“Correct placement of the IO needle can be confirmed in several ways including the needle standing firmly upright, aspiration of bone marrow, and the infusion of fluid without visible or palpable soft tissue swelling” Saul et al (2014).

Reference:

Review of sonographic confirmation of intraosseous line placement http://ctt.ec/peXxu+
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Abstract:

Intraosseous infusion (IO) is a critical resuscitation procedure, providing rapid and reliable vascular access in patients with difficult intravenous access or in time-critical situations. Correct placement of the IO needle can be confirmed in several ways including the needle standing firmly upright, aspiration of bone marrow, and the infusion of fluid without visible or palpable soft tissue swelling. In addition to the importance of ensuring intravascular delivery, there are complications of fluid extravasation from malpositioning, including compartment syndrome [1,2] and tissue necrosis [3,4].

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