

## Pre-Procedure Instructions for Spinal Injections

- If you take Coumadin, Heparin, Lovenox, Warfarin, Orgaran, Innohep, Fragmin, Argatroban, Plavix, ReoPro, Ticlid, Trental, Persantine, or any other blood thinner, notify your doctor. This medication must be discontinued prior to an injection and requires permission from the provider prescribing it.
- Avoid large meals up to 4 hours before your procedure, but you may have clear fluid/juice 2 hours prior to the procedure. You may take routine a.m. medications with a small amount of water.
- For your safety, you must have a responsible adult to drive you home. Failure to have a driver may result in the cancellation of your procedure.
- If you have any problems following your procedure, please contact this office.
- You will need to schedule a follow-up appointment for approximately 4-8 weeks after your procedure.

## Post Spine Procedure Instructions and Follow-up Orders

Your activity level following your injection should be at the following levels:

**Day of Injection:** We recommend no new activities. You should rest the day of the procedure.

**Day 2:** 25% to 50% of your usual activity level.

**Day 3:** Up to 75% of your usual activity level.

**Day 4:** After Day 4, activity is unrestricted as tolerated.

**Medications:** Resume aspirin and other anticoagulants the first day after the injection.

Should you have fever, chills, drainage, excessive swelling or redness from the injection site, bladder or bowel dysfunction, or change in sensation or muscle strength, please contact our office immediately. If you cannot reach your physician, please present to the nearest emergency room.

You may shower immediately, but please avoid swimming or baths/Jacuzzis/hot tubs for the first 2 days after the procedure, to reduce the risk of infection.

You may use ice compresses over the injection site – 20 minutes on, then 20 minutes off.

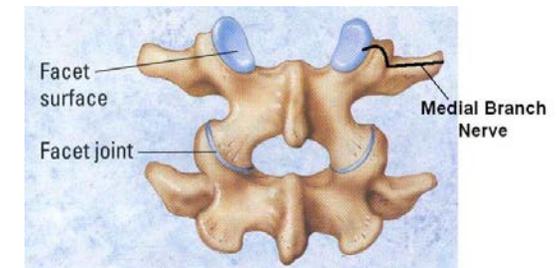
## Facet Joint Medial Branch Blocks

### What are medial branch blocks?

Medial branch nerves are located on the back of the spine on each side next to each facet joint.

They send sensory signals to the brain regarding the facet joints.

Medial branch blocks block the sensory signals by injecting medications onto the nerve.



## What is facet joint syndrome?

Facet joint syndrome involves a constellation of symptoms resulting in diffuse pains that do not fit a clear nerve root pattern. These pains are typically worsened with cold damp weather and movement of the spine, such as standing, walking, and turning in bed.

## Why inject the medial branch nerves?

Medial Branch Blocks are performed to help diagnose and/or treat pain related to disease or injury of the posterior joints of the spine. Injection of these medial branches, is an accurate and definitive way to diagnose facet joint pain syndrome because certain joints may appear abnormal but not cause pain and, conversely, the problem joints may appear nearly normal.

## What is the typical procedure?

You will be asked to lie nearly flat on your stomach. Under local anesthesia, using X-ray guidance, a small needle is positioned along the facet joint nerves (medial branches). A small injection of dye may be used to check positioning. Medication is then injected (long-acting anesthetic). Each injection takes about 15 minutes. Multiple levels on either one or both sides may be performed in the same session depending upon your symptoms.

## What will I feel during the injection?

During the procedure you may feel some slight pressure or discomfort. The doctor will be interested in how this discomfort compares to your usual pain symptoms.

## When will the pain relief take effect?

You may experience numbness and/or relief from your spine pain for up to 6 hours after the injection. This is due to the long-acting anesthetic that was injected. Your usual symptoms may then return.

## What if the pain relief doesn't last long?

If the injection blocked your pain effectively, but only for a short time, your provider may suggest additional injections, or a procedure that offers more permanent relief, such as radio frequency lesioning.

You should have a ride home. We advise patients to take it easy for the day of the procedure.

You may want to apply ice to the affected area. After the first day, you can perform activity as tolerated.

## What are the risks of medial branch nerve injections?

As with any procedure, there are some inherent risks, although most of these are minimal. Common risks include but are not limited to bruising, bleeding, headaches, irritation of a nerve or nerve injury, including paralysis, numbness and weakness. Risks also include infection or reactions to the medications which may cause breathing difficulties and cardiac difficulties which may lead to death (anaphylactic shock). Serious risks and complications are extremely rare, however.

## Common side effects following the procedure include:

Decreased pain and possibly some numbness for 4 to 8 hours due to the local anesthetic. Pain at the injection site. A small amount of bleeding at the injection site. Back stiffness. If a steroid medication was used during the procedure, possible side effects include facial flushing, insomnia, and occasionally a low-grade fever. All of the side effects listed should disappear within 1 to 3 days after the procedure. If you experience a post-procedure headache, please contact our office. For the first 24 hours, lie down as much as possible. You can take Tylenol up to 3 grams per day in doses of 1 gram every 8 hours. Drink plenty of fluids in the form of caffeinated beverages. The caffeine will often minimize the headache substantially. If you continue with headaches after 24 hours following the procedure, please contact our office.