

**Regional anaesthesia blocks performed as a sole procedure inside or outside theatre environment- EKHUFT**

SIGN IN To be completed by the individual conducting the procedure prior to scrubbing	TIME OUT To be read out loud by the assistant before invasive part of procedure is commenced	SIGN OUT To be completed by the operator before anyone leaves the procedural area
<input type="checkbox"/> Confirm all individuals have introduced themselves. <input type="checkbox"/> Confirm patient identity. <input type="checkbox"/> Confirm and record the block to be performed: <input type="checkbox"/> Explanation of potential side-effects given. <input type="checkbox"/> Block site confirmed and marked with a <b>'B'</b> (red pen) <input type="checkbox"/> Check consent: Verbal    Written    Unable (document best interest decision.) <input type="checkbox"/> Baseline observations recorded. <input type="checkbox"/> Intravenous access secured if appropriate for block. <input type="checkbox"/> Confirm operator appropriately: Trained    OR    Supervised by: <input type="checkbox"/> Is the patient on any anticoagulant/antiplatelet drugs? No    Yes, specify: Confirm blood results if applicable. Platelets: PT: APTT: Confirm: <input type="checkbox"/> Absence of contra-indications to proposed block. <input type="checkbox"/> All required equipment available. <input type="checkbox"/> Monitoring appropriate to proposed block in place. <input type="checkbox"/> Resuscitation equipment and intralipid present in the clinical vicinity if indicated by the proposed block.	Confirm: <input type="checkbox"/> The operator is wearing sterile gloves after scrubbing, with additional protective clothing (e.g. gown, mask and hat) worn if appropriate for procedure. <input type="checkbox"/> Block site cleaned with tinted Chloraprep 2% <input type="checkbox"/> Sterile drape in place. <input type="checkbox"/> Safe dose of local anaesthetic prepared.  <input type="checkbox"/> <b>STOP BEFORE YOU BLOCK.</b> ♦ A STOP moment must take place immediately before inserting the block needle. The operator and assistant must double-check: <ul style="list-style-type: none"> <li>○ The block site marking.</li> <li>○ The site and side of the block.</li> </ul> NOTE: This step should be repeated for each block if more than one conducted on the same patient.	Confirm: <input type="checkbox"/> Dressing placed over insertion site. <input type="checkbox"/> Sharps disposed of safely by operator. <input type="checkbox"/> Patient observed for immediate signs of local anaesthetic toxicity. <input type="checkbox"/> Instructions given to record observations/pain scores for an appropriate duration dependent upon block performed.  Confirm: <input type="checkbox"/> Procedure/complications documented in patient notes. <input type="checkbox"/> Further analgesia prescribed. <input type="checkbox"/> Regional block prescription/pain monitoring chart started. <input type="checkbox"/> Forward plan documented

Patient details	Signatures (print name)	Date	Time
	Operator: Assistant: Supervisor: Location/ward:		

## REGIONAL BLOCK UNDERTAKEN AS A SOLE PROCEDURE INSIDE OR OUTSIDE THE THEATRE ENVIRONMENT

Local Safety Standard for Invasive Procedures- Regional blocks performed as a sole procedure inside or outside theatre policy EKHUFT / V1/Athma Thottungal/Feb 20 (review date February 2021)

This LocSSIP applies to all regional blocks undertaken as a sole procedure inside or outside the theatre environment (includes all wards and emergency departments) at EKHUFT.

All regional blocks undertaken in theatre as a part of anaesthesia for another surgical procedure are subject to use of the theatre WHO Surgical Safety Checklist.

### Must-do procedural steps

1. To ensure compliance with best practice:
  - a. EKHUFT regional block procedural checklist must be used.
  - b. The operator must dispose of all sharps before leaving the procedural area.
2. To eliminate the risk of 'wrong site' (NEVER EVENT), the operator must:
  - a. Confirm the patient's identity and take consent appropriate for the procedure.
  - b. Confirm the correct side to be blocked following clinical/x-ray assessment involving the patient whenever possible.
  - c. Mark the correct side for the block with a 'B' using red marker pen before scrubbing. A 'B' must be used to avoid confusion with surgical site marking. (which is done using black pen and arrow mark as per WHO guidelines)
  - d. Use a sterile drape.
  - e. **STOP BEFORE YOU BLOCK:** A STOP moment must take place immediately before inserting the block needle. The operator and assistant must double-check: the block site marking and the site and side of the block. This check should involve the patient whenever possible.
3. To reduce the risk of procedure-related infections:
  - a. The operator must 'scrub' and wear sterile gloves and the block insertion site must be cleaned with tinted 2% Chloraprep in 70% alcohol.
  - b. Additional protective clothing must be worn that is appropriate to the procedure (e.g. gown, mask and hat if indicated).
4. To reduce the risk of arterial puncture and other sources of bleeding:
  - a. Blood results must be checked and abnormalities in clotting corrected if indicated.
5. To reduce the risk of, and to ensure prompt treatment of, life-threatening complications:
  - a. Local anaesthetic drugs must only be drawn up immediately prior to conducting the procedure and 'open systems' must never be used.
  - b. Intravenous access must be secured and resuscitation equipment/drugs (including Intralipid) must be available in the clinical vicinity before commencing a regional anaesthesia block in which there is significant risk of 'systemic' side effects.