

“Here we will describe three separate cases of infants in the NICU who, during their course of treatment, were found to have hepatic masses attributed to UVC misplacement.” Fuchs et al (2014).

Reference:

Fuchs, E.M., Sweeney, A.G. and Schmidt, J.W. (2014) Umbilical venous catheter-induced hepatic hematoma in neonates. Journal of Neonatal-Perinatal Medicine. July 30th. .

Umbilical venous catheter-induced hepatic hematoma in neonates [@ivteam #ivteam](http://ctt.ec/8fbe7+)

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Abstract:

Umbilical vessel catheterization is common practice for infants in the neonatal intensive care unit (NICU). Umbilical venous catheters (UVC) although very useful as a means of obtaining vascular access, do not come without risks. Here we will describe three separate cases of infants in the NICU who, during their course of treatment, were found to have hepatic masses attributed to UVC misplacement. Two of the cases presented incidentally and one presented acutely. We believe liver hematomas may be a more common complication of malpositioned UVCs than previously believed. An appreciation of the complications of malpositioned UVCs should alert clinicians to screen for potential complications and to ensure ideal line placement.

Other intravenous and vascular access resources that may be of interest (External links - IVTEAM has no responsibility for content).

- [Guide for intravenous chemotherapy and associated vascular access devices from Macmillan.](#)
- [CancerUK IV chemotherapy information.](#)

