A 7-year-old boy with medulloblastoma, after neurosurgical resection of an intracranial tumor, was sent for echo-cardiography examination, because of unsuccessful administration of the second course of chemotherapy via the central venous catheter (VascuPort), which was implanted 4 weeks earlier” Paczkowski et al (2018).

Extract:

A 7-year-old boy with medulloblastoma, after neurosurgical resection of an intracranial tumor, was sent for echo-cardiography examination, because of unsuccessful administration of the second course of chemotherapy via the central venous catheter (VascuPort), which was implanted 4 weeks earlier. The echocardiography revealed the catheter passing from the right common carotid artery (RCCA) to the aorta with tip of the catheter in the sinus of Valsalva near the right coronary artery. The angioCT scan confirmed the diagnosis and the patient was transferred to the Department of Paediatric Cardiac Surgery in an emergency setting. Because of serious risk of excessive bleeding and planned oncological treatment, the patient was referred for removal of the catheter with simultaneous hybrid closure of the artery perforation.
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