

PERIPHERAL REGIONAL / LOCAL ANAESTHESIA CATHETERS

STANDARD OPERATING PROCEDURE (SAPPHIRE PUMP)



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APPLICATION AND USE CASE

This guidance is designed for anaesthesia/critical care physicians and specialist prescribers using regional anaesthesia catheter techniques to support patient care.

This includes the following techniques:

- Rectus sheath catheters
- Transversus abdominis plane catheters
- Peripheral nerve catheters (single and double catheters)
- Chest wall catheters (including but not limited to paravertebral, serratus anterior, and erector spinae plane catheters; single and double catheters)
- Any other fascial plane catheters

For guidance on how these catheters should be sited, assessed, and reviewed, please refer to the clinical guideline titled 'Clinical Guidelines for the Management of Continuous Peripheral Nerve Catheter Local Anaesthetic Infusions for Pain Relief in Adult Patients'. This can be found on the Barts Health Intranet.



SUMMARY: PRESCRIBING AND SET-UP

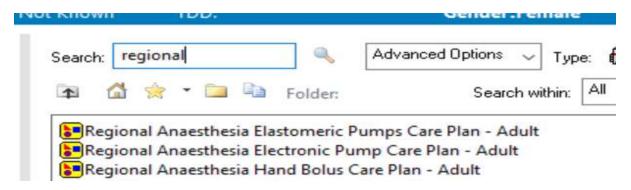
This one-page summary is intended as an aide-memoire or refresher for the prescription and set-up of the Sapphire local anaesthetic infusion pumps. For more detailed information, please refer to the rest of this guideline.

- 1. Confirm availability of Sapphire adult regional anaesthesia pump and desired local anaesthetic prior to siting a peripheral nerve or fascial plane catheter.
- **2. Site an appropriate catheter** according to the acuity of patient need and clinical guidelines.
- 3. Complete EPMA prescription and Acute Pain team referral:
 - a. Use the 'Regional Anaesthesia Electronic Pump Adult' care plan on CRS
- 4. Set-Up Sapphire Pump:
 - a. On/Off switch
 - **b.** Select appropriate Clinical Care Area (CCA) for catheter technique and patient weight
- **5. Confirm the prescription** on the pump and EPMA match
- **6. Prime the Sapphire pump** with the appropriate NRFit giving set and local anaesthetic
- **7. Ensure that the patient's infusion pump is connected** prior to them leaving the operating theatre or anaesthetic room



PRESCRIBING

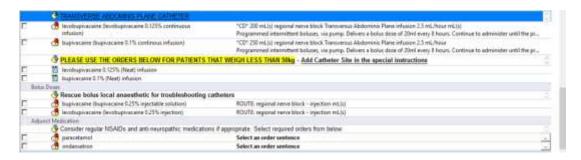
1. All local anaesthetic infusions should be prescribed via EPMA using the care plan labelled 'Regional Anaesthesia Electronic Pump – Adult'.



- 2. Please complete the prescription prior to programming the pump.
 - a. This will allow prescribers to confirm the dose (continuous infusion rate, or bolus dose and delivery interval) administered against the prescription.
 - b. Please see appendices 1 and 2 for the prescriptions for each CCA.



- 3. The same care plan should be used to prescribe:
 - Rescue boluses delivered by specialist healthcare professionals to troubleshoot catheters





ONWARD REFERRAL

<u>All patients</u> having an indwelling regional anaesthesia catheter technique should be referred to the Acute Pain team via the 'Regional Anaesthesia Electronic Pump – Adult' care plan on CRS. This will be linked in all appropriate care plans as per Fig. 1.

Alternatively, an electronic referral can be completed by using the form 'Refer to Pain Team – Inpatient' on Millenium. Out of hours, clear handover to the on-call anaesthetic resident doctor should be undertaken.



LOCAL ANAESTHETIC DOSING AND CONSIDERATIONS

The prescriptions have been calculated to accommodate both a single-shot bolus and the cumulative twenty-four hour dose according to BNF and manufacturer guidance.

For fascial plane blocks, it is worth considering the total *volume* if a bolus dose has been administered before connecting the pump.

