Perfusion Support in ECLS Staffing & Equipment







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I have no relevant financial relationships





- Equipment Management
 - Hardware setup
 - Calibration
 - Maintenance
 - Back-ups







- Disposables
 - Centrifugal pump
 - Oxygenator, heat exchanger
 - Tubing
 - Cannulas
 - Monitoring accessories
 - Procedural disposables
 - Prep, drapes, gowns, gloves, insertion kits, wires, dilators













Initiation

- Assist in prepping, opening disposables, charting times, Heparin management
- Initiate ECMO, adequate flows, pressures, oxygenation, ventilation
- Secure circuit, tubing and cannula
- Safety alarms

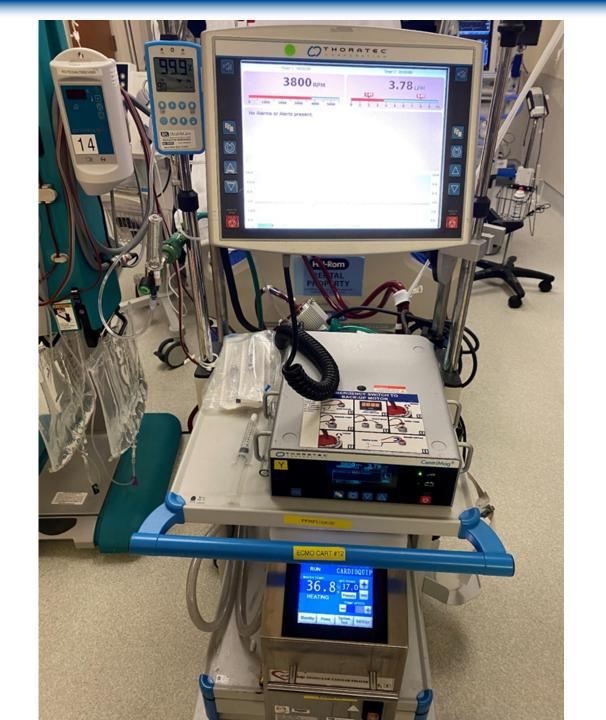




- Monitoring
 - Daily ECMO rounds
 - Attending, RN/ECMO specialist
 - Trends- RPM, flow, gas exchange, temperatures, pressures
 - Cannula sites- sutures, zip ties, bleeding







