended route of insertion. There are a variety of lengths of catheter available for adult and paediatric patients, which provide optimum positioning for jugular, subclavian and femoral sites. A spectrum of devices should therefore be available for clinicians to allow for an appropriate choice for each insertion.
- Be aware that certain catheters are provided with a soft tip to minimise vessel trauma during insertion. This option may be useful in certain circumstances. Retaining devices are also supplied to allow catheters to be safely anchored when not fully inserted.
- The dilator should only be inserted far enough to open the vessel puncture site, and NOT pushed to its full length. Particular care should be taken with the left internal jugular approach.
- Guidewires should only be inserted as far as the position required for the catheter tip, noting particular problems associated with intracardiac use. When being used to facilitate catheter exchange, it is important to fix the guidewire position and prevent possible migration into the heart.
- When inserting central venous catheters, the manufacturer's instructions for use should always be followed.

5. ONWARD DISTRIBUTION TO:

Please bring this notice to the attention of all who need to know or be aware of it. This will include distribution to:

- Risk Managers
- Health & Safety Officers/Advisors
- Clinical Governance Leads
- Medical Device/Equipment Co-ordinators
- Medical Directors
- Nursing Directors
- Consultant Surgeons
- Renal Physicians
- Medical, Nursing and Care Staff
- Special Care Baby Units
- Anaesthetists
- Anaesthetic Departments
- Theatre Staff
- Accident & Emergency Departments
- Intensive Care
- Independent Health and Social Care Providers including residential, nursing homes and private clinics

6. CONTACTS:

Enquires to NIAIC should quote reference number MDEA(NI)2003/17 and be addressed to:
Northern Ireland Adverse Incident Centre (NIAIC)

Health Estates
Estate Policy Directorate
Stoney Road
Dundonald
Belfast BT16 1US

Tel: 028 9052 3868

Fax: 028 9052 3900

Email: NIAIC@dhsspsni.gov.uk

7. FEEDBACK:

None required.



Brian Godfrey
NIAIC Manager

HOW TO REPORT ADVERSE INCIDENTS

Adverse Incidents relating to medical devices, non-medical equipment, plant and buildings should be reported to NIAIC as soon as possible. Advice on how to report is given in Safety Notice SN (NI) 2003/01. If you are in doubt about how to report incidents, please speak to your liaison officer or contact NIAIC using the telephone number provided. Adverse Incident reporting forms and an on-line reporting facility are available on the NIAIC website at www.dhsspsni.gov.uk/niaic

Heath Estates is an Executive Agency of the Department of Health, Social Services and Public Safety