Teaching LA Doses

GLOBAL MARK				
CLEAR PASS	BORDERLINE PASS	BORDERLINE FAIL	FAIL	

Criteria	
Introduces Self, Confirms patient identify, Washes hands	2, 1
Checks comfort level of patient and gains consent for teaching	2, 1
Identifies current level of knowledge of learner	
Sets Objectives for sessions	
What LA are	
How they work	
How to give them	
Giving multiple types	
Explains indications	
Nerve block	
Local infiltration	
Explains contraindications	
Allergy	
Refusal	
Certain clinical situation (compartment syndrome, nerve	
damage assessment)	
Prilocaine and cause metheamaglobinaemia	
Explains pharmacology	
Two types Amides and Esters, we mainly use Amides	
Block sodium channel – stop nerve conduction	
Weak bases, unionized drug passes into cell faster, so lower pKa	
local anaesthetics work faster.	
Also why they work less well in infected tissue (more acidic,	
there fore less unionized drug).	
Why some people may add HcO3- to make solution more aklaki,	
so more unionized drug, so faster action.	
Explains Doses	
Lidocaine MAX 3mg/kg Lidocaine 1% contains 10mg/ml	
Don't exceed 200mg	
Lidocaine with adrenaline 7mlg/kg don't exceed 500mg	
Bupivicaine 2mg/kg max 150mg	
(Same for levobupivacaine). 0.5% = 5mg/ml	
(Same for levobupivacame). 0.5% – Sing/iiii	
Prilocaine 3mg/kg Max is 6mg/kg don't exceed 400mg	
If giving a variety don't give more than the maximum dose of	
the lowest MAX possible LA.	
Does worked example with student	

Invites questions and manages them well	
Checks understanding	
Identifies further learning for learner to cover	
Summarizes session/objectives	

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