

Referral Process: Fascia Iliaca Block for Femoral Fracture Analgesia (Adult Inpatient)

1. **Request** for FIB is made by page or telephone (not EMR) to APMS
 - FH: pager 687
 - SH: pager 5067
2. Home team **page the anaesthetic registrar** at the time FIB is required noting that:
 - FIB may not be ordered in advance for a specific time of day
 - Every effort will be made to facilitate the provision of a block in a timely manner
3. **Continue routine & offer PRN analgesia** whilst awaiting block provision
4. **DO NOT** withhold analgesia whilst awaiting block provision
 - The “rib fracture” Orderset provides age appropriate dose suggestions
5. If Additional FIB is required, please repeat steps 1- 4 above
6. **The following will assist APMS in provision of an earlier block**
 - **Consent** for repeat block obtained prior to APMS referral & attendance to perform block
 - Documentation of consent:
 1. EMR- Ensure EMR Document Name is “Repeat FIB Consent”
 2. Written consent (on paper, if obtained) in patient’s ward file.
 - Inform APMS if consent has been obtained when requesting the block
 - **IV Access:** establish prior to block
 - **Nursing staff aware:** to please prepare patient & general environment for block provision
 - Uncluttered & clean surfaces
 - Monitoring NIBP & SpO2 with audible tone