GLOBAL MARK				
CLEAR PASS	BORDERLINE PASS	BORDERLINE FAIL	FAIL	

Criteria

Criteria	
Introduces Self, Confirms patient identify, Washes hands	2, 1
Checks comfort level of patient and gains consent for procedure	2, 1
Indications	
CI – Refusal, anaphylaxsis, infection INR>1.5	
Risks – LA toxicity, nerve damage, infection, failure	
Anatomy	
Blocking the ulnar, median and radial nerves gives anaesthesia to the	
hand	
Checks equipment	2
lodine	
Needle and syringe	
Blunt needle	
Local anaesthetic	
Dose 3mg/kg Lidnocaine –	
Dose 2mg/kg Bupivicaine [usually 0.25-0.5%	
levobupivacaine 30-40mls]	
Marker Pen	
Sterile gloves	
Prepares equipment	2
Prepares patient	2
Monitoring	
IV fluids	
Location of intralipid	
Cannulated	
Exposes patient appropriately while maintaining dignity	1
Cleans area – essentially palmar aspect of wrist	1
Median Nerve -half of thumb, half of palm	
- Flexor Carpi Radialis + Palmaris longus tendon is identified	
- 5 mls of local anaesthetic is instilled lateral or medial to this with	
care that needle doesn't cause parasthesiae	
Radial Nerve – radial aspect of dorsum of hand, thumb	
- 1-2cm proximal to radial styloid, just underneath tendon of EPB	
- s/c injection of 5mls	
Ulnar Nerve – ulnar border of hand and half of ring finger	
- locate flexor carpi ulnaris tendon	
- inject close to the artery, aspirates to check not in artery	
- inject as withdraw to get cutaneous branches [5mls]	
Checks Block	
Thanks patient	
Documents	
Amount of LA needed	

Effectiveness of block		
TOTAL		

Tom Bircher