

A central venous catheter (CVC) aimed at the internal jugular vein was incidentally inserted in the common carotid artery, resulting in acute dyspnea and a hemorrhagic shock due to a massive cervical hematoma” Pfister and Michels (2018).

Abstract:

An 81-year-old woman with infarct-related cardiogenic shock was admitted to the cardiac catheterization laboratory. Coronary angiography revealed an occlusion of the ramus interventricularis anterior. Due to incomplete flow after the percutaneous coronary intervention with implantation of three coronary stents and high thrombus burden, tirofiban was given as a bail out therapy. A central venous catheter (CVC) aimed at the internal jugular vein was incidentally inserted in the common carotid artery, resulting in acute dyspnea and a hemorrhagic shock due to a massive cervical hematoma. Although the CVC is a frequently used intervention in critical care, the procedure still carries some risks of iatrogenic injury. Knowledge about the emergency management of CVC-associated complications is therefore essential.

Reference:

Pfister, R. and Michels, G. (2018) Management of a massive cervical hematoma after insertion of a central venous catheter under tirofiban. *Medizinische Klinik, Intensivmedizin und Notfallmedizin*. March 27th. . .

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