2022 hypoxia

Permission to print: Yes

Category hypoxia

Incident type Harmful incident

Duration of incident: seconds

Description: Elective CABG using a Sorin S5 HLM. I initiated CPB (trainee under supervision) and

immediately the surgical registrar announced the blood was very dark. My supervisor alerted my attention to the gas flow control which was reading zero. I had forgot to turn the gas flow on before going on bypass. The gas flow was immediately turned on to 2.5 LPM (FiO2 was at .65). There was transient hypoxia - the CONNECT data management system revealed the SaO2 was <100% for 60s (93% and 81% at 30s intervals) and the

SvO2 <65% for 30s (54%).

GOOD CATCH - what went well Registrar identified the dark blood and gas flow was turned on and supervisor in

attendance. The Blood saturation quickly returned to normal

What could we do Leaving gas flow on once it has been tested pre-bypass at the in theatre checks.

better Observing the clour in the arterial line as CPB commences as well as the SaO2, sweep gas

Preventive actions Development of a consistent routine when setting up in theatre, including leaving things

as they are once they have been tested and checked off and watching for adequate gas

exchange as above.

Type of incident: Management

Hospital incident filed: No

Ext Authority Advised No

Discussed with team: No

Rule issue Yes

Skill issue No

Knowledge issue Yes

Protocol issue No

Patient outcome varianc Nil