

Quick Checklist of Issues to Consider Before Spinals or Epidurals

It is not practical to list all of the medical issues that may contraindicate neuraxial technique use, and the care team must consider all aspects of each patient. This checklist includes topics that are important for starting a discussion that can help lead to safer epidural and spinal placement, and can remind you of some frequently considered issues.

- ☐ Avoid needles in the back when there is a known bleeding diathesis. For healthy patients with no history of bleeding problems, no lab work is usually necessary before a neuraxial block. When there is concern for abnormal coagulation or thrombocytopenia, or anticoagulant or antiplatelet medications are being used, consider sending laboratory tests.

We like to see Platelet counts $> 80,000$, but after a discussion of risks and benefits, it is sometimes safe to proceed with lower platelet counts.

We like to see normal coags, specifically (INR ≤ 1.5 , PTT < 35).

- ☐ Confirm patient is **NOT** receiving an anticoagulant that is a strong contraindication to a neuraxial technique. **You MUST check the MAR for one-time meds as well.** Some of these drugs have effects that are not seen on Coagulation Tests!

For recommendations on placement of a regional technique for patients taking IV Heparin, LMWH, Plavix, Fragmin, etc., go to the Ethercentral website and under the “Guidelines and Policies” link, click on “Anticoagulation and Neuraxial Anesthesia/Analgesia.”

- ☐ No concerns for intra-cranial hypertension (elevated ICP)
- ☐ Considered the risks and benefits of the technique if the patient has a history of back surgery/hardware or a neurologic condition that will complicate block.
- ☐ Patient does NOT have an active infection on the skin at the site of the intended placement.
- ☐ Considered that the patient is NOT in shock where the management would be complicated with a neuraxial block.
- ☐ Considered the risks and benefits of a neuraxial approach in a patient with significant cardiac valvular disease or myocardial dysfunction.