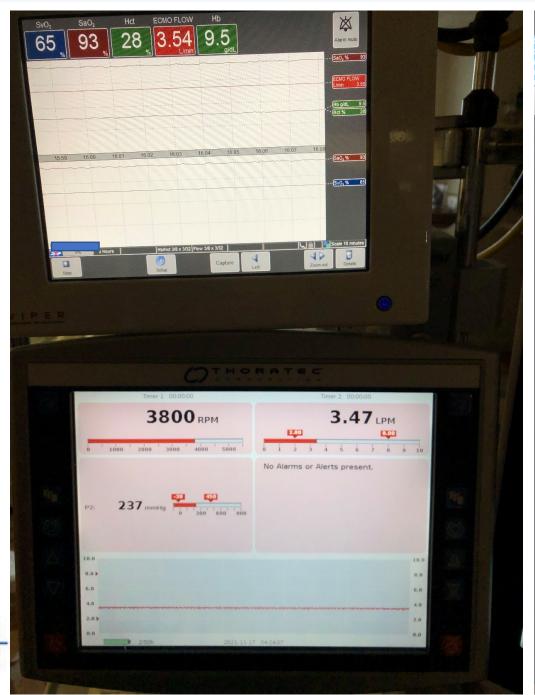


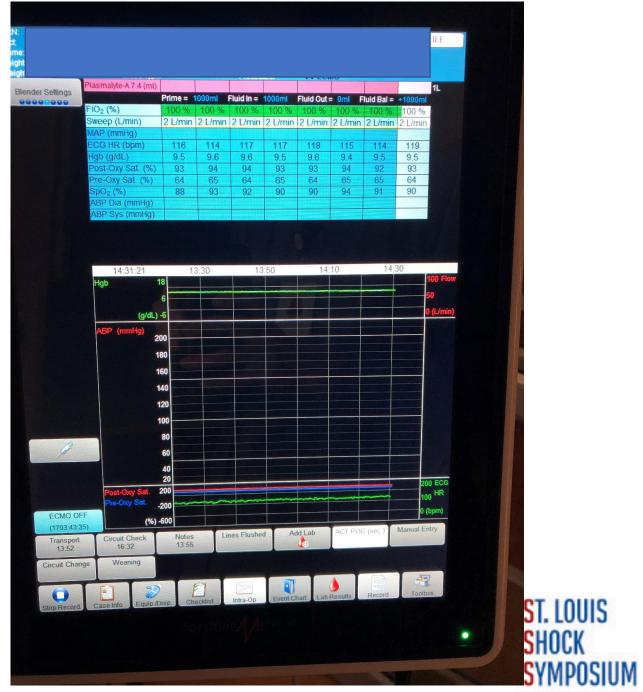
ST. LOUIS SHOCK SYMPOSIUM



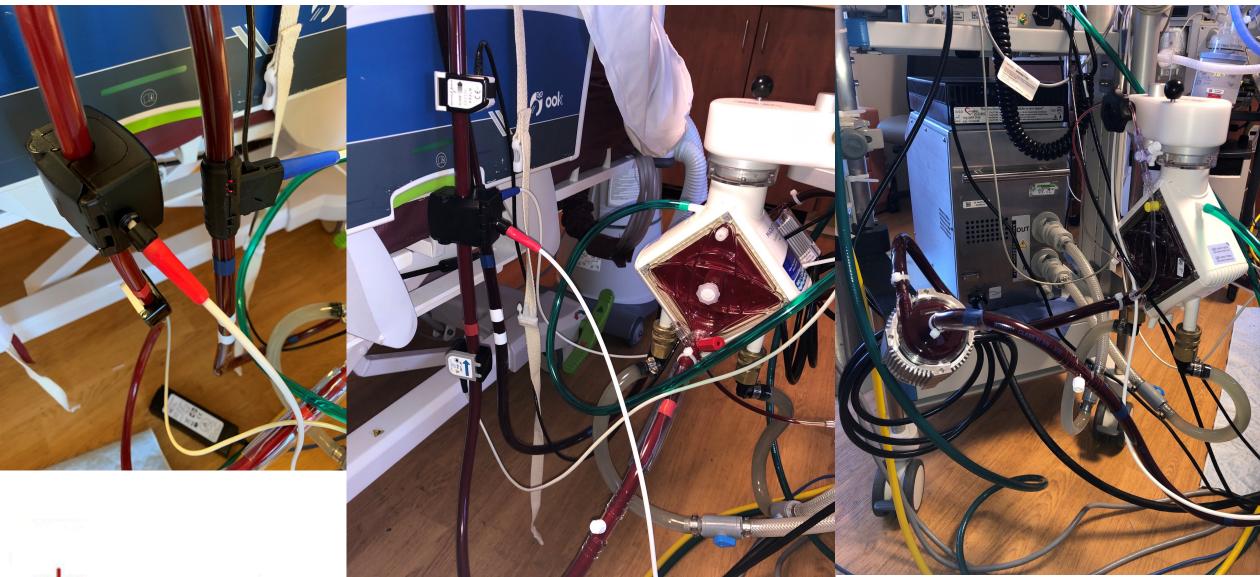


ST. LOUIS SHOCK SYMPOSIUM









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ST. LOUIS SHOCK SYMPOSIUM

- Problems Solving
 - Alarms, flushing, gases
- Interventions
 - Transport- CT trip, OR, room changes
 - Ambulating
 - Circuit change outs





Termination

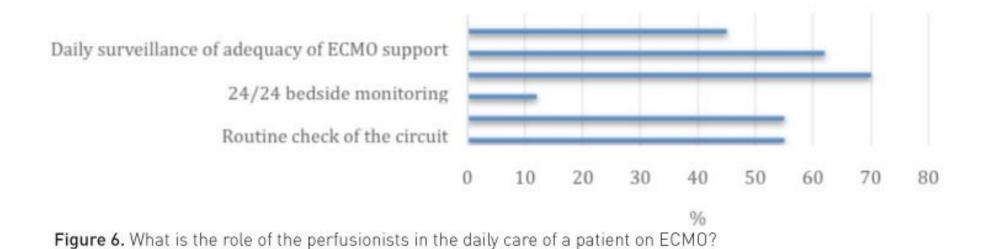




Staffing











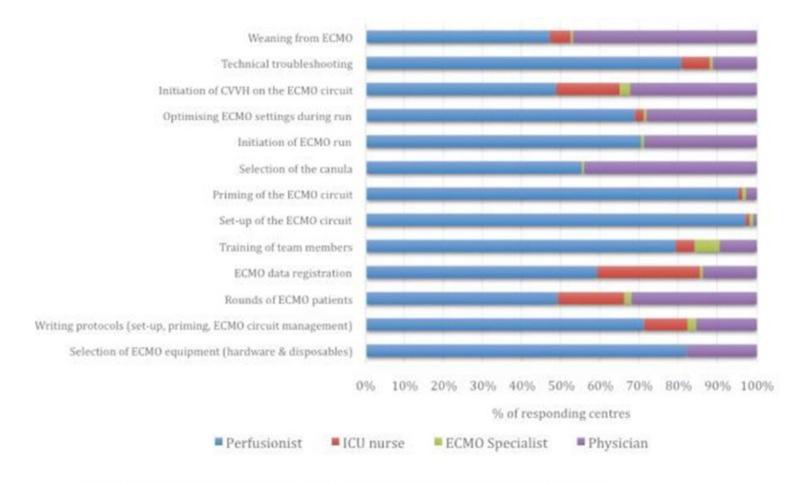


Figure 7. Who is responsible for the following ECMO related tasks in our centre?





Shared ECMO Management

- Safe and efficient multi disciplinary management of ECMO
- ECMO Specialists
 - Trained RN, RT, CCP
 - Perfusion should be involved in all training processes
 - Emergency training with simulation
 - Monitoring the ECMO patient and circuit 24/7
 - Calling in Perfusionist for emergencies and interventions
- Potential problem: Too many specialists decreases the necessary exposure needed for safety





100% Perfusion

- Perfusionist bedside 24/7
- Problems
 - Financial
 - Staffing
- Ideal for small ECMO & cardiac centers
 - Lack of exposure for ECMO specialists





0% Perfusion Support

VV ECMO in non cardiac centers





Conclusion

Collaboration between ECMO center Perfusion teams

• Successes, failures, ideas, equipment



