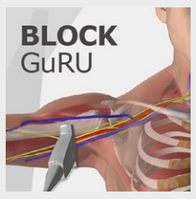
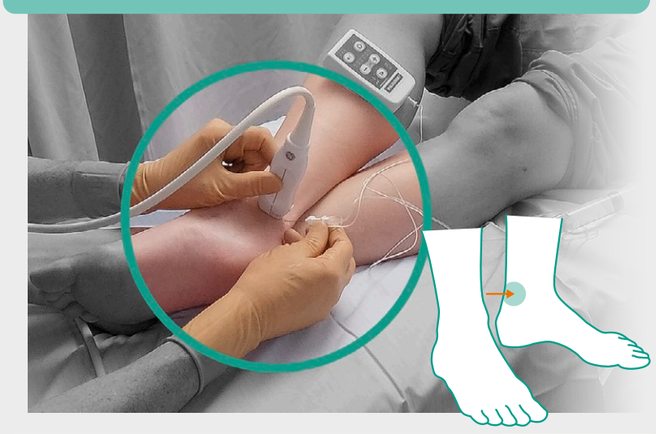


Regional Anaesthesia for Ankle

REGIONAL ANAESTHESIA & PAIN MANAGEMENT

Tibial

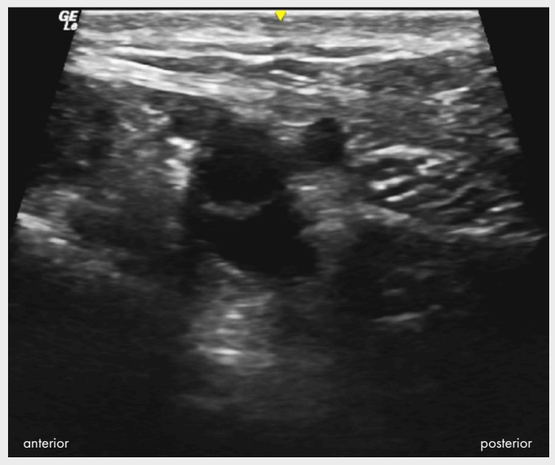


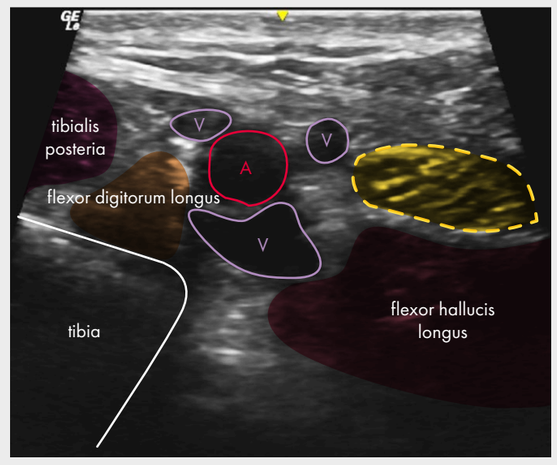
Identify: From anterior to posterior: medial malleolus, tibialis posterior, flexor digitorum longus, artery, nerve, flexor hallucis longus.

Target: Surround the nerve with local anaesthetic, using an in-plane or out-of-plane approach depending on patient morphology.

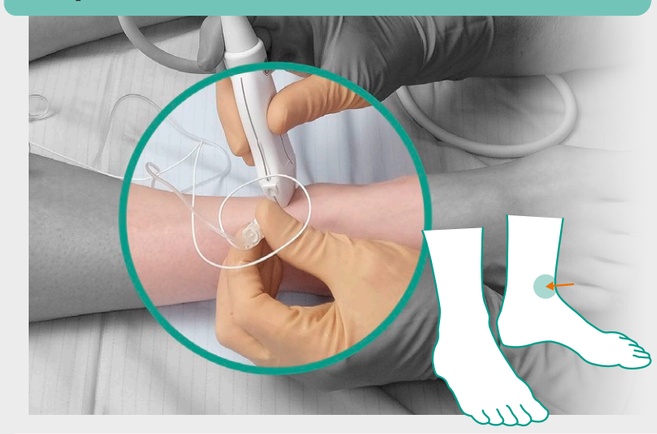
Tips: The nerve usually lies posterior to the artery and 2 veins. A small ultrasound probe is useful.

Avoid: Confusion with tendons which also exhibit anisotropy on ultrasound (flex the ankle or scan proximally to distinguish between them). Excessive probe pressure, intravascular injection.





