

Basics of Neuraxial Analgesia

31 year old G2P1 at 39 weeks presents for a scheduled induction of labor. She has a history of GERD during pregnancy but is otherwise healthy. Her BMI is 40 kg/m². Several hours into her induction, she requests a labor epidural for pain relief.

1. What landmarks on the back help determine epidural placement? What structures do you encounter when placing an epidural? What dermatomes are you trying to cover with your epidural for a laboring patient?
2. Would you use air or saline as your loss of resistance medium? Why? What is the difference between loss of resistance (LOR) & hanging drop techniques for epidural placement?
3. How much catheter will you leave in the epidural space? What can you do if blood returns through epidural catheter? How do we test the epidural catheter and what are we testing for?