Type of Programme	Bolus Dose	Infusion Dose	
Patients Over 50kg: Continuous Infusions			
Peripheral Nerve Catheters	Follow normal practice	Follow normal practice (connect pump after loading)	
Patients Over 50kg: Intermittent Bolus			
Rectus Sheath Catheter	Consider reducing	Follow normal practice (connect pump after loading)	
	volume to 20-30mls		
TAP catheter	Follow normal practice	Follow normal practice (connect pump after loading)	
Chest wall catheter			
Patients Under 50kg			
All clinical applications	Follow normal practice	Follow normal practice (connect pump after loading)	

LEVOBUPIVACAINE	BUPIVACAINE	
Maximum bolus dose: 3mg/kg	Maximum bolus dose: 2mg/kg	
Maximum total 24 hour dose 400mg	Maximum total 24 hour dose 400mg	
There is little guidance on how best to modify toxic doses for lower weights; but this paper would suggest		
reducing total dose by 20-30%.		



INFUSION PUMP (SAPPHIRE) USER GUIDE

For local anaesthetic infusions (*not* an epidural catheter), please ensure the pump has a grey face, and is labelled 'Multi therapy'.

Please note that although this is a multi-therapy pump, the system always turns on in 'Epidural' mode – the word 'Epidural' is in a yellow box in the top right corner of the pump face at all times. Users should select 'Epidural' when prompted to by the pump system (see step by step guides below). Accordingly, the system's terminology for continuous infusions is 'PCEA'; and the term for intermittent bolus regimes is 'Intermittent'.

The following represent a step-by-step guide to setting up infusions on the Sapphire pumps. Please make sure you check Appendices 1 and 2 to confirm whether your infusion is an intermittent bolus ('Intermittent) or a continuous infusion ('PCEA') regime.

SOP 1: Setting Up Intermittent Bolus ('Intermittent') Infusions On The Sapphire Pump

SOP 2: Setting Up Continuous Infusions ('PCEA') On The Sapphire Pump

SOP 3: Setting Up Continuous Infusions ('PCEA') On The Sapphire Pump For Patients Under 50kg



SOP 1: Setting Up PIEB Infusions On The Sapphire Pump Using OVER50 1xCWC BUP as an example

Correct CCA Selection Using the Drug Library Confirming the Correct Prescription 1. Turn Pump On 4. Select 'New Infusion' 8. Enter the correct VTBI 2. Confirm / select CCA- the CCA name will be 5. Confirm 'New Patient' 9. Confirm the dose (mls) and the time interval displayed in the top left hand corner 6. Use the 'Find' button or the alphanumeric 10. Do not enter a continuous rate 3. Select 'Epidural' and 'Intermittent' if keypad to select the appropriate drug 11. Confirm the settings match the EPMA prompted 7. Confirm the drug + concentration prescription





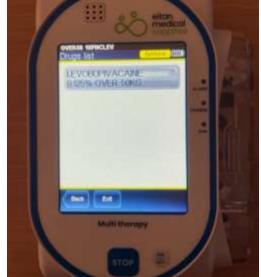


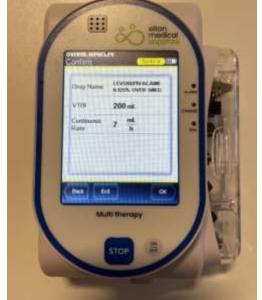
Start the infusion; priming beforehand if needed



SOP 2: Setting Up Continuous Infusions On The Sapphire Pump Using OVER 50 1xPNC LEV as an example

Correct CCA Selection	Using the Drug Library	8. Enter the correct VTBI 9. Confirm the dose (ml/hour) 10. Confirm the settings match the EPMA prescription	
 Turn Pump On Confirm / select CCA- the CCA name will 	4. Select 'New Infusion' and enter passcode5. Confirm 'New Patient'		
be displayed in the top left hand corner 3. Select 'Epidural' and 'PCEA' if prompted	6. Use the 'Find' button or the alphanumeric keypad to select the appropriate drug7. Confirm the drug + concentration		
Owned triedly	Overland somical of the control of t	Chief Plane: I. CVORSHW AC And S. COST. UNIV. SMILD. VYEB 260 rel. Clarification: 7 rel. Flavor 7 s.	