Saphenous

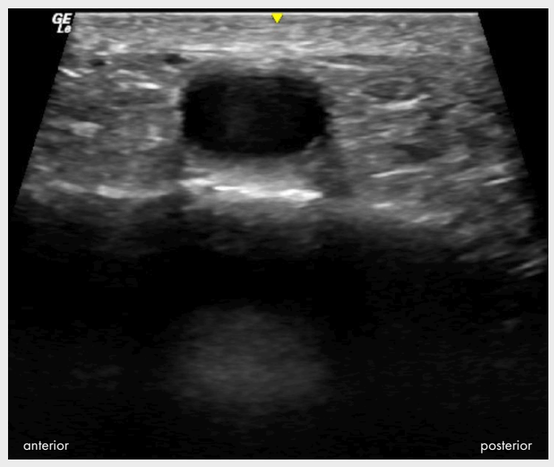


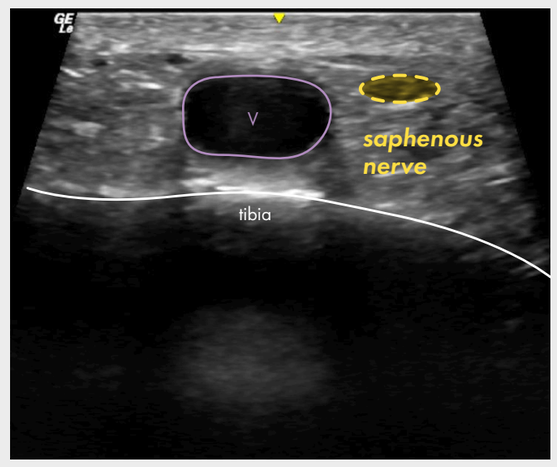
Identify: The long saphenous vein which lies very superficially, anterior to the medial malleolus; the nerve accompanies the vein.

Target: In the fascial plane around the vein if the nerve is not directly visible.

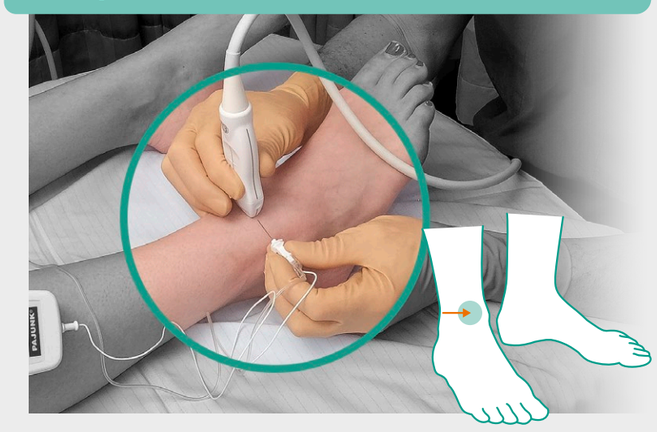
Tips: A venous tourniquet can be used to help identify the vein; use minimal probe pressure and minimal depth setting to avoid compressing the vessel.

Avoid: Excessive probe pressure, intravascular injection.





Deep Peroneal

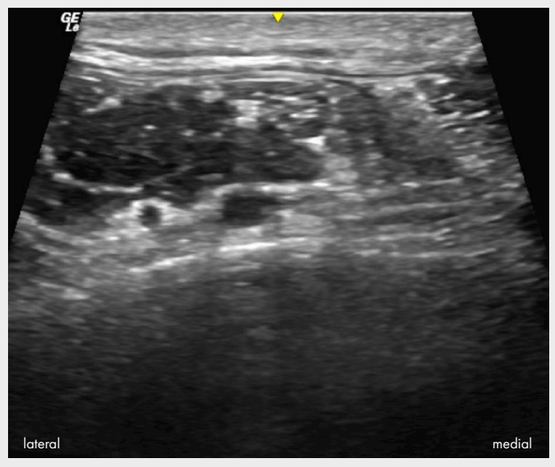


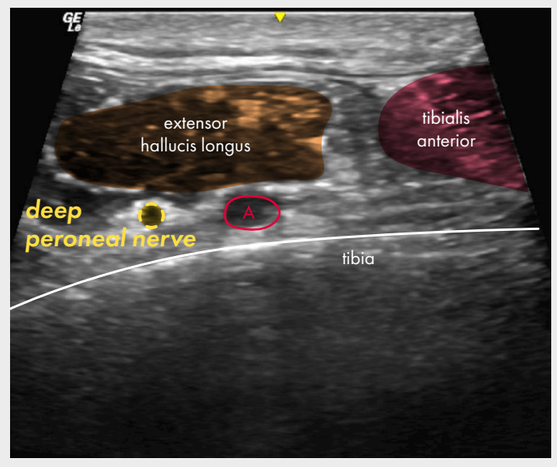
Identify: The small dorsalis pedis artery lies directly on the subcutaneous surface of the tibia. The nerve crosses over the artery from medial to lateral and this is a reliable sign.

