Dear editor

We read the article by Gadsden and Warlick with great interest.¹ Good, patient-tailored pain relief is critical in all patients, but as stated by the authors, it is often suboptimal in trauma patients. Because of this, a trial was performed in collaboration with emergency medical service (EMS)-nurses in the South East Brabant Region, Eindhoven, the Netherlands.² Patients with a proximal femur fracture are often difficult to transfer from the accident scene. Well-trained EMS-nurses performed a fascia iliaca compartment (FIC) block at the scene. Pain scores reduced by more than 50%. Transfer dynamic pain scores were reduced to 3–4 (out of 10), with very high patient satisfaction scores. This study showed that FIC block is easy to learn and very effective. This form of regional anesthesia can be safely used at the accident site to improve patient comfort.

Disclosure
The authors report no conflicts of interest in this communication.

References