Healthcare Organization Commitment

Contact Details

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Commitment Details

Commitment Name
Challenge 12B-Preventing Air Embolism

What Patient Safety Challenge does your Commitment address?
Challenge 12B - Air embolism

Commitment Start Date
01/01/2018

How Many Hospitals Will This Commitment Represent

Patient Safety Movement Foundation | patientsafetymovement.org
**Action Plan**

In the Operating room the following measures are currently adopted in certain high risk situations and are part of the workflow: 

A) Central lines: For all central lines inserted in the OR, ports not in use are covered with claves that have valves to avoid air entrapment from improperly capped stopcocks. It is not customary to use air filters on all central lines. 

B) Massive Transfusion devises They are equipped with technology to prevent air embolism, stop infusion and alarm if the reservoir is below a certain level 

C) Patients wiith intracardiac shunts Meticulous deairing of all IV injection ports and stopcocks (Air traps are not routinely used in all patients) 

D) High risk surgery Sitting craniotomy is a very high risk procedure- we use precordial doppler for monitoring this rare surgical position. Setting alarms to detect drop in etCO2. Aspiration of an atrio caval junction double lumen catheter distal port is our next check to confirm the diagnosis in the 60 degree sitting position. Prone or supine positioning (and C-Section) are moderate risk procedures and usually drop in etCO2 is used for monitoring. If the surgeon mentions that there would be high risk due to opening of venous sinuses then a catheter placed in the deep right atrial position for air aspiration in case air embolism does occur. In general it is often less practical to use for monitoring in these cases. Rarely we use TEE, but more for diagnostic rather than monitoring purposes.

**Commitment Timeline**

Improvement actions are underway and ongoing throughout 2018.

**Impact Details**

- **Lives Lost in Last Calendar Year**
  0

- **How many lives do you expect to spare from harm in the next calendar year?**
  0

- **How many lives do you expect to save in the next calendar year?**
  0

**Methodology for Determining Lives Saved**

Calculation will be included as part of APSS #1.