

A right internal jugular triple lumen venous catheter insertion was attempted for medication administration, and to provide access for continuous renal replacement therapy” Chamarthi and Koratala (2017).

Extract:

“A 47-year-old man with a history of end-stage renal disease, chronic heart failure, hypertension and diabetes mellitus was brought to the emergency department for dizziness and respiratory distress following cocaine and alcohol use. He was found to be in cardiogenic shock and pulmonary oedema requiring administration of vasopressor agents and positive pressure ventilation.

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Laboratory findings were significant for metabolic acidosis and hyperkalaemia. A right internal jugular triple lumen venous catheter insertion was attempted for medication administration, and to provide access for continuous renal replacement therapy. The procedure was performed under ultrasound guidance and the withdrawal of the guidewire was met with significant resistance after catheter insertion.”

Full Text

Reference:

Chamarthi, G. and Koratala, A. (2018) Tale of a misguided central venous catheter. *BMJ Case Reports*. January 4th. .

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