

# Extravasation information leaflet

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## What is extravasation?

This booklet provides information about extravasation and the treatment your child will receive should they develop an extravasation injury. Regrettably, extravasation is a risk when thin tubes, called central and peripheral lines or cannulas, are inserted into a vein to administer medicines or fluids.

Extravasation refers to the leakage of fluids from a vein into the surrounding tissues. This can occur when a medicine or fluid is being sent directly into a vein through a cannula or a central line.

Extravasation can occur for many reasons. These include an obstruction to the line administering the medicine, the drug being administered quickly or cannulas in small veins repeatedly being used. Certain medicines are also more likely to cause extravasations than others.

In the Paediatric Intensive Care Unit (PICU), extravasation injuries are rare and we are committed to preventing extravasations from happening while treating our patients.

## Symptoms of extravasation

Extravasation usually results in pain such as stinging and burning. If your child cannot express that they are in pain we will observe for signs of extravasation such as redness and swelling of the site where the thin tube enters the vein.

We will also regularly monitor and record the pressure shown on the machine that is required to deliver the medicine into the vein, which helps tell us if extravasation may be occurring. A rise in pressure could point to an issue with the cannula being used.

It can sometimes be difficult to diagnose extravasation as some medicines can feel uncomfortable when being administered directly into a vein but do not go on to cause extravasation.

## Treating extravasation

If your child complains of any symptoms or we suspect that there is a problem with the infusion site, we will act quickly. The infusion will be stopped and the infusion site assessed.

If an extravasation has occurred we will try to draw out the medicine running through the line. The affected area will then be marked and a doctor and the nurse in charge will assess the affected area.

The treatment required will depend on the degree of injury and the medicine that has leaked into the tissues. An on-call plastic surgeon may be contacted and we will aim to treat your child within the hour. The affected area may need to be washed out with salt water.

At times it may be necessary to make small cuts to the affected area to allow it to be washed out which will dilute any remaining medicine under the skin. A dressing will then be applied and the affected area elevated to reduce swelling. The area affected is likely to be uncomfortable so your child will receive the appropriate pain relief to manage this. If involved, the plastic surgery team will monitor the area regularly until it is fully healed.

If your child still requires an intravenous line then another cannula or central line will be placed in an alternative site.

We will aim to inform you as soon as possible if your child develops an extravasation but our priority is to ensure your child receives optimal treatment. There are usually no long-term effects following an extravasation but the infusion site may be sore. In rare and severe cases, tissue damage may occur, which may require further treatment.

## Preventing extravasation

On PICU, we treat extravasation very seriously and are committed to preventing extravasations in the future.

We ensure the infusion site is clearly visible and we regularly check the site to ensure there are no signs of extravasation. Likewise, monitoring and recording pump pressures enables us to identify early whether extravasation may be occurring. We also have a good awareness of the types of drugs which can increase the risk of extravasation.

We record, monitor and investigate all extravasation injuries that occur. This is so that we can put measures in place to try to prevent them from happening in the future.

## Long term effects of extravasation?

The area may be sore for a short while but if the extravasation is recognised and treated early then there should not be any long-term effects. However, in cases where tissue damage is more extensive, further specialist treatment may be required and healing times may be longer. In these cases the plastic surgery team will be involved on a regular basis. It may also be necessary to take photos of the site. If so you will be asked for your consent by the medical photography department.



## Contact us

You can call PICU, **t:** 020 7188 4500.

For more leaflets on conditions, procedures, treatments and services offered at our hospitals, please visit [www.evelinalondon.nhs.uk/leaflets](http://www.evelinalondon.nhs.uk/leaflets)

## Evelina London Medicines Helpline

If you have any questions or concerns about your child's medicines, please speak to the staff caring for them or contact our helpline.

**t:** 020 7188 3003 10am to 5pm, Monday to Friday

**e:** [letstalkmedicines@gstt.nhs.uk](mailto:letstalkmedicines@gstt.nhs.uk)

## Your comments and concerns

For advice, support or to raise a concern, contact our Patient Advice and Liaison Service (PALS). To make a complaint, contact the complaints department.

**t:** 020 7188 8801 (PALS)      **e:** [pals@gstt.nhs.uk](mailto:pals@gstt.nhs.uk)

**t:** 02071883514 (complaints)

**e:** [complaints2@gstt.nhs.uk](mailto:complaints2@gstt.nhs.uk)

## Language and accessible support services

If you need an interpreter or information about your care in a different language or format, please get in touch:

**t:** 020 7188 8815      **e:** [languagesupport@gstt.nhs.uk](mailto:languagesupport@gstt.nhs.uk)

## NHS 111

Offers medical help and advice from fully trained advisers supported by experienced nurses and paramedics. Available over the phone 24 hours a day.

**t:** 111

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