STANDARDIZED PROCEDURE

LOCAL ANESTHESIA

These procedures are intended to describe procedures performed by Nurse Practitioners and/or Certified Nurse Midwives (depending on the clinical privileges granted to the individual practitioner) at UC San Diego Health.

I. Policy
   a. Function: To provide local anesthesia prior to an invasive procedure
   b. Circumstances:
      i. Setting: See CT Surgery NP General policy Standardized Procedure
      ii. Supervision: See CT Surgery NP General policy Standardized Procedure
      iii. Patient Conditions/Indications for Local anesthesia include but are not limited to:
         1. Patient undergoing Cardiothoracic Surgical Procedure
         2. Percutaneous drain placement
         3. Central or arterial line placement
         4. Aspiration/culture of wound
         5. Suture placement to secure a tube or line, or approximate skin edges

II. Protocol
   a. Definition: Local anesthesia for the above condition per Surgeon preference
   b. Objective: See section Ib-iii for indications
   c. Assessment: Patient which meets criteria above as per Attending Cardiothoracic Surgeon
   d. Plan:
      i. Equipment Necessary includes but is not limited to:
         1. Needle/syringe
         2. lidocaine 1% with or without epinephrine
         3. Sterile Environment (scrubbed into sterile OR, or prepped and draped in the usual sterile fashion in the ICU or ward)
      ii. Pre-procedure:
         1. Education provided prior to instillation of lidocaine in to tissues
         2. Consent signed pre-operatively for procedures performed
      iii. Patient Position:
         1. Depends on area that requires local anesthesia
      iv. Local anesthesia instillation procedure
         1. order appropriate type of lidocaine 1% with or without epinephrine
         2. Draw up lidocaine into syringe. Usuall 1-10ml of lidocaine
         3. Identify area that requires local anesthesia
4. Place needle into desired tissue (i.e. skin/subcutaneous/muscle/periosteum, pleura) draw back to prove non-cannulation of blood vessel.
5. Instill desired amount of lidocaine into desired tissue.
6. Wait a few minutes and test for patient response to medication with stimuli
7. Begin procedure
v. Patient conditions requiring Immediate Physician Attention (complications) including but not limited to:
   1. Hemorrhage
   2. Difficult/incomplete anesthesia to desired area
   3. Cardiac arrest- Emergency protocols and ACLS will be instituted
vi. Follow-up
   1. Continued evaluation and treatment throughout procedure

e. Record Keeping: See CT Surgery NP General Policy Standardized Procedures

III. Requirements for the Nurse Practitioner
   a. Education and Training: See CT Surgery NP General Policy Standardized Procedures
   b. Evaluation: See CT Surgery NP General Policy Standardized Procedures

VII. RESPONSIBILITY
Please contact the Advanced Practice Council if you need help. The administrative assistant for the Chief Nursing Officer can direct you. Call; 619-543-3438.

VIII. HISTORY OF PROCEDURE
Revised by the Committee of Interdisciplinary Practices: 2/26/2014, 9/28/2016
Reviewed by the Medical Staff Credentials Committee: 3/5/2014, 10/6/2016
Approved by the Medical Staff Executive Committee: 3/20/2014, 10/7/2016