

# Ambulatory Meniscectomy Using Epidural Dosed 2-Chloroprocaine 3%

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## Case Presentation

- **54-year-old female with a history of hypothyroidism and malignant neoplasm of the breast (status post partial mastectomy).**
- **Scheduled for meniscectomy due to a degenerative tear of the medial meniscus.**
- **Patient reported an “adverse reaction” to general anesthesia and sedatives.**
- **Requested the procedure be performed under regional anesthesia with minimal sedation.**
- **Epidural technique with 2-Chloroprocaine 3% + premedication with midazolam.**
- **The procedure proceeded smoothly.**
- **The epidural was removed post-procedure.**
- **Patient recovered without complications and was discharged home without issues.**

## Introduction & Background

- **Ambulatory surgery** is rapidly becoming the preferred model for procedures requiring same-day discharge.
- **Tailoring anesthesia** to individual patient profiles, especially those with known sensitivities, can optimize outcomes and enhance patient satisfaction.
- **Meniscectomy** involves the partial or total removal of a torn meniscus to alleviate pain and restore knee function.
- **Arthroscopic techniques** reduce invasiveness, leading to quicker recovery and reduced hospital stay.
- **2-Chloroprocaine** is a short-acting local anesthetic offering rapid onset and quick recovery, ideal for short procedures. Its favorable pharmacokinetic profile minimizes systemic exposure and potential toxicity, a critical consideration for patients with adverse reactions to general anesthesia.

## Discussion & Conclusion

- This case exemplifies the importance of **individualized anesthetic planning**, especially for patients with known sensitivities.
- The use of 2-Chloroprocaine in an epidural approach provided an effective balance between rapid onset and rapid recovery, aligning with the demands of ambulatory surgery.
- **Regional Anesthesia in Ambulatory Settings** minimizes systemic side effects (e.g., postoperative nausea, sedation) associated with general anesthesia and enhances postoperative recovery and early ambulation, which are crucial for same-day discharge.
- Incorporating regional techniques can reduce overall resource utilization and improve patient satisfaction.

