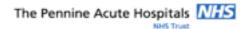


A&E Biers Block Proforma

| Patient NameHosp. NumberDate of birth | | | | | Date:/hours Doctor doing block:Reg/Cons Doctor doing procedure: | | | | | |
|--|---------------------------------------|-----------------|-------------------|---|---|--------------------------------|-------|-----------|--|--|
| | · · · · · · · · · · · · · · · · · · · | | | | | | | har : 1 / | | |
| Time | Temperature | Pulse | Blood Pressure | | Resp Rate | Oxygen % O ₂ Sats % | | Weight | | |
| Morbid obesity (as the cuff is unreliable on obese arms) Peripheral vascular disease Scleroderma Sickle cell disease or trait Methaemoglobinaemia Procedures needed in both arms Lymphoedema No Contra-indications: (if present do not do Biers block) Severe Hypertension Raynaud's phenomenon Epilepsy Allergy to local anaesthetic Uncooperative or confused patient Infection in the limb Children | | | | | | | | | | |
| Preparation Checklist | | | | | | | | | | |
| Consent form completed | | | | | | | | | | |
| ECG and pulse oximeter monitoring in situ | | | | | | | | | | |
| IV access of | on normal side | | | | | | | | | |
| IV access on the side to be anaesthetised with blue cannula | | | | | | | | | | |
| Cuff checke | ed for leaks by | inflating it fo | or 5 mins | 3 | | | | | | |
| Patient obs | recorded | | | | | | | | | |
| Patient weight in kg: | | | | | | | | | | |
| Time cuff inflated:Total time: Pressure set on cuff (300 or 100 above systolic): Volume of 1% Prilocaine used (3mg/kg):mg =ml (plus equal ml saline flush) (see table PTO) Comments: (complications etc) | | | | | | | | | | |
| Signed: Time: Appendix: | | | | | | | Date: | | | |

A&E Biers Block Proforma



Procedure:

- ✓ ONLY use prilocaine (without preservative)
- ✓ Elevate the injured arm for three minutes to exsanguinate the limb
- ✓ Inflate the cuff to 100mmHg above the systolic BP or to 300mmHg (Whichever is greater)
- √ Record the time of inflation
- √ Check for the absence of radial pulse
- ✓ Inject 0.5% plain prilocaine, prepared according to patient weight, slowly and record the time of injection (or 1% with equal volume normal saline)
- ✓ Warn the patient about the cold/hot sensation and mottled appearance of the arm
- ✓ Check for anaesthesia, may have touch but not pain, after five minutes
- ✓ If anaesthesia inadequate, flush cannulae with 10-15ml normal saline
- ✓ Remove the cannula
- ✓ Lower arm on to a pillow and check tourniquet not leaking.
- ✓ Perform the procedure and obtain check x-ray
- ✓ Tourniquet must be under observation at all times
- ✓ Watch for signs of toxicity
- √ The cuff must be inflated for a minimum of 20 minutes and a maximum of 45 minutes
- ✓ If satisfied with the post reduction position of fracture, deflate the cuff observing the patient and monitor
- √ Record the time of deflation
- ✓ Observe the patient and limb closely for signs of delayed toxicity until fully recovered
- √ Check limb circulation prior to discharge
- ✓ Arrange patient follow up and analgesia as appropriate

Prilocaine 1% Dosing IN MLS (add same amount mls of saline flush to make it 0.5%):

| Wt (kg) | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |
|------------|----|------|------|------|------|------|------|------|------|------|
| 30 | 9 | 9.3 | 9.6 | 9.9 | 10.2 | 10.5 | 10.8 | 11.1 | 11.4 | 11.7 |
| 40 | 12 | 12.3 | 12.6 | 12.9 | 13.2 | 13.5 | 13.8 | 14.1 | 14.4 | 14.7 |
| 50 | 15 | 15.3 | 15.6 | 15.9 | 16.2 | 16.5 | 16.8 | 17.1 | 17.4 | 17.7 |
| 60 | 18 | 18.3 | 18.6 | 18.9 | 19.2 | 19.5 | 19.8 | 20 | 20 | 20 |
| 70 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 | 20 |

If any features of minor Prilocaine toxicity during the procedure or after tourniquet release

- ✓Note cuff pressure and inflate the cuff to 100mmHg above the pre operatively recorded blood pressure
- √Commence oxygen and IV Fluids
- ✓Prepare to treat serious features
- ✓ Enlist senior and anaesthetic help

Reference:

College of Emergency Medicine: Clinical Effectiveness Committee: Intravenous Regional Anaesthesia for Distal Forearm Fractures (Bier's Block)