

Exsanguination of a home hemodialysis patient as a result of misconnected blood-lines during the wash back procedure: A case report

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Questions provided by Sujatha Mani

1. How long has the home haemodialysis service been provided in Auckland, New Zealand?
 - a) 10 years
 - b) 20 years
 - c) 30 years

2. How many providers of home haemodialysis around NZ have reported incidents of patient exsanguination during a washback procedure?
 - a) 2
 - b) 3
 - c) 4

3. The washback procedure of the haemodialysis circuit at the end of the treatment is an important aspect of haemodialysis. Name the two different methods of washback.

4. Describe the “open circuit” method used to washback extracorporeal blood at the end of haemodialysis treatment.

5. Describe the “closed circuit” method used to washback extracorporeal blood at the end of the haemodialysis treatment.

6. The patient exsanguinated during the wash back procedure as a result of:
 - a) Misconnection of saline bag to the venous end of the extracorporeal blood circuit
 - b) Distensibility- saline bag can expand to several times its volume to accommodate at least 3L of extra fluid (blood + saline)
 - c) May be no substantial increase in venous pressure; blood pump not stopped
 - d) All of the above

7. Investigations showed that the patient had exsanguinated during the washback procedure as a result of a misconnected saline bag to the venous end of the extracorporeal blood circuit rather than the arterial end. Is this statement true or false?

8. What is the coroner's conclusion about the case report?

9. Describe 2-3 changes that resulted from external formal review of the case report.

10. All machine manufacturers distinguish the arterial and venous ends of the extracorporeal blood circuit with colour coding, and incompatible connections were incorporated to prevent misconnection and exsanguination of the haemodialysis patient during the washback. This fail-safe facility is available in all home haemodialysis machine settings. Is this statement true or false?

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