

Can a Protocol for Peripheral Norepinephrine Administration Safely Reduce CVC Days and CVC Placement?

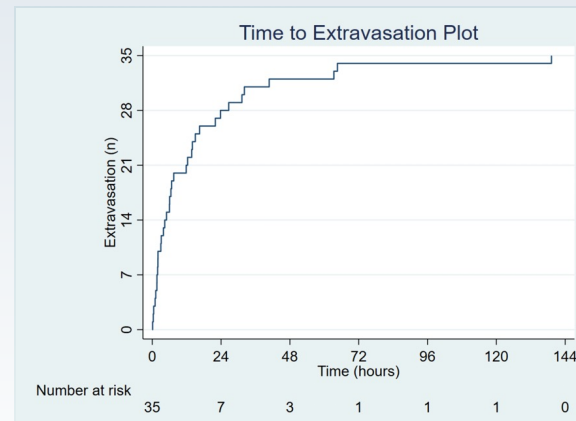
STUDY DESIGN

- Single-center, prospective observational study in a medical ICU
- Included patients treated with peripheral norepinephrine using a protocol developed and implemented at the study site
- 635 patients enrolled between February 2019 to June 2021

RESULTS

Max dose of norepinephrine	10 mcg/min [IQR 6, 15]
Percent receiving dose >15 mcg/min	14.6%
Percent receiving for longer than 24 h	20.5%
Median duration of infusion	5.8 h [IQR 2.0, 19.7]
Percent never required CVC	51.6%
Median CVC days avoided per patient	1 [IQR 0, 2]
Percent of patients with extravasation of norepinephrine	5.5%

TIME TO EXTRAVASATION IN THOSE EXPERIENCING AN EXTRAVASATION EVENT



Extravasation incidence of 75.8 events per 1,000 peripheral IV administration days [95% CI; 52.8, 105.4]

This study suggests that implementing a protocol for peripheral administration of norepinephrine can safely avoid 1 central venous catheter (CVC) day in the average patient, with 51.6% of patients not requiring CVC insertion. A randomized controlled trial is needed to support this finding.