

Nerve Damage.

This is very rare and usually will resolve with time without needing any further treatment. If your child's arm is not back to normal 48 hours after surgery please contact our pain team for follow up.

CARE AT HOME AFTER UPPER LIMB NERVE BLOCKS

Upper limb nerve blocks are performed on the shoulders, around the collar bone or the arm or forearm. They will provide excellent pain relief by making the arm numb and the muscles weak.

Your child's arm should remain in the sling provided for support and protection until the strength in their arm has returned.

Please take care around heat sources, such as fires or radiators, due to the risk of burns, or other injuries while their arm is still feeling numb. Avoid putting too much pressure on their arm while it is numb and allow your child to rest their arm fully until the numbness has gone and the power has returned in their arm.

Remember: Ask your nurse if you are unsure about anything regarding your child's care.



HOW TO CONTACT US

If you have any concerns following an upper limb nerve block please contact CHI-C Switch board at

Tel: 01 409 6100 and ask for **Pager 8300** (Pain Management Nurse) from Monday to Friday 9am-5pm or **Pager 8528** (Anaesthesiologist on call) outside of these hours.

ADDITIONAL INSTRUCTIONS



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Children's Health Ireland



Pain Relief After Upper Limb Nerve Blocks

Information for Parents & Carers

WHAT IS AN UPPER LIMB NERVE BLOCK?

Nerves carry sensation messages (hot, cold and pain) and movement messages to our skin, bones, muscles and tendons. A nerve block will temporarily block these messages, leaving the area the nerve supplies feeling numb, and the muscles feeling weak. This injection around a nerve or group of nerves will stop your child feeling pain when they have surgery, and reduce the pain felt as your child recovers after surgery too. An experienced anaesthesiologist will inject a numbing medicine around the target nerves when your child is under general anaesthesia.

WHY HAVE AN UPPER LIMB NERVE BLOCK?

There are many types of upper limb nerve blocks. The area will be chosen based on the exact side of the body and type of surgery your child is going to have. Most common sites include side of the neck, above or below the collar bone, armpit or the arm. Your anaesthesiologist will tell you which nerve block is suitable for your child's specific operation and discuss the risks/benefits of the nerve block with you.

WHAT ARE THE COMMON SITES FOR UPPER LIMB NERVE BLOCKS?

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HOW IS THE NERVE BLOCK PERFORMED?

After your child is asleep, their arm or shoulder will be positioned for the nerve block. The skin around the injection site is cleaned with antiseptic solution. The nerves are located using an ultrasound machine or by using a machine that makes your muscle twitch. Once the nerves are seen, numbing medicine is injected close to the nerve and the needle removed.

Some older children or teenagers may choose to stay awake for the nerve block and surgery, sometimes with relaxing medicine known as sedation if they would like to help them keep calm. In these cases, your anaesthesiologist will make sure the area is completely numb before the surgery starts. As the block wears off regular paracetamol and ibuprofen should be given so that they are working when the numbness has worn off.

RISKS OF NERVE BLOCKS

Mild bruising or mild bleeding where the nerve block was performed is often seen, but usually does not need treatment. Sometimes the nerve block may fail to provide complete pain relief. If this happens, extra pain medication will be given to your child. Other risks, listed below, usually only last for a few hours if they happen.

These include:

- ➔ Risks of Injection in the side of the neck
- ➔ Hoarse voice/ difficulty swallowing
- ➔ Droopy eyelid on the same side
- ➔ The pupil of the eye might be smaller on the same side as the injection
- ➔ Mild difficulty breathing

Risks of injection around the collar bone

In less than 1 in a thousand cases there can be damage to the covering of the lung, which can cause an air leak (pneumothorax). If it happens, your child might feel short of breath, or have pain in their chest when they breathe. If they have these side effects, tell your anaesthetist. The air leak can be slow, and shortness of breath can happen up to 24 hours after surgery. If you are at home and your child develops shortness of breath or pain in their chest when they breathe, come back to our Emergency Department and tell them about the block. It sometimes needs to be treated.

Drug allergy or Toxicity.

These are very rare but potentially serious complications. Your child will be monitored closely for any signs of these issues and treated immediately by their anaesthesiologist if they happen.

