During an attempt to insert a central line into the right subclavian vein at bedside, the guidewire inadvertently entered the subclavian artery and embolized distally” Nath et al (2019).

Abstract:

A 4-month-old preterm, critically ill infant weighing 3.8 kg was admitted to our pediatric intensive care unit with congestive cardiac failure due to a large ventricular septal defect and its sequelae. During an attempt to insert a central line into the right subclavian vein at bedside, the guidewire inadvertently entered the subclavian artery and embolized distally. After multiple failed retrieval attempts, including surgical femoral cut-down to retrieve the wire, it was removed finally by fluoroscopic-guided percutaneous catheterization with the help of a cardiac bioptome and a gooseneck snare utilizing a novel maneuver.

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