Gel vs saline as medium for ultrasound-guided regional anesthesia

Submission date	Recruitment status	Prospectively registered
12/04/2021	No longer recruiting	<pre>Protocol</pre>
Registration date	Overall study status	Statistical analysis plan
27/04/2021	Completed	Results
Last Edited	Condition category	Individual participant data
27/04/2021	Other	Record updated in last year

Plain English summary of protocol

Background and study aims

The ultrasound-guided technique is the gold standard for procedural guidance in regional anesthesia. Traditionally, ultrasound gel has been used as the medium for ultrasound wave conduction, but the use of aqueous solutions such as D5W or normal saline has been described and kits containing gel or normal saline conducting mediums are commercially available. Ultrasound gel presents potential problems including a theoretical risk for nerve toxicity and cell damage, increased cost, allergic reaction, and difficultly in maintaining a static ultrasound probe position while performing a block; all of these factors are addressed when using normal saline. Previous studies evaluating the image quality for ultrasound-guided central line placement have shown that gel image quality is superior to normal saline, but both provided adequate views for placement of central lines. Regional anesthesia blocks often require more fine resolution to identify nerve structures, but no study to date has evaluated how normal saline compares to gel for ultrasound-guided regional anesthesia.

Who can participate?

Anesthesiology trainees and attending physicians within the Department of Anesthesiology, Perioperative & Pain Medicine at Mount Sinai

What does the study involve?

Anesthesiology trainees and attending physicians are asked to obtain a supraclavicular view (above the collarbone) with one medium before a washout period and then repeat the exercise with the other medium. The view with each medium is saved and two blinded experts grade each view as "proceed with the nerve block" or "not proceed with the nerve block". If there is a disagreement between the two experts a third expert provides a tie-break.

What are the possible benefits and risks of participating?

Benefits include practising ultrasound skills and using different types of medium. The risk to participants is minimal. They risk others knowing they are participating in a research study. They may have stress associated with being observed while scanning with ultrasound. There is a risk of loss of study information including name, highest level of education, experience level with regional anesthesia, and time to obtaining scans/grade of ultrasound view.

Where is the study run from? Mount Sinai Hospital (USA)

When is the study starting and how long is it expected to run for? August 2020 to May 2021

Who is funding the study? Investigator initiated and funded

Who is the main contact?
Garrett Burnett
garrett.burnett@mountsinai.org

Contact information

Type(s)

Scientific

Contact name

Dr Garrett Burnett

Contact details

1468 Madison Avenue New York United States of America 10029 +1 (0)9728970460 garrett.burnett@mountsinai.org

Type(s)

Public

Contact name

Dr Amar Bhavsar

Contact details

1468 Madison Avenue New York United States of America 10029 +1 (0)7329861514 Amar.bhavsar@mountsinai.org

Additional identifiers

Clinical Trials Information System (CTIS)

Nil known

ClinicalTrials.gov (NCT)

Nil known

Protocol serial number

HS#: 20-01288M

Study information

Scientific Title

Ultrasound gel vs sterile saline as conducting medium for ultrasound-guided regional anesthesia

Study objectives

Gel would provide superior images for ultrasound-guided regional anesthesia compared to normal saline.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Approved 10/21/2020, Institutional Review Board of the Mount Sinai School of Medicine (One Gustave L. Levy Place Box 1621 New York, NY 10029, USA; +1 (0)212 824 8200; irb@mssm.edu), ref: HS#: 20-01288M

Study design

Single-centre randomized simulation study with crossover component

Primary study design

Interventional

Study type(s)

Diagnostic

Health condition(s) or problem(s) studied

Regional anesthesiology

Interventions

Anesthesiology trainees and attending physicians are asked to obtain a supraclavicular view with one medium before a washout period and then repeat the exercise with the other medium. The view with each medium is saved and two blinded experts graded each view as: "proceed with the nerve block" or "not proceed with the nerve block". If there is a disagreement between the two experts a third expert provided a tie-break.

Intervention Type

Procedure/Surgery

Primary outcome(s)

Acceptable ultrasound image as deemed by the percentage of images that blinded expert reviewer answered "yes" to the question "Would you proceed with the block with this image?". This will be measured just after image acquisition.

Key secondary outcome(s))

Quality of ultrasound image measured by a visual analogue scale of 0-10 by a blinded expert reviewer just after image acquisition

Completion date

29/05/2021

Eligibility

Key inclusion criteria

Anesthesiology trainee or attending at the Mount Sinai Hospital who completed all required peripheral nerve blocks required by the Accreditation Council for Graduate Medical Education

Participant type(s)

Health professional

Healthy volunteers allowed

No

Age group

Adult

Sex

All

Key exclusion criteria

Subject refused after being explained study

Date of first enrolment

05/03/2021

Date of final enrolment

28/05/2021

Locations

Countries of recruitment

United States of America

Study participating centre

Mount Sinai Hospital

1468 Madison Avenue New York United States of America 10029

Sponsor information

Organisation

Mount Sinai Hospital

ROR

https://ror.org/05deks119

Funder(s)

Funder type

Other

Funder Name

Investigator initiated and funded

Results and Publications

Individual participant data (IPD) sharing plan

The datasets generated during and/or analysed during the current study are/will be available upon request from Garrett Burnett (garrett.burnett@mountsinai.org). The study data will be kept for 6 months following the publication of the study. Data will include training level, prior use of saline as an ultrasound medium, comfort with supraclavicular blocks, time to obtain supraclavicular block, acceptability of ultrasound image, and quality of ultrasound image. Unidentified data will be shared with researchers inquiring for further analyses, collaboration or additional information if deemed acceptable by the Mount Sinai Institutional Review Board.

IPD sharing plan summary

Available on request

Study outputs

Output type Details Date created Date added Peer reviewed? Patient-facing?

Participant information sheet 11/11/2025 No Yes