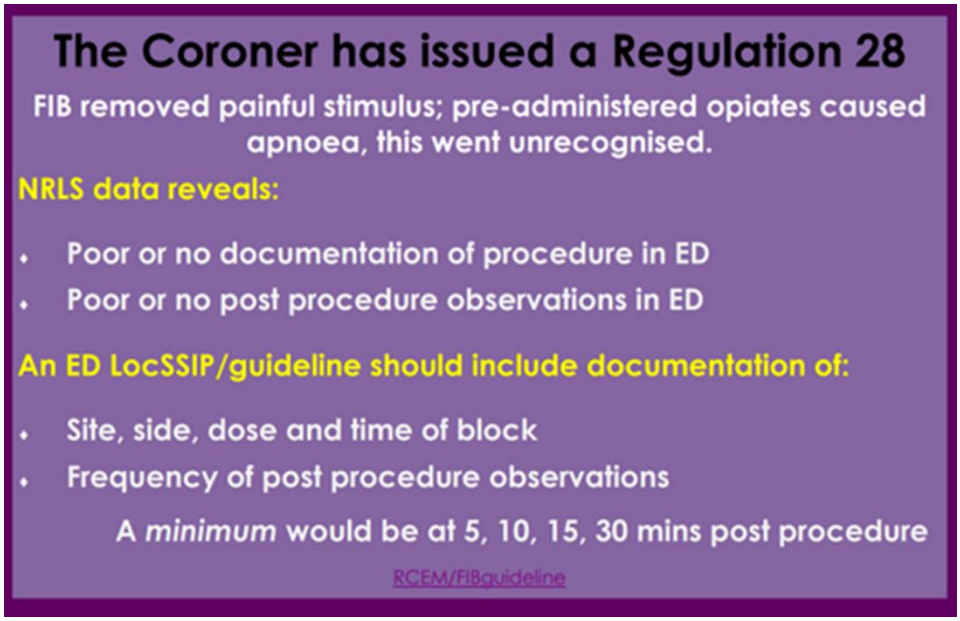
Appendix 3. RCEM guidance on fascia iliaca blocks (FIB)[30,31]

- Patients receiving an FIB should be closely monitored during the procedure and after (for a minimum of 1 hour); for both signs of local anaesthetic toxicity* and sedation effects of other analgesia that may have been given.
- Intralipid® should be easily available for treatment of local anaesthetic toxicity in clinical areas where FIB is administered.
- In departments where FIB is administered, there should be a policy available that includes details of competency assessment, monitoring of patients and treatment of complications.
- The use of an invasive procedure checklist and a 'Stop before you block' process is recommended.



Safety_Flash_Fascia_Iliaca_Block_2018.pdf

***Signs of severe toxicity:**[32]

- Sudden alteration in mental status, severe agitation or loss of consciousness, with or without tonic-clonic convulsions.
- Cardiovascular collapse: sinus bradycardia, conduction blocks, asystole and ventricular tachyarrhythmias may all occur.
- Local anaesthetic toxicity may occur some time after an initial injection.