

APPENDIX 1.0 - LONG LIST OF SUGGESTED ITEMS FOR DOCUMENTATION IN REGIONAL ANESTHESIA**Patient information:**

1. Name¹⁻⁶
2. Age³⁻⁶
3. Date of birth
4. Gender³
5. Medical record/ hospital number¹⁻⁶
6. Weight^{1,3}
7. Height³
8. BMI
9. ASA^{1,3}
10. Allergy^{1,3}

Procedure Preparation:

11. Block performed by _____ (name)^{1,3,5-8}
12. Consent^{5,7,9}
13. Individual risks of procedure discussed and documented^{1,9,10}
14. Pre-anesthetic evaluation⁷
15. Pre-op diagnosis (Post-operative pain management / surgical diagnosis)^{5,6}
16. Timeout / WHO checklist^{5,6}
17. Stop moment performed
18. Coagulation considered⁵
19. IV access⁵
20. Block procedure name^{1,3,5,6}
21. Indication for regional anesthesia (purpose of the block)^{6,8}
22. Request by surgeon for placement for pain management^{6,8}
23. Patient position during the regional anesthesia procedure^{3,6,7}
24. Monitors applied^{2,5,6,11}
25. Baseline vital signs¹²
26. Baseline visual analogue score (VAS)¹³
27. Pre-medication (type and quantity of sedation)^{1,5,6,14,15}
28. Level of sedation (no sedation / light sedation / deep sedation / GA)⁶
29. Indication for block under spinal, epidural or general anesthesia⁵

Procedure Performance:

1. Time and date of regional anesthetic procedure^{6,8,14}
2. Aseptic agent used^{5,6,16}
3. Sterile gloves used
4. Mask used
5. Gown used
6. Ultrasound probe decontaminated in accordance with local policy
7. Sterile ultrasound transducer cover used
8. Sterile drape used⁶
9. Skin infiltration with local anesthetic⁶
10. Needle design: tip, manufacturer, length, gauge^{5,6,17}

11. Local anesthetic used for regional anesthetic technique (concentration and volume)⁵⁻⁷
12. Adrenaline dose used (concentration)⁶
13. Adjunct used^{5,6,18}

Specific for Regional Nerve Block Procedures:

30. Side of block¹⁹
31. Block side marked
32. Technique of needle localization (ultrasound / nerve stimulator / landmark technique)^{5-7,20}
33. Approach used (In plane / out of plane)^{1,3,5,6,9,20}
34. No EMR < ___mA when applicable^{5,6}
35. Minimum current and current duration^{6,21}
36. Description of motor response²⁰
37. Description of quality of paresthesia²²
38. Catheter tip location confirmed by ultrasound / nerve stimulator⁶
39. Technique of injection (via needle or catheter)^{6,23}
40. Note on incremental injection¹¹
41. Extra-neural spread visualized^{5,6}
42. Note on resistance during injection (pressure < 15psi)^{5,6,24}
43. Absence of blood on aspiration^{5,6}
44. Needle depth before injection^{6,21}
45. Catheter depth at the skin^{6,23}
46. Absence of pain / paresthesia during injection^{5,6,14,21}

Specific for Neuraxial Procedures:

47. Approach used (e.g. median / paramedian)^{1,3,5,6,9,20}
48. Vertebral level of needle insertion¹⁴
49. Technique used: Loss of resistance to saline / air for epidural insertion
50. Number of attempts⁵
51. Epidural needle depth at loss of resistance^{6,21}
52. Catheter depth at the skin^{6,23}
53. Note on aspiration and action taken¹¹
54. Absence of pain / paraesthesia during injection^{5,6,14,21}
55. Epidural test dose
56. Dermatomal level of spinal or epidural block achieved^{7,14}
57. Complications⁷

Post Procedure:

58. Adequacy of regional anesthesia procedure^{5,15}
59. Complications⁷
60. Patient vital signs after the procedure²⁵
61. Patient visual analogue score after the procedure¹⁵
62. Post procedure instructions⁵

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