



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 biptome and a gooseneck snare utilizing a novel maneuver.

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[Guidewire associated arrhythmia during central venous catheterization](#)

[Loss of guide wire as a complication of central venous catheterization](#)

[Central venous guide wire retention literature review](#)



Reference:

Nath, R.K., Agrawal, R., Sarowa, M. and Pandit, N. (2018) Embolized Guidewire into Central Aorta: A Nightmare in the Pediatric Intensive Care Unit. Journal of Pediatric Intensive Care. 7(4), p.210-212. doi: 10.1055/s-0038-1646779.

