## 2020 cardioplegia 2

Permission to print: Yes

Incident type Good Catch No Harm Incident

Type of incident: Management
Category cardioplegia

Description: We performed an AVR + MVR+ TV repair using the Stockert S5 HLM. After the valves had

been replaced/ repaired, we had warm blood only running through the cardioplegia circuit [heart beating] with the clamp on awaiting stabilization of the heart rhythm. The surgeon scrubbed out while the heart was rested with "warm blood only" still perfusing the heart. After 30 min of resting, the heart fibrillated which we thought was due to pacing wires coming off. The surgeon was called back and asked what the temperature of blood alone was perfusing at. When I double checked the [heat exchanger water] temperature was set at 2 degrees. I immediately set the water temperature to 37. After the temperature came back up the heart was defibrillated and patient was weaned from bypass successfully. I initially thought that one of the nurses might have rested their hand on the heater cooler flipping it from warm to cold as they were looking for a needle around and under the pump. What actually happened (from reviewing the online perfusion data) was I had decreased my patient circuit water temperature and double tapped the accept button. By double tapping the confirm key (v), the screen had changed to the water circuit select screen and I inadvertently flipped the cardioplegia circuit into

cold (the same position as the check key above).

GOOD CATCH - what went well Catching the issue as a temperature issue and not a pacing wire, drug, or air in the coronary issue and timely question by the surgeon.

When changing water temperature settings on the S5 to double check of the

temperature settings after making a change.

What could we do

Preventive actions

better

I could have been more diligent reconfirming the water temperature settings after altering the patient water temp change. Also I could have spoken up about all the

distractions going on around me at the time.

Manufacturer advised: No.

Discussed with team: Yes
Ext Authority Advised No

Hospital incident filed: No

Knowledge issue No

Rule issue Yes

Skill issue Yes

Team Issue No