Start the infusion; priming beforehand if needed



SOP 3: Setting Up Continuous Infusions On The Sapphire Pump For Patients Under 50kg <u>Using UNDER 50KG BUP as an example</u>

Correct CCA Selection	Using the Drug Library	Confirming the Correct Prescription
 Turn Pump On Confirm /select CCA – the CCA name will be displayed in the top left hand corner 	 Select 'New Infusion' Confirm 'New Patient' Use the 'Find' button or the alphanumeric keypad to select the appropriate drug Confirm the drug + concentration 	 7. Enter the correct VTBI 8. Confirm the dose (ml/hour) 9. Confirm the settings match the EPMA prescription (scroll through to next page to confirm rate)







Start the infusion; priming beforehand if needed



TROUBLESHOOTING

Clinical Concerns: Escalation

For all issues related to the clinical management of peripheral nerve or fascial plane catheters, please escalate to:

• In hours: the Acute Pain team

Out of hours: the anaesthesia resident on call

Equipment / Drug Shortage

In the event of a shortage of local anaesthetic infusion bags or pump delivery systems, the second line local anaesthetic delivery modality is via hand boluses. This should only be undertaken on a critical care or renal high dependency unit setting, with appropriately trained staff and adequately monitored patients.

An appropriate care plan can be found on EPMA using the label 'Regional Anaesthesia Hand Bolus – Adult'.

Equipment Failures

For all issues related to equipment failure, please isolate the relevant piece of equipment and contact the Service Manager for Medical Equipment and Pain Management or Medical Engineering.



Appendix 1: CCA Programmes For Patients Over 50kg

Please note that this list matches the order of the CCAs on the Sapphire Pump. Please ensure that you have selected the correct technique as well as local anaesthetic depending on availability.

CCA Programmes For Patients Over 50kg			
Technique	CCA Name	Delivery Mode	Prescription
Chest Wall Catheter x1 (Bupivacaine)	OVER50 1XCWCBUP	Intermittent Bolus	15 mls 0.1% bupivacaine every 3 hours
Chest Wall Catheter x1 (Levobupivacaine)	OVER50 1XCWCLEV	Intermittent Bolus	15 mls 0.125% levobupivacaine every 3 hours
Peripheral Nerve Catheter x1 (Bupivacaine)	OVER50 1XPNCBUP	Continuous (PCEA)	7mls/hour 0.1% bupivacaine
Peripheral Nerve Catheter x1 (Levobupivacaine)	OVER50 1XPNCLEV	Continuous (PCEA)	7mls/hour 0.125% levobupivacaine
Chest Wall Catheter x2 (Bupivacaine)	OVER50 2XCWCBUP	Intermittent Bolus	20 mls 0.1% bupivacaine every 3 hours
Chest Wall Catheter x2 (Levobupivacaine)	OVER50 2XCWCLEV	Intermittent Bolus	20 mls 0.125% levobupivacaine every 3 hours
Peripheral Nerve Catheter x2 (Bupivacaine)	OVER50 2XPNCBUP	Continuous (PCEA)	14mls/hour 0.1% bupivacaine
Peripheral Nerve Catheter x2 (Levobupivacaine)	OVER50 2XPNCLEV	Continuous (PCEA)	14mls/hour 0.125% levobupivacaine
Rectus Sheath Catheter (Bupivacaine)	OVER50 RSC BUP	Intermittent Bolus	30 mls 0.1% bupivacaine every 3 hours
Rectus Sheath Catheter (Levobupivacaine)	OVER50 RSC LEV	Intermittent Bolus	30 mls 0.125% levobupivacaine every 3 hours
TAP Catheters (Bupivacaine)	OVER50 TAP BUP	Intermittent Bolus	20 mls 0.1% bupivacaine every 8 hours
TAP Catheter (Levobupivacaine)	OVER50 TAP LEV	Intermittent Bolus	20 mls 0.125% levobupivacaine every 8 hours



Appendix 2: CCA Programmes For Patients Under 50kg

CCA Programmes For Patients Under 50kg			
Technique	CCA Name	Delivery Mode	Prescription
All patients under 50kg (Bupivacaine)	UNDER 50KG BUP	Continuous (PCEA)	0.125mg/kg/hour 0.1% bupivacaine
All patients under 50 kg (Levobupivacaine)	UNDER 50KG LEV	Continuous (PCEA)	0.125mg/kg/hour 0.125% levobupivacaine

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Appendix 3: Manufacturer's Quick Reference Tip Card for MultiTherapy Pumps



Sapphire™ Tip Card

