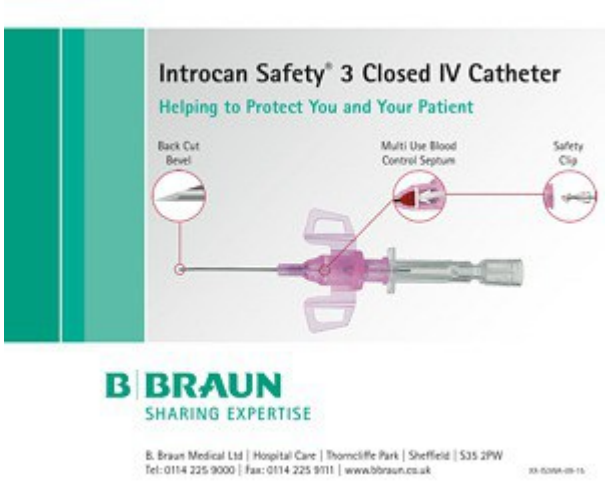

Intravenous literature: Car, P.J., Alexandrou, E., Jackson, G.M. and Spencer, T.R. (2013) Assessing the Quality of Central Venous Catheter and Peripherally Inserted Central Catheter Videos on the YouTube Video-Sharing Web site. The Journal of the Association for Vascular Access. 18(3), p.177-182.

Abstract:

Background – Video sharing networks such as YouTube have revolutionized communication. Whilst access is freely available uploaded videos can contain non peer-reviewed information. This has consequences for the scientific and health care community, when the challenge in teaching is to present clinical procedures that follow empirical methods.

Objective – To review 50 central venous catheter and peripherally inserted central catheter videos posted on YouTube. The aim was to appraise these videos using current evidenced-based guidelines.

Methods – We searched YouTube using the key words central venous cannulation and peripherally inserted central catheter insertion on September 21, 2012. We consecutively reviewed 50 videos for both procedures.

Results – There was poor adherence to evidence-based guidelines in the critiqued videos. There was a difference in adherence with the use of appropriate skin antisepsis in the 2 groups (18% for central venous catheters vs 52% for peripherally inserted central catheters;

p=0.009). And a large proportion in both groups compromised aseptic technique (37% for central venous catheters vs 38% for peripherally inserted central catheter; p=0.940). The use of ultrasound guidance during procedures was also different between the 2 groups (33% for central venous catheters vs 85% for peripherally inserted central catheters; p=0.017).

Conclusions – This critique of instructional videos related to the insertion of central venous catheters and peripherally inserted central catheters uploaded to YouTube has highlighted poor adherence to current evidence-based guidelines. This lack of adherence to empirical guidelines can pose risks to clinical learning and ultimately to patient safety.