

We are reporting a case of inadvertent placement of central venous catheter in the right common carotid artery with the use of ultrasound guidance during emergency surgery for the total correction of Tetralogy of Fallot (ToF)” Ahmed et al (2018).

Abstract:

Ultrasound-guided central venous cannulation is now considered as the standard of care, and this has largely replaced blind central venous cannulation using anatomical landmarks. We are reporting a case of inadvertent placement of central venous catheter in the right common carotid artery with the use of ultrasound guidance during emergency surgery for the total correction of Tetralogy of Fallot (ToF). This patient luckily had a favourable outcome despite this inadvertent catheter placement which was not recognised even after completion of surgery. The patient also received drug infusions of inotropes and vasopressors through this misplaced central line into the aorta. The possible mechanism, consequences, prevention and management of this inadvertent cannulation are discussed in this report.

Reference:

Ahmed, S.S., Junejo, F. and Khan, F.H. (2018) Misplaced Central Venous Catheter in Carotid Artery during Emergency Surgery for the Total Correction of Tetralogy of Fallot of an Adolescent Boy. *Journal of the College of Physicians and Surgeons-Pakistan*. 28(6), p.479-481.

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