

## Inland Imaging at Holy Family Hospital - Diagnostic Ultrasound

### ULTRASOUND-GUIDED SUPERFICIAL PERONEAL NERVE BLOCK LEFT

#### CLINICAL INFORMATION:

51-year-old female left superficial peroneal mononeuropathy of uncertain etiology with deep crampy pain extending from the fibular neck distal to the foot. No reported dysesthesias foot despite abnormal EMG

#### COMPARISON:

MRI knee December 27, 2011

#### PROCEDURE:

Therapeutic ultrasound guided superficial peroneal nerve block left lower extremity

#### FINDINGS:

Following review clinical notes and prior imaging studies (discussion of the patient with Dr. Soto prior to scheduling), written informed consent was obtained.

As the left superficial peroneal nerve, poorly visualized distal to the crural perforation, and was adequately visualized subcrural in the mid calf between the extensor pollicus longus and the extensor digitorum longus, subcrural site was selected.

Following sterile prep and drape and utilizing a 50/50 admixture of 1% lidocaine and 0.5% bupivacaine local, a 22 gauge 1.5 inch needle was placed adjacent to the superficial peroneal nerve and anesthetic infiltrated both lateral and medial to the nerve.

The patient tolerated the procedure well with no complications during nor following the study.

**IMPRESSION:** Sonographic guided distal subcrural left peroneal nerve block. The patient was instructed to record changes and sensory and motor function as well as recovery from such over the next 3-4 days. She is report these findings to her physician with her short-term follow-up.