

A Konnyaku Jelly Model For Fascia Iliaca Compartment Block

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Introduction

- Hip fracture is a common cause of hospital admission
- Patients who receive fascia iliaca compartment block (FICB) after hip fracture have decreased opioid consumption and length of hospital stay
- We present a Konnyaku Jelly model, which can sustain multiple piercings with an 18G IV without significant deterioration

Materials and Methods

Jelly 1:

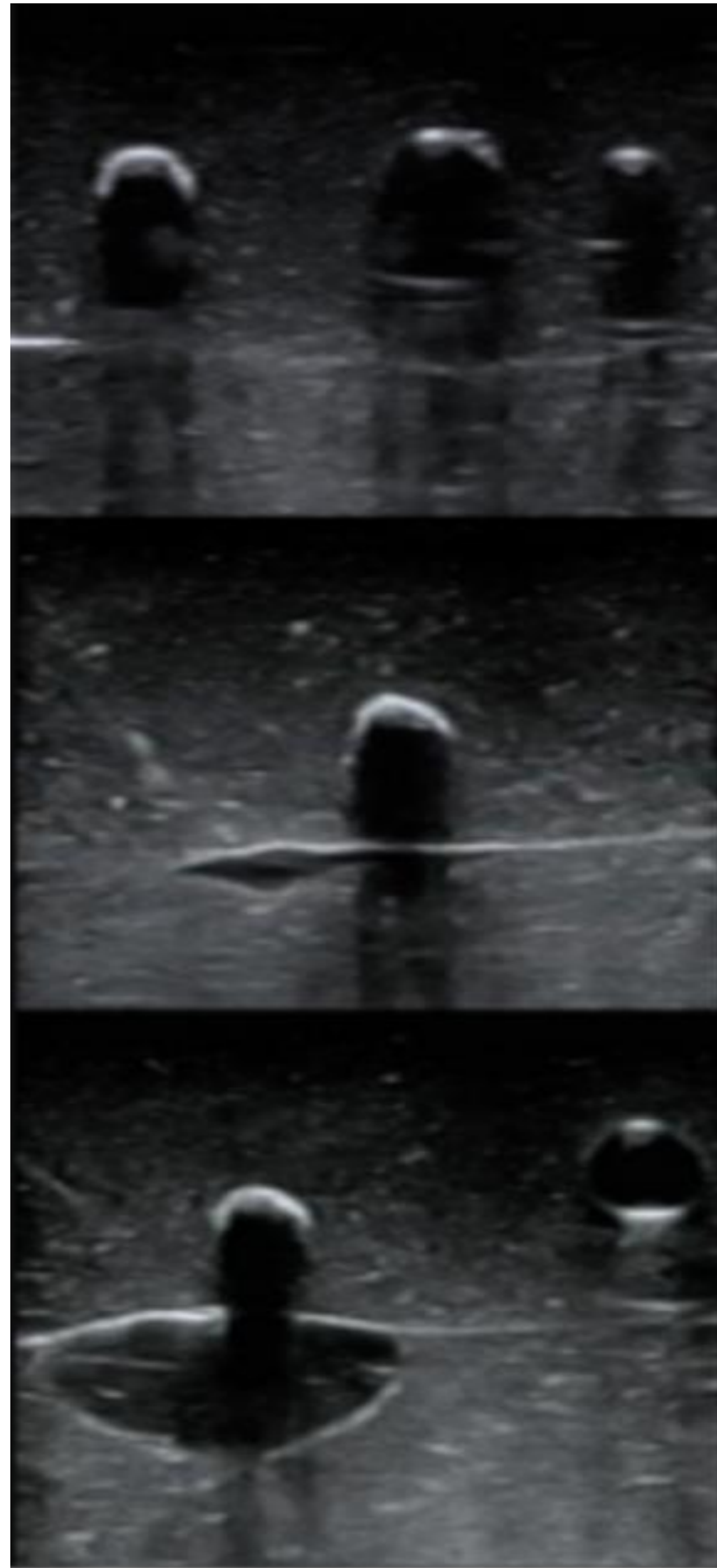
- Created three lumens to represent the femoral nerve, artery, and vein

