

# CQI Alerts

March  
2005

OBSERVATIONS BY THE CONTINUOUS QUALITY IMPROVEMENT PROGRAM FOR UWMC ANESTHESIOLOGY



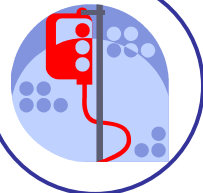
## AVOID EPINEPHRINE IN BLOCKING DOSES FOR REGIONAL BLOCKS

- While epinephrine is all right to use in test doses for regional blocks, avoid using it for the actual block. A fibrillation may result. You can use neosynephrine instead with the blocking dose.
- Remember that neosynephrine can be used instead of epinephrine for test doses.



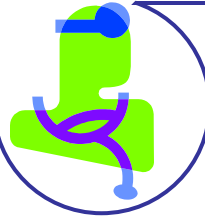
## CHECKING FOR JAW DISLOCATIONS

- TM joint dislocation can occur after oral airway and nasogastric tube placement in an intubated patient.
- Check TM joint mobility soon: early reduction of dislocation will help avoid postop complications, like hematoma and displacement of meniscus.



## DRUGS AND LINES

- Infuse your drugs using the port that is more proximal to the patient.
- Remember to flush the patient's line of any residual narcotics and vasopressors so your drugs infuse on a timely basis. Check patency, and no kinks in line!



## GUIDELINES FOR EPIDURALS

- Place at upper 1/3 of incision with catheter at 3-5 cm into epidural space.

### Preoperative testing

- Test catheter with 3 ml 2% lidocaine and 1:200K epinephrine.
- Test block with up to 10 ml 2% lidocaine (8 ml for a thoracic block).
- Test motor block = can't raise legs.
- Test sensory block = can't feel pin.

### Intraoperative maintenance

- Use 5 ml 2% lidocaine every 60-90 minutes.
- Use 3 to 5 mg Duramorph *only on advice of the UWMC Acute Pain Service (APS)*.
- *DO NOT USE BUPIVACAINE > 0.25%.*

### PACU testing

- Test now if not tested preoperatively.
- Test now if CSE and spinal effect gone.
- Test again if poor PACU pain control.

*Guidelines courtesy of the UWMC Acute Pain Service (APS)*

## CLINICAL / STAFFING PROBLEMS

- Report equipment and supply problems promptly to the anesthesia techs.
- Additionally, report these and all other clinical and staffing problems you encounter by *writing a "Y" in the billing record's study code section.*