

Extravasation



What is extravasation?

The word extravasation refers to the leakage of fluids from a vein into the surrounding tissue. It most often occurs when a medicine is being infused into a vein through a cannula or central venous access device.



What causes it?

Extravasation can occur for many reasons, although more research is needed to confirm the exact causes. We know that some medicines have more potential to cause extravasation so extra monitoring is used when they are being infused.

What are the symptoms of extravasation?

Signs of an extravasation injury include redness or swelling near an infusion site. We may also suspect extravasation if it seems more difficult to give an infusion.

How is extravasation diagnosed?

The nurses will monitor the infusion regularly. It can be difficult to diagnose extravasation, as some medicines can feel uncomfortable during infusion but cause no lasting effects. Other medicines can cause a red 'flush' along the vein during an infusion which can be confused with extravasation.

What happens if extravasation is suspected?

As soon as an extravasation is suspected the infusion will be stopped. Any remaining medicine will be drawn off using a syringe connected to the cannula or central venous access device.

The area will be checked by the doctor or nurse in charge and decisions made about any treatment required. The extravasation will be recorded on an incident form, including details of the medicine infused, the rate of infusion and the infusion site. These reports are then analysed regularly to see if there are ways we can improve our practice to reduce extravasation in the future.

How is extravasation treated?

If the medical or nursing team decide to treat the extravasation, small puncture wounds are made, usually, around the tip of the cannula or central venous access device. The wash out solution flows through the cannula into the affected tissues and out through the puncture wounds. This may be repeated immediately if staff suspects any of the original medicine has remained. The cannula or central venous access will be removed afterwards. The area will be covered with a dressing.

Raising the area can help it feel more comfortable and will help the medicine to disperse. The area is likely to be uncomfortable so your baby will be given pain relief as needed.

We will check the area regularly to watch for any signs of tissue damage such as a change in colour or texture, flaking or more pain in the area than previously. If your baby still requires access to his or her veins, another cannula or central venous access device may be inserted into another part of the body.

Are there any long term effects of extravasation?

If recognised and treated quickly, there are usually no long term effects but the area around the injection site may feel sore for a day or two afterwards. In rare circumstances, tissue damage can occur, which may show as skin breakdown leading to ulceration or scabbing. If tissue damage does occur, your baby may need further treatment or advice from the plastics team who will indicate whether any long term monitoring or intervention is required.

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