
Abstract:

In emergency situations, intraosseous cannulation represents an alternative route of vascular access when peripheral vein insertion is difficult. We present the first documented case of intraosseous systemic fibrinolysis in a patient with ST-segment elevation myocardial infarction. In this case, repetitive episodes of ventricular fibrillation occurred soon after first contact with emergency care providers. Given that the patient had difficult peripheral venous access, an intraosseous catheter was inserted. Fibrinolytics and antiarrhythmic drugs were administered though this line, resulting in resolution of coronary ischemia and electrical instability, without complications. Intraosseous cannulation represents a novel route for administration of systemic fibrinolysis in cases of difficult peripheral venous access in the out-of-hospital setting.