

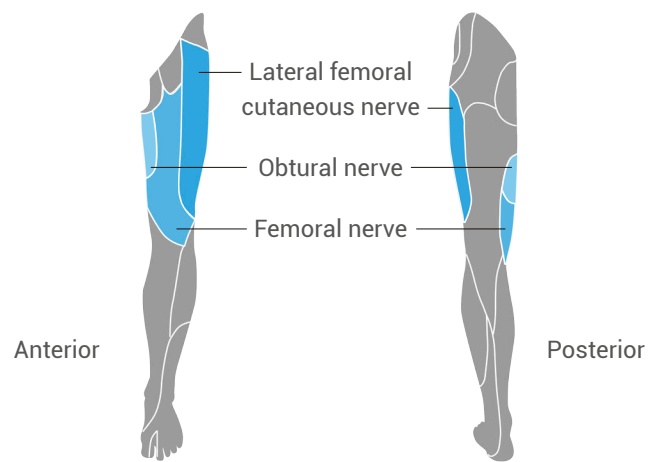
Mastering lower extremity nerve blocks

USING AN ULTRASOUND-GUIDED FASCIA ILIACA BLOCK FOR HIP FRACTURES

Probe position



Distribution



This block is typically performed with 20–30 mL of anesthetic (often adding 10 mL of normal saline is effective). Aim to pierce through the fascia iliaca (the deeper blue line seen below) and deposit your anesthetic / saline. The goal is diffusion of the anesthetic along the fascia so that you anesthetize the three nerves that serve the hip apparatus (lateral femoral cutaneous, femoral, and obturator). This is why so much more volume is needed than is typical for an isolated peripheral nerve block. This is a fascial plane block. Find the femoral bundle along the inguinal crease. Remember the mnemonic NAVEL (nerve, artery, vein, empty, lymph). Then identify the bright white fascial planes (the lata and the iliaca). The iliaca is deeper and the goal is to inject underneath this layer for an effective block.

The fascia iliaca compartment block is quite effective for the following circumstances:

- procedures to the anterior thigh
- arthroscopic knee surgeries
- all of your hip fracture patients

This block has been shown to decrease (especially in the elderly population) the following circumstances:

- delirium
- hypoxic events
- pneumonia
- morbidity
- narcotic usage
- hospital stay

