



Medical Leader	•
Medical Expert	
Communicator	
Advocate	
Scholar	•
Professional	•
Collaborator	
Manager	<input type="checkbox"/>

Emergency Patient Intervention

2014 Day 2 – (Supplementary)

You are the DMS of a tertiary hospital that includes neurosurgical services. You are contacted by the operations manager regarding a 30 year old female patient in ICU Day 3 post ruptured cerebral aneurysm and repair. Her post-operative course has been stormy, she is ventilated and her recovery is complicated by vasospasm.

Cerebral vasospasm following aneurysmal subarachnoid hemorrhage is one of the most important causes of cerebral ischemia, and is the leading cause of death and disability after aneurysm rupture.

An endovascular treatment strategy for vasospasm is intra-arterial infusion of vasodilators. She has been treated daily with vasodilators with no effect.

Because of concerns regarding the patient's condition and the significant potential for stroke the neurosurgeon has requested that an interventional radiologist from a larger tertiary hospital attend the hospital and undertake an angioplasty on the patient in an effort to treat the vasospasm.

A number of reasonably large series reporting the results of balloon angioplasty for the treatment of cerebral vasospasm after subarachnoid hemorrhage are now available in the literature. However there is a risk of complications such as vessel rupture and embolization.

You are advised the patient is too ill to be moved to the tertiary hospital, your hospital does not offer interventional neuroradiology and the interventional neuroradiologist from the other tertiary hospital is not appointed at your hospital.

The operations manager has asked you for your advice. She is concerned that the procedure has never been done in the hospital and that nursing staff are unfamiliar with the procedure, equipment required and the care required by the patient.

How will you manage this situation?



Censor's Notes

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- Patient and family consent
- New technique and technology policy
- Emergency credentialing of neuroradiologist
- CE authorisation of credentialing and new technique
- Risk assessment with multidisciplinary, multispecialty team
- Evidence-based practice
- Management of complications
- Consider ethics of treating at the hospital or transferring