



CLINICAL GUIDELINE

Epidural Top Up Bundle

A guideline is intended to assist healthcare professionals in the choice of disease-specific treatments.

Clinical judgement should be exercised on the applicability of any guideline, influenced by individual patient characteristics. Clinicians should be mindful of the potential for harmful polypharmacy and increased susceptibility to adverse drug reactions in patients with multiple morbidities or frailty.

If, after discussion with the patient or carer, there are good reasons for not following a guideline, it is good practice to record these and communicate them to others involved in the care of the patient.

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Important Note:

The Intranet version of this document is the only version that is maintained. Any printed copies should therefore be viewed as 'Uncontrolled' and as such, may not necessarily contain the latest updates and amendments.

EPIDURAL TOP UP FOR CS/ TRIAL OF FORCEPS

2% LIGNOCAINE WITH 1:200 000 ADRENALINE

ASSESS BEFORE TOP UP

Top up if

- Parturient is currently comfortable
- Has not had more than 2 top ups in addition to PCEA
- There is enough time for a top up

TOP UP - STEPS OF 5

- 5 mL in room
- 5 mL boluses in theatre to a maximum of 20 mL
- 5 minutes between top ups
- Assess block just before next bolus
- Next bolus if block is progressing

FENTANYL 50 µg BETWEEN 3RD AND 4TH LA BOLUS

DIAMORPHINE 3mg AFTER DELIVERY

CHECK BLOCK FOR SECTION

- Sensory – T4 or higher to cold spray
- Motor – no movement or moving toes
- Bilateral symmetrical block

PAUSE BEFORE CONVERSION

CONSIDER

- Have you allowed enough time for the top up/ regional to take effect?
- Was the regional difficult to insert?
- Is time available to convert?
- Is airway/ intubation difficulty anticipated?
- Does the mother have good quality venous access?

SPINAL AFTER FAILED EPIDURAL TOP UP REPEAT SPINAL AFTER FAILED SPINAL

WATCH FOR HIGH BLOCK

- Use lower dose for spinal Bupivacaine - 1.8 to 2.0 mL
- Consider CSE if dose calculation is uncertain (short/ tall stature, small baby/ early gestation)

GA AFTER FAILED REGIONAL PAIN DURING CS

DOCUMENTATION

- Check airway
- Check venous access
- GA checklist