

Superficial radial neuropathy following venepuncture

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摘要

Abstract

A 42-year-old female suffered excruciating pain and paraesthesia on venepuncture of the cephalic vein in her left wrist. The left superficial radial nerve was injured. A flexed wrist during venepuncture renders the superficial radial nerve immobile and vulnerable to being punctured by the needle. To reduce the risk of nerve injury during venepuncture, the phlebotomist should choose a large and visible vein and insert the needle at a 5-15° angle with the skin. The wrist should be selected only if the veins in the antecubital area are deemed unsuitable. The feeling of an electric shock along the distribution of the nerve, or rupture of the vein during venepuncture, should alert the phlebotomist to the possibility of nerve injury and the procedure should be stopped immediately..