

13th December 2023

NIVAS Response to Regulation 28: Report to Prevent Future Deaths.

To: Mr Peter Merchant, Assistant Coroner for West Yorkshire.

Dear Mr Merchant,

Thank you for your Section 28 letter dated 14th November 2023 relating to the death of a patient following the accidental placement of a central venous catheter in the common carotid artery.

We, are the Chairman and vice-Chairman of NIVAS (National Infusion and Vascular Access Society) and aim to promote and support best practice in vascular access. Our membership ranges from vascular access nurses and teams to anaesthetists and operating department practitioners, interventional radiologists, infusion nurses and teams who all work within the NHS.

From your description of this case, we identify three failings: failure to use real time ultrasound guidance during placement of the central venous catheter; failure to identify inadvertent arterial puncture and cannulation of the common carotid artery; and failure to remove the catheter in a safe and timely manner.

We are conscious that the placement of central venous catheters is performed by individuals from a variety of medical backgrounds as well as nurses, which may have implications in delivering guidelines for the insertion and management of central venous catheters.

NIVAS has not yet published any guidelines specifically concerning the use of real time ultrasound guidance for central venous catheter insertion or the identification and management of inadvertent arterial puncture or cannulation although this is planned for 2024. The recognition of arterial puncture is mentioned in two recent competency documents for tunnelled and totally implanted vascular access devices which are available for download by our membership.

NIVAS is a strong proponent of real time ultrasound guidance for vascular access devices and has delivered teaching on this at our annual conference and study days.

We believe that the best current guidance on the subject is "Safe Vascular Access 2016" published by the Association of Anaesthetists. We are both involved in the revision of this document, the new edition is scheduled for publication by the Association of Anaesthetists in 2024.

In response to your letter, we will give the subject prominence at our annual conference in June 2024 with a specific lecture dealing with current guidelines, emphasising the importance of real time ultrasound guidance and the management of accidental arterial cannulation.

Yours sincerely,





NIVAS Vice-Chairman

Nurse consultant in IV therapy and Vascular Access

Consultant Anaesthetist