Target: The nerve as it lies alongside the artery either on its lateral or medial side.

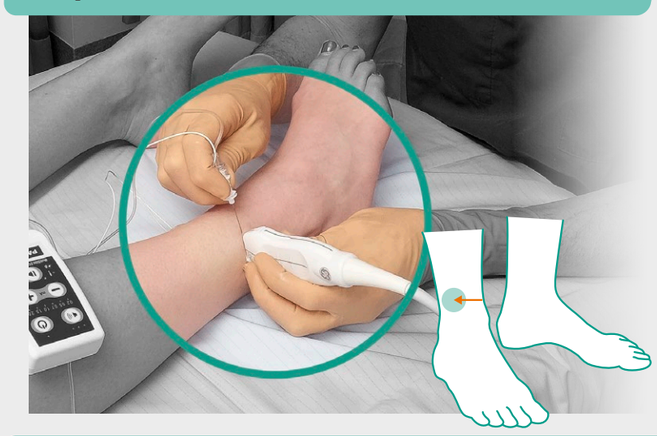
Tips: Use minimal probe pressure, minimal depth setting and scan up and down above the ankle to see the nerve crossing the artery.

Avoid: Excessive probe pressure, intravascular injection.





Superficial Peroneal

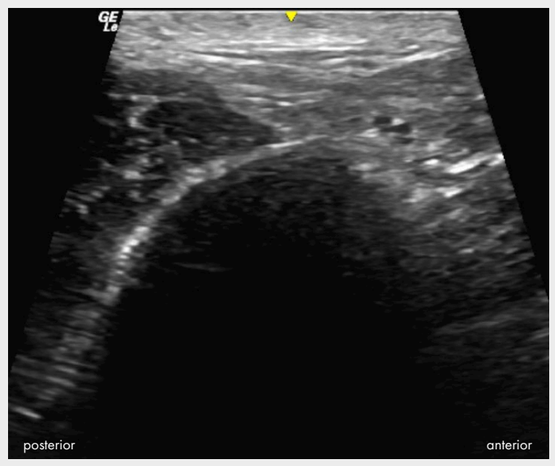


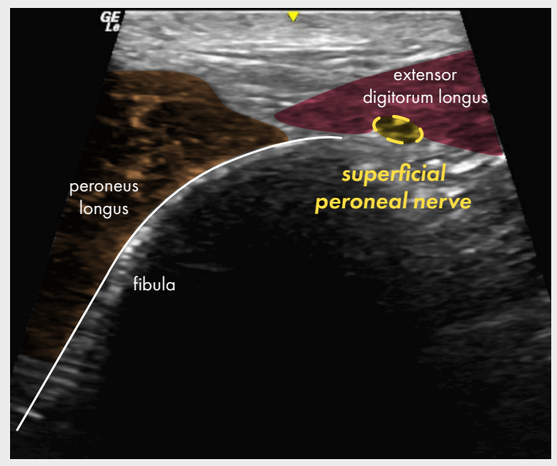
Identify: The anterior border of the fibula in the lower third of the leg has a characteristic sickle shape on ultrasound. The superficial peroneal nerve lies superficially and the sharp anterior border of the bone points to the intermuscular septum and the nerve.

Target: The nerve in the superficial tissues at any point in the leg.

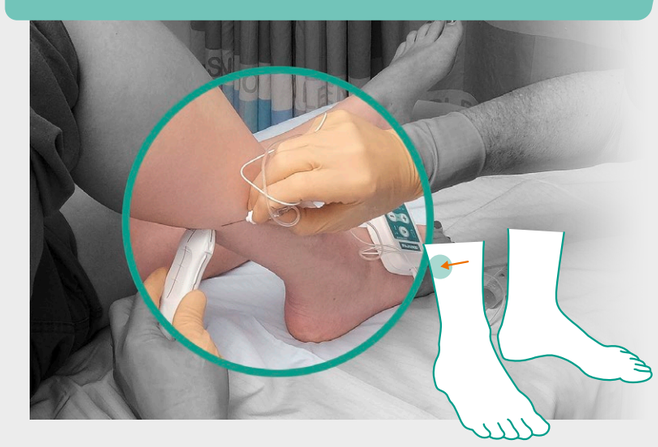
Tips: Scan up and down at a reasonable speed to identify the nerve above the bone and intermuscular septum.

