This study aimed to compare success rates and time to placement for Manual IO versus EZ-IO needles in PED patients ≤8 and >8 kg” Pifko et al (2017).

Abstract:

AIM: Intraosseous (IO) access is a life-saving option during resuscitations in the paediatric emergency department (PED). This study aimed to compare success rates and time to placement for Manual IO versus EZ-IO needles in PED patients ≤8 and >8 kg.

RESULTS: Of 1748 charts screened, 50 had an IO attempted. In patients ≤8 kg, Manual IO had success rate of 55% (17/31) versus 47% (8/17) for EZ-IO (P = 0.61). In patients >8 kg, Manual had success rate of 100% (2/2) versus 93% (14/15) for EZ-IO (P = 0.71). Manual performance
was no different for ≤8 kg than >8 kg (P = 0.21), but EZ-IO was less successful for ≤8 kg than >8 kg (P = 0.005). In patients ≤8 kg, Manual IO had a shorter time to placement at 4.5 min versus 12.8 for EZ-IO (P = 0.02).

CONCLUSION: We observed no difference in performance between Manual and EZ-IO devices in children ≤8 kg, but the Manual IO were placed more quickly. We observed lower success rates with EZ-IO devices in children ≤8 kg compared to >8 kg. Future investigations should focus specifically on training for IO placement in children ≤8 kg.

Reference:


Thank you to our partners for supporting IVTEAM