Jelly 2:

- Created a divot in the center of the jelly
- Filled a small balloon with 1cc of saline and placed into divot

Apparatus:

- Place jelly 1 on top of jelly 2, in container filled with water



Model Under Ultrasound
Before and After Injection of Saline

Figure 1: Demographics and Experience of Participants

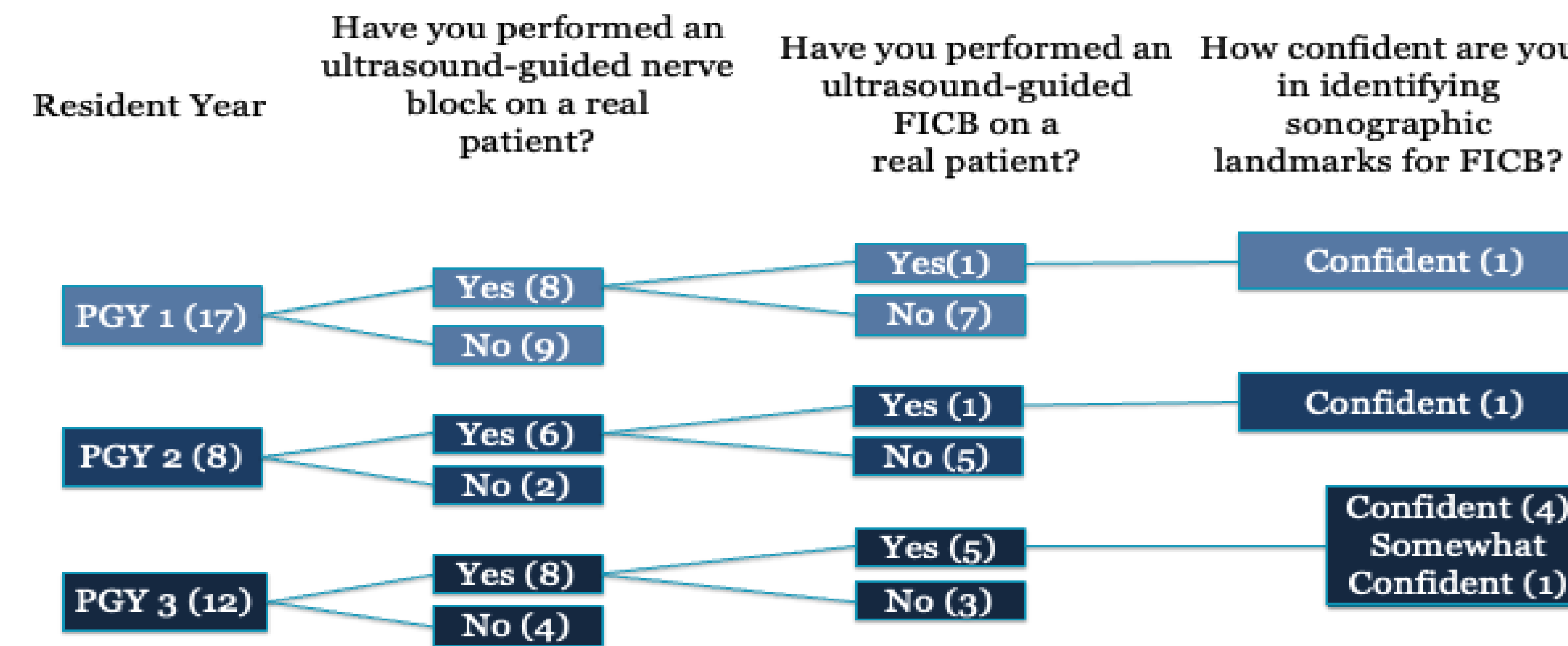


Figure 3: Strength of the Model as a Teaching Tool

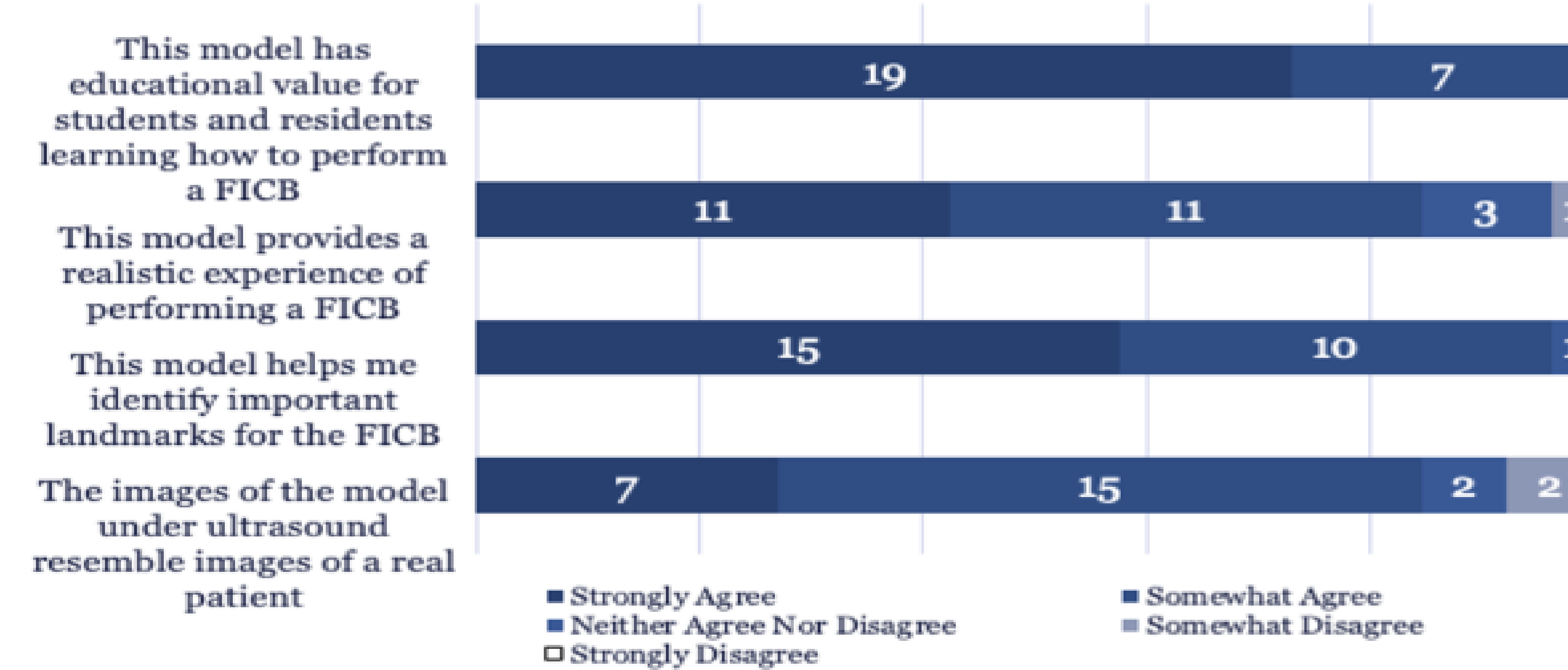
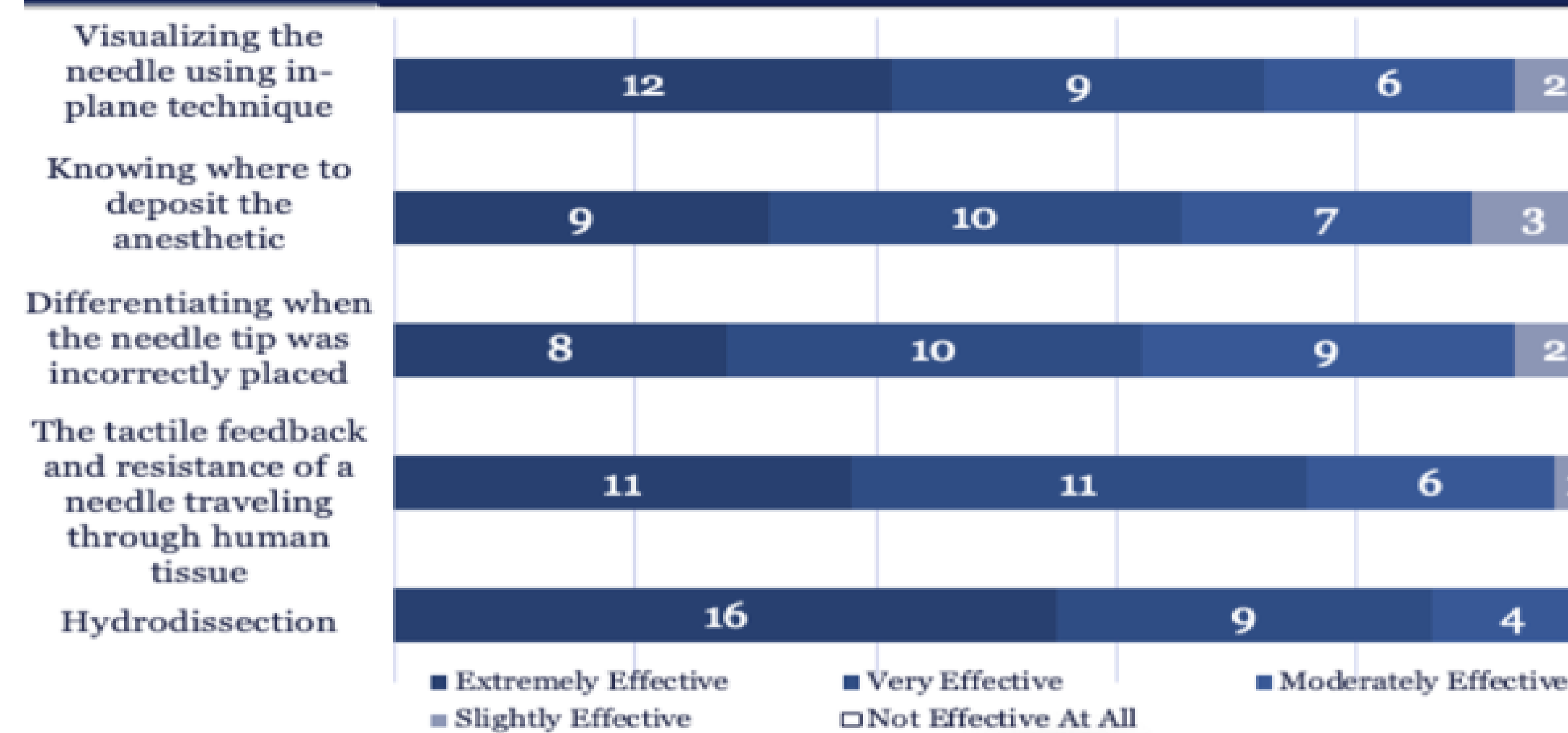


Figure 2: Effectiveness of the Model in Demonstrating Various Ultrasound Techniques



Results

- 37 residents participated in the survey
- 59% of participants had performed an ultrasound-guided nerve block, 32% had performed a FICB (19% of total)
- 100% agree that the model has educational value and is helpful in identifying landmarks.

Discussion

- The Konnyaku jelly model is a cost effective, accurate, and easy to assemble FICB trainer
- The model is easily accessible, made at a low cost, and can be used as a teaching tool
- Representative of several ultrasound techniques which assist in providing a realistic experience
- Improves physician comfort with the procedure and has the potential to increase utility of nerve blocks as an alternative to narcotics
- Future directions may involve using the Konnyaku jelly model to create other ultrasound-guided nerve block trainers

References

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Model Assembly