

An X-ray repeated the next day showed the catheter redirected to the desired position in the superior vena cava without any intervention” Rajan et al (2016).

Extract:

“A 3-year-old female child diagnosed with acute lymphoid leukaemia was scheduled for peripherally inserted central catheter (PICC) insertion for chemotherapy.

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After administering general anaesthesia, a 3F PICC, 22 cm long, was introduced through the left cephalic vein. The catheter was introduced with the head towards the side of the line, and no difficulty was faced while introducing the catheter. Postprocedure, in the recovery room, a chest X-ray taken showed the catheter tip malpositioned in the internal jugular vein . Since the child already had a peripheral venous access, it was decided to use that access for the continuation of the chemotherapy. We opted to re-evaluate the position of the catheter after allowing the child to be active and preferentially in an erect posture rather than redirecting the catheter immediately. An X-ray repeated the next day showed the catheter redirected to the desired position in the superior vena cava without any intervention.”

Full Text

Reference:

Rajan, S., Paul, J. and Kumar, L. (2016) Spontaneous repositioning of a malpositioned peripherally inserted central catheter. Indian Journal of Anaesthesia. 60(2), p.148-9.

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