

PLAN A BLOCKS Erector Spinae Plane

INDICATIONS: Chest wall/trunk analgesia (unilateral)

*N.B. Often a

TARGET: Tissue plane between transverse process (TP) & erector spinae muscle (ESM)

catheter technique

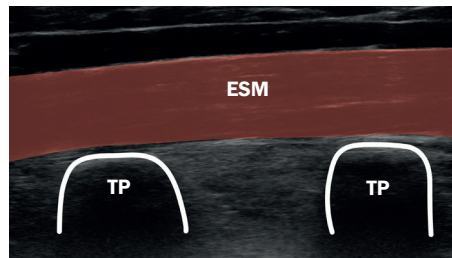
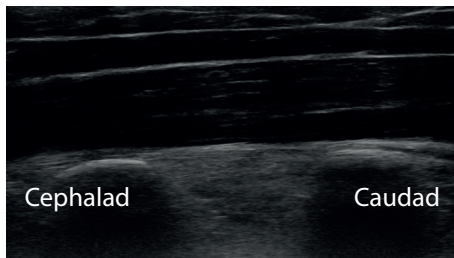
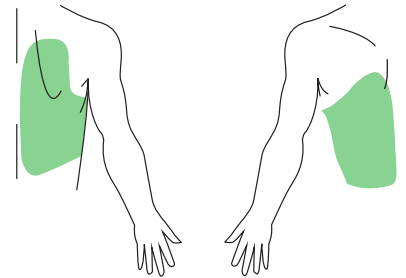
LOCAL: ≤30 ml plus local for skin

KIT

- PPE (droplet precautions)
- Sterile gloves
- Linear US probe + cover
- Sterile gel
- 0.5% chlorhexidine
- LA for skin (+ syringe/needle)
- 80 mm 22G NR fit block needle
- Catheter technique: 18G Tuohy plus gown/mask/drape/sterile tray

PRE-PROCEDURE

- Assistant, monitoring (ECG, SpO₂, BP) & IV access
- Operator standing behind patient, patient sitting on edge of bed (can also be lateral)
- US machine in front of patient, on side of block
- Aseptic skin prep (allow to dry)



SCANNING

- US probe sagittal, midway between vertebral spinous processes and medial border of scapula (in middle of intended dermatomal spread)
- Identify rib (superficial and rounded), pleura and ESM
- Surface landmarks: T3/spine of scapula & T7/inferior angle of scapula
- Scan medially, across junction of TP and rib and onto TP (slightly deeper, flatter, and only superficial border seen clearly with angular end to acoustic shadow at either side. Pleura no longer visible)

STOP BEFORE YOU BLOCK

(Follow Prep, Stop, Block)

- N.B Full asepsis if catheter inserted
- LA to skin
- Needle in plane through single skin puncture (superior to inferior) aiming for posterior surface of TP
- Inject into plane between TP & ESM ensure white line of ESM fascia lifts from TP
- Low-pressure injection (<15 cmH₂O), stop if LA spread not seen
- Aspirate every 5 ml & every needle reposition
- +/- thread catheter 5 cm into space and secure

EXAMPLE TIMINGS

0.25% levobupivacaine (toxic dose 2 mg/Kg)

- Onset 20 min
- Analgesia 8+ hr post block
- Catheter technique: intermittent bolus or infusion regimens both accepted (catheter duration 3-5 days)

POST-PROCEDURE

- Monitor for minimum 30 min (as per AoA Standards of Monitoring)
- Test block after 20 min (sensation only)
- Document procedure, sensory blockade & ongoing analgesic plan

CAUTION

- Risk of pleural injury
- High volume block - risk of LA toxicity

REFERENCES

Barron et al (2020) RA-UK Plan A Blocks Poster – Upper Limb & Trunk
Bowness et al (2021) International consensus on anatomical structures to identify on ultrasound for the performance of basic blocks in ultrasound-guided regional anaesthesia
<http://dx.doi.org/10.1136/rapm-2021-103004>
Haslam et al (2021) Prep, stop, block: refreshing 'stop before you block' with new national guidance.
<https://www.ra-uk.org/index.php/prep-stop-block>

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