

*Interscalene Perineural Catheter for Post-Operative Pain Control Following Forequarter Amputation:
A Case Report*

👤 Azeem Sajjad MD, Arvind Murthy MD

INTRO

- A forequarter amputation involves removal of the entire upper extremity, including the arm, scapula, a portion of the clavicle, and dissects across the brachial plexus.
- We describe the use of an interscalene perineural catheter for analgesia after a right-sided forequarter amputation.

METHODS

- Consent was obtained from the patient in order to review and collect information regarding their care during this hospitalization
- In the post-anesthesia care unit, an 18g open-ended interscalene perineural catheter was placed under ultrasound guidance using a 21g needle to a depth of 4 centimeters. A total of 10 mLs of 0.5% ropivacaine was injected with good visualization of spread around the roots of the brachial plexus.
- The catheter was connected to a pump and an infusion of 0.2% ropivacaine was started at 8 mL/hour.
- The patient was followed by the anesthesia pain service during her inpatient stay.

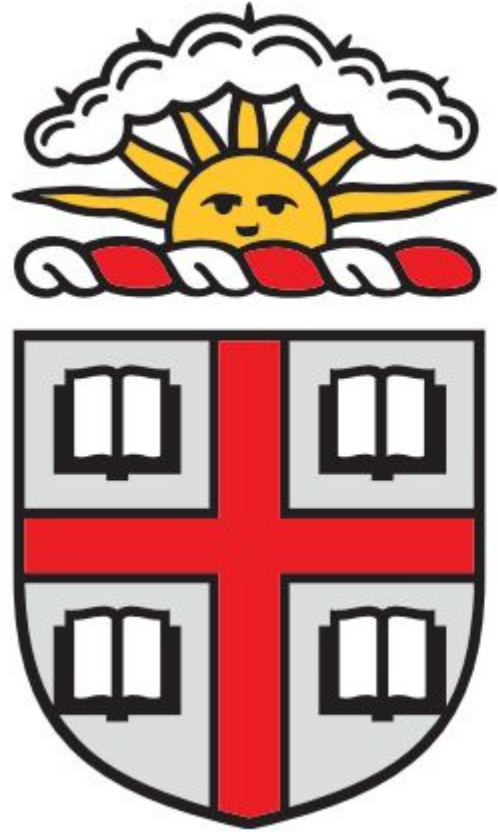
RESULTS

- On postoperative days 1, 2, and 3 the patient reported satisfactory pain control with pain levels of 1/10, 3/10, and 2/10 respectively.
- The infusion rate was continued at 8 mL/hour during this period.
- On postoperative day 4, when the catheter was removed, the patient reported increased pain.

DISCUSSION

- This report demonstrates the successful use of an interscalene perineural catheter for analgesia after a right-sided forequarter amputation.

An interscalene perineural catheter can provide adequate analgesia following forequarter amputation.



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