

PLAN A BLOCKS Interscalene Level Brachial Plexus

INDICATIONS: Shoulder surgical anaesthesia & analgesia

TARGET: C5 & C6 nerve roots

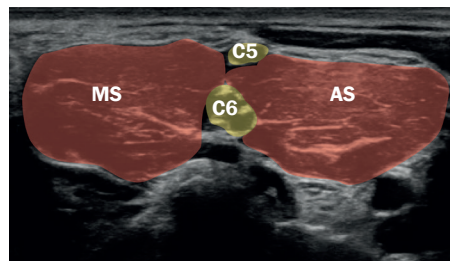
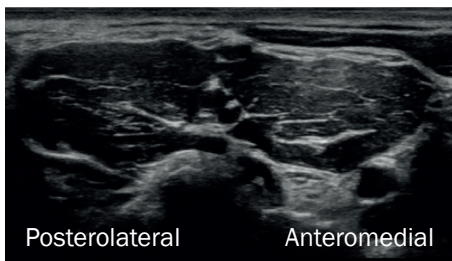
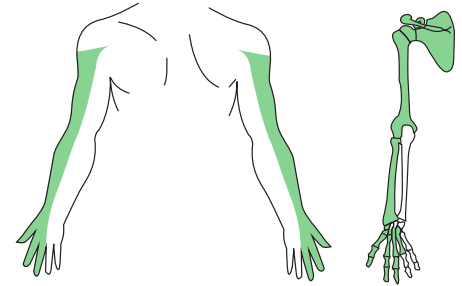
LOCAL: 10 – 15 ml plus local for skin

KIT

- PPE (droplet precautions)
- Sterile gloves
- Linear US probe + cover
- Sterile gel
- 0.5% chlorhexidine
- LA for skin (+ syringe/needle)
- 50 mm 22G NR fit block needle
- 20 ml syringe for LA

PRE-PROCEDURE

- Assistant, monitoring (ECG, SpO₂, BP) & IV access
- Operator at head of bed, patient semi-recumbent with head turned to contralateral side
- US machine on contralateral side
- Aseptic skin prep (allow to dry)



SCANNING

- Place US probe in supraclavicular fossa
- Identify subclavian artery & trunks/divisions of brachial plexus – follow these proximally to find the upper trunk (UT)
- Trace UT proximally to find C5 & C6 between anterior scalene (AS) & middle scalene (MS)
- Tilt probe caudad to optimise view of nerves.

STOP BEFORE YOU BLOCK

(Follow Prep, Stop, Block)

- LA to skin
- Block needle in plane posterior to anterior through single skin puncture (avoid dorsal scapular & long thoracic nerves which may be seen in MS)
- Place needle tip posterolateral to C5 and C6 roots, infiltration will hydrodissect C5 and C6 away from MS
- Withdraw & reposition needle if paraesthesia
- Low-pressure injection (<15 cmH₂O), stop if LA spread not seen
- Aspirate every 5 ml & every needle reposition

EXAMPLE TIMINGS

- 0.5% levobupivacaine (toxic dose 2 mg/Kg)
- Surgical block achieved in 30 min
- Surgical Anaesthesia for 6 hr
- Analgesia 12+ hr post block

POST-PROCEDURE

- Monitor for minimum 30 min (as per AoA Standards of Monitoring)
- Test block after 15 min (sensation & motor)
- Document procedure, extent of block & post-block care

TESTING THE BLOCK

NERVE	SENSORY	MOTOR
C5	Lateral shoulder/arm	Abduction shoulder Elbow flexion
C6	Lateral (radial) forearm, thumb & index finger	Elbow flexion
Site of surgery		

CAUTION

- Phrenic nerve palsy, Horner's syndrome & recurrent laryngeal nerve palsy
- Risk intra-arterial injection high if inject near C7 (vertebral artery)

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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