independently associated to worse maternal outcomes (hysterectomy, ICU admission, embolization). 27 28

REFERENCES


#36453

REGIONAL ANESTHESIA ON THE BATTLEFIELD BY EXAMPLE FASCIA IALIICA PLANE BLOCK

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In a war or combat setting, the choice of the best nerve block would depend on the specific injury or surgical procedure, the available resources, and the expertise of the medical personnel on the ground. 1, 2 Given the challenging conditions and limited resources often encountered in such settings, certain nerve blocks may be more practical and effective. 3 Here are a few nerve blocks that may be considered in a war zone:
Field (or combat) nerve blocks: Field nerve blocks are specifically designed for combat situations and can be performed with portable ultrasound machines or nerve stimulators. These blocks are often used to provide immediate pain relief for injuries such as limb fractures or wounds. Field blocks are relatively simple to perform, require minimal resources, and can be done quickly in the field, reducing the need for evacuation to more extensive medical facilities.

Peripheral nerve blocks: Peripheral nerve blocks involve injecting a local anesthetic near a specific nerve or group of nerves to provide targeted pain relief. These blocks can be performed for injuries or surgeries involving limbs or specific regions. Peripheral nerve blocks are relatively simple to perform and require minimal resources, making them suitable for war zones with limited medical supplies and personnel.

Fascial plane blocks: Fascial plane blocks involve injecting a local anesthetic into the layers of tissue (fascial planes) surrounding nerves. These blocks provide broader coverage of pain relief and can be effective for procedures involving multiple nerves or injuries affecting larger areas. Fascial plane blocks are relatively easy to perform and can be utilized for surgeries or injuries involving the trunk or limbs.

In a war zone, the priority is often to provide rapid pain relief with limited resources and personnel. Field nerve blocks and peripheral nerve blocks are frequently preferred due to their simplicity, effectiveness, and suitability for combat settings. However, the choice of nerve block should ultimately be made by experienced medical professionals who can assess the situation and determine the most appropriate technique based on the individual patient’s needs and available resources. The fascia iliaca block is a regional anesthesia technique that targets the nerves supplying the hip and upper thigh region. It involves injecting a local anesthetic near the fascia iliaca, a layer of connective tissue in the pelvic region. This block can provide effective pain relief for surgical procedures or injuries involving the hip, thigh, or lower abdomen. In a war or combat setting, the fascia iliaca block can be a valuable option for providing pain relief. It is relatively easy to perform, does not require specialized equipment, and can be done quickly with minimal resources. The block can be performed with landmark-based techniques or with the assistance of portable ultrasound machines if available.

Benefits of the fascia iliaca block in a war zone include:

- **Targeted pain relief**: The block can provide effective analgesia for injuries or procedures involving the hip, thigh, or lower abdomen, helping to manage pain and facilitate necessary medical interventions.
- **Rapid onset**: The fascia iliaca block can provide rapid pain relief, reducing the need for systemic opioids and their potential side effects.
- **Simplicity**: The block is relatively simple to perform, requiring only basic knowledge of anatomy and needle insertion techniques. It can be performed by trained medical personnel in the field without the need for advanced medical resources.

However, it’s important to note that the fascia iliaca block, like any medical procedure, should be performed by trained healthcare professionals who are familiar with the technique and potential complications. Adequate sterile technique should be followed, and precautions should be taken to ensure patient safety.

Overall, the fascia iliaca block can be a useful regional analgesia technique during war or combat situations, providing targeted pain relief for injuries or surgical procedures involving the hip, thigh, or lower abdomen. Its simplicity and effectiveness make it a viable option in resource-limited environments.

In a war zone, the continuous infusion of a fascia iliaca block may pose challenges due to limited resources and the need for consistent monitoring and management. The equipment required for a continuous infusion, such as an infusion pump, may not be readily accessible. Additionally, the expertise and availability of medical personnel to properly monitor and adjust the infusion may be limited.

### REFERENCES


### #36923 WEB-BASED RESOURCES IN RA EDUCATION

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**Introduction** The global pandemic of COVID-19 had strong repercussions in healthcare education around the world. Different adaptations to imposed restraints such as quarantine and social distancing forced different adaptations to conduct educational programs, such as video conferencing software, social media platforms, and Free Open Access Medical education tools.

Web-based solutions are increasingly helpful in supporting clinical and academic activities during the COVID-19 pandemic. Moreover, most of these educational methods emphasize the cognitive area of Bloom’s Taxonomy, as psychomotor and attitudinal training becomes harder via remote education, with multiple barriers to deliver personalized feedback.

**Definitions** - Distance education: Also known as distance learning, refers to any education provided without the teacher and students being physically present together.