

Vascular Access Team

Extravasation injuries

Information for parents and carers

Introduction

This leaflet explains what extravasation is and what we are doing to care for your child.

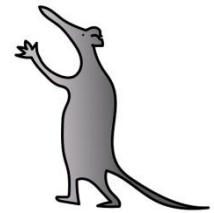
What is extravasation?

Extravasation refers to the leakage of fluids from a vein into the surrounding tissue. It most often occurs when a medicine is being infused (given) into a vein through a cannula or central venous access device, for example a Broviac line.

What causes extravasation?

The reasons for extravasation could include:

- infusing the medicine too quickly through the cannula or central venous access device
- very small or fragile veins
- weakened veins due to repeated infusions
- the type of drug being given and its impact on the vein



How is extravasation recognised?

The nursing team overseeing your child's treatment will have regularly monitored the infusion, on an hourly basis, or more frequently if it was required. The nurses will have been looking for signs of redness or swelling near the infusion site, or if your child has been complaining of pain, burning or stinging.

It can be difficult to diagnose extravasation because some medicines can feel uncomfortable during infusion, but have no lasting effects.

What happens if extravasation is suspected?

The infusion will have been stopped. Any remaining medicine will have been drawn off using a syringe connected to the cannula or central venous access device. The area will have been checked and assessed by the nurse, and the medical team responsible for your child's treatment will have been informed.

The extravasation will be recorded on an incident form and in your child's notes. This includes details of the medicine infused, the rate of infusion and the infusion site. These incident reports are then analysed regularly to see if we can improve our practice to reduce extravasation injuries in the future.

How will extravasation be treated?

The treatment depends to a great degree on the medicine that has extravasated, and how much was infused. Treatment may involve the use of hot or cold compresses or antidotes and elevation (raising) of the affected limb.

After the doctors have assessed your child, they may decide that further treatment is required. This may involve a short surgical procedure to wash out the medicine.

Are there any long term effects?

If recognised and treated quickly, usually there are no long-term effects. The area around the site may feel sore for a day or two afterwards.

In rare circumstances, skin and tissue damage can occur. If this has happened, the Plastic Surgery Team will be assessing your child and advising on the correct form of treatment.

For further information

Please speak to the nurse or doctor looking after your child or ask them to contact the Tissue Viability Nurse.

This leaflet only gives general information. You must always discuss the individual treatment of your child with the appropriate member of staff. Do not rely on this leaflet alone for information about your child's treatment.

This information can be made available in other languages and formats if requested.

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