## 2019 Cardioplegia

Permission to print: Yes

Incident type Good Catch No Harm Incident

Catagory cardioplegia

Type of incident: Management

Procedure acuity: Elective

Description: Induction dose Cardioplegia was given at 30.2 degrees. During an Aortic valve and root

replacement with a a homograft the xclamp was applied and retrograde (700ml), then ostial (each side 250ml) cardioplegia was given. Ischemic arrest of the heart occurred briefly once the left Ostia was given 'plegia. Shortly after the Induction dose was given, atrial activity was noted. Surgeon informed. 11min after induction a maintenance dose was retrogradely given. ice placed on heart. By the coordinatnig perfusionist was in the room and noted that the [water delivery temperature on the 3T HCUwas 30.2 degrees instead of 5. quick action followed and it was noted that the red tap valves at the rear of the 3T were in the closed position. They were opened and the water cooled instantly. Surgeon was informed and another cold maintenance dose was given retrogradely. The atrial activity on the monitor continued. (Query artefact or activity). Cardioplegia was

given every 20min with no success of total arrest.

GOOD CATCH - what went well great observation from 2nd perfusionist perfusionist

What could we do better a more thorough check of water flow

Preventive actions While checking the water flow is part of the check list, there is no water flow indicator on

the Liva Nova 3T. The check on the cardioplegia pre CPB is by touch on the Blood cardioplegia heat exchanger in the circuit, however consideration is being made to including a simple flow indicator in the water line (that we previously used before the

recall) and we plan to seek approval for this from LivaNova.

Manufacturer advised: No

Hospital incident filed: No

Ext Authority Advised No

Patient outcome varianc Nil

Discussed with team: Yes

Commentary PIRS will report if we receive further details on the inclusion of a water

flow indicator. PIRS Ed