Local Anesthetic Systemic Toxicity Checklist

- Call for help
- Get LAST rescue kit
- Consider cardiopulmonary bypass team

Consider administering LIPID EMULSION early

LIPID EMULSION 20%
The order of administration (bolus or infusion) and method of infusion (manually, iv roller clamp, or pump) are not critical

IF PATIENT REMAINS UNSTABLE:
- Repeat bolus
- Double infusion

over 70 kg

IF PATIENT REMAINS UNSTABLE:
- Bolus =1.5 mL/kg over 2-3 min
- Infuse = 0.25 mL/kg/min (consider using a pump if <40 kg)

under 70 kg

Seizure?
- Ensure adequate airway
- Benzodiazepine preferred
- Low dose propofol (alternative)

Arrhythmia or Hypotension?

Beware
LAST Resuscitation is DIFFERENT from Standard ACLS

Stable?
- Continue lipid emulsion ≥15 min once hemodynamically stable
- Maximum lipid dose: 12 mL/kg

Epinephrine
- Smaller than normal dose preferred
- Start with ≤1 mcg/kg

Avoid
- Local anesthetics
- Beta-blockers
- Calcium channel blockers
- Vasopressin

Once Stable, OBSERVE
- 2 hrs after seizure
- 4-6 hrs after cardiovascular instability
- As appropriate after cardiac arrest

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