Avoid: Deep injection.





Sural

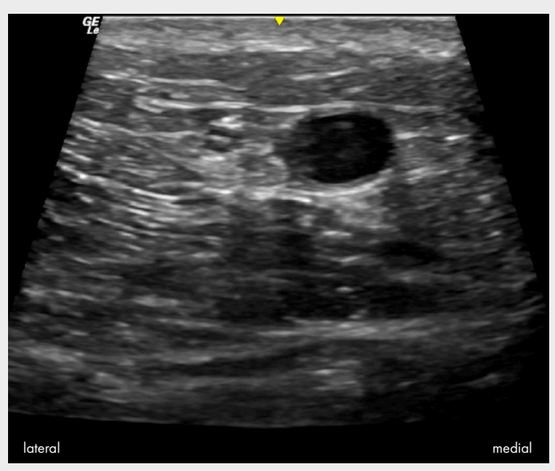


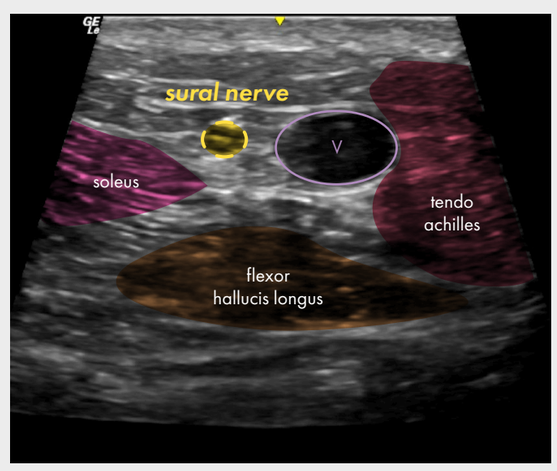
Identify: The short saphenous vein runs vertically down the back of the calf; the sural nerve accompanies the vein.

Target: The nerve directly if it is visible, otherwise the fascial plane surrounding the vein(s).

Tips: Use a venous tourniquet to help identify the short saphenous vein; flex the knee to leave room for access with the ultrasound probe.

Avoid: Excessive probe pressure, intravascular injection.





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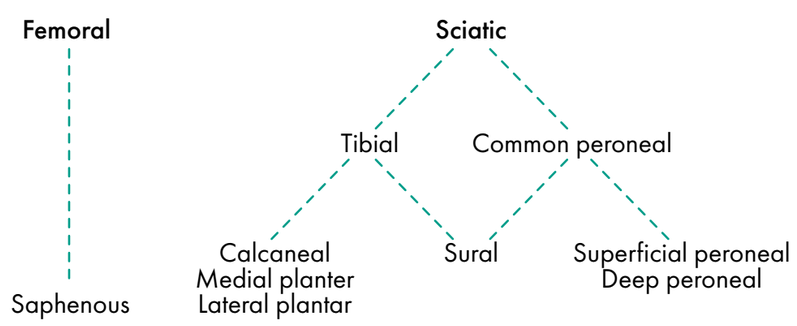

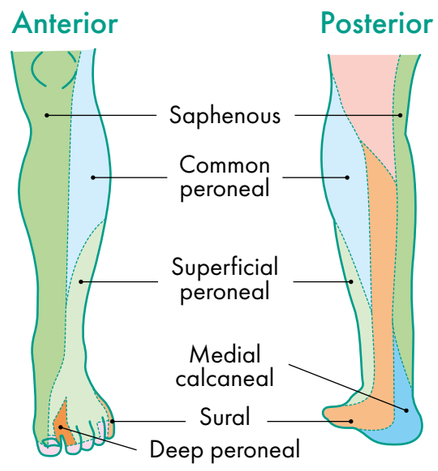

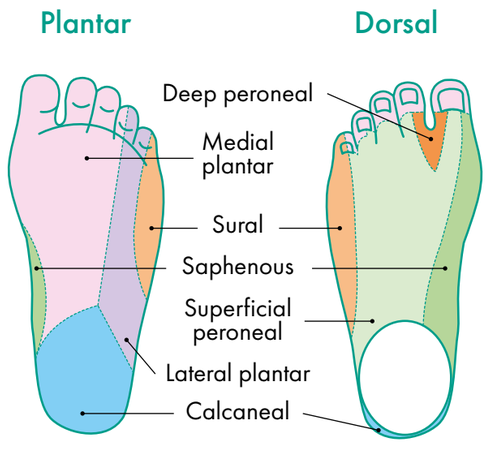

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