

# ONE LINERS

**ALL** medical devices can fail but an increasing number of incidents that result in significant morbidity or mortality arise out of user/device interface problems or because of poor practices. The aim of this news sheet is to detail briefly some of the problems in an attempt to make users more aware of what can go wrong – it is all too easy to take equipment for granted...

## Blow-Out

MHRA has received reports of the distal tip of micro-catheters bursting when injecting contrast media by hand with small syringes. This has resulted in rupture of vessels within the neurovasculature and stenosis around the rupture site.



When injecting contrast by hand, a syringe size of 10 ml or above should be used, since smaller sizes can generate pressures that exceed the maximum pressure that micro-catheters can withstand.

## Heartburn?

MHRA has received a report where a patient's clothing caught fire during emergency defibrillation. The patient was successfully cardioverted but sustained burns as a result of the fire.



Always ensure that clothing is removed prior to defibrillation.



## Travelling Tips

MHRA has received a number of reports of the embolisation of guidewire straighteners when long lines have been inserted using surgical cut downs. These straighteners are designed for use when the line is placed using the Seldinger technique but should be used with great care during open procedures.



Only use the straightener if absolutely necessary when inserting a long line using an open procedure. Make sure the straightener is not pushed into the vessel along with the guidewire.



## ...without a Paddle?

Many hospitals have decided to exclusively use single-use adhesive electrodes for the purposes of defibrillation rather than the more traditional paddle. MHRA has received one near miss report, where a small neonate required defibrillation and there were no electrodes small enough to apply safely.

Ensure that neonatal defibrillation paddles are available in Neonatal and Paediatric Intensive Care Units and Accident and Emergency Departments to allow for the rare occasions when neonates may require defibrillation.

## Oxy-date?

MHRA has recently received two reports of fire in oxygen hoses resulting in burns to healthcare workers. In both cases, the hoses were out of date and should have been replaced.

Ensure that there is a system in place for regular checking of "use by" dates and replacement of hoses. Further advice is given in MDA/2003/007. Note that this checking is a separate process from checking the device to which the hose is attached.



Where possible, switch off sockets before unplugging any electrical equipment. Plugs should be checked as part of planned preventative maintenance.