



Regional Pain Management Approaches

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Injury Pattern	Potential Block
<p>Mandible Fracture</p>	<p>Inferior alveolar *Needs to be performed immediately preoperatively **Not an option in non-operative fractures or if already in MMF</p>
<p>Clavicle Fracture</p>	<p>Superficial Cervical Plexus</p>
<p>Distal Clavical, Scapula, Proximal Humerus</p>	<p>Interscalene *Causes unilateral diaphragm paresis. Axillary & Suprascapular Nerve Blocks *Alternative in patients with respiratory insufficiency. **Causes Horner syndrome.</p>
<p>Injury lower than mid-Humerus</p>	<p>Supraclavicular * 50% diaphragm paralysis rate. Infraclavicular * 25% diaphragm paralysis rate. Axillary Nerve</p>
<p>Rib Fractures</p>	<p>Serratus * Lateral rib fractures Paravertebral Block Thoracic Epidural</p>
<p>Sternal Fracture</p>	<p>Transverse Thoracic</p>
<p>Status Postoperative Laparotomy</p>	<p>Rectus Sheath Quadratus Lumborum</p>
<p>Lower Extremity Long Bone Fracture</p>	<p>Femoral Fascia Iliaca Lateral Femoral Cutaneous Sciatic (Subgluteal & Popliteal) Adductor Canal Ankle Blocks</p>