



**Cary Office**  
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## Injection Instructions

Your physician has recommended either an epidural steroid injection, sacroiliac injection or facet joint/medial nerve branch block injection for the treatment of your pain. Please refer to the back of this page for an explanation of each procedure. We will be performing the injection at the Carolina Back Institute and we want to give you some information on this injection prior to the day of procedure for you to review.

**If you have further questions or to notify us of medication issues, please call:**

CBI-Cary	Laura Hamilton	919-781-9950 ext 1259
CBI-North Raleigh	Shane Mross	919-847-8200 ext 2232

We will be performing these injections in our fluoroscopy suite. The fluoroscope is essentially a piece of x-ray equipment that allows for precise needle guidance. **“For Females:** If there is any chance of pregnancy, please inform the provider prior to the procedure. The procedure can **NOT** be performed if you are pregnant.” When you come in for the injection, we will have you lie on your stomach. Your back will be carefully cleansed with Betadine or Hibiclens. Your physician will want to see you back in their office as scheduled following the injection for follow-up.

### To prepare for your visit, please:

1. Arrive 20 minutes before your procedure time.
2. You may eat lightly and you can have anything you want to drink.
3. Have someone drive you home.
4. Contact our office if you are taking any type of BLOOD THINNER. Aspirin 325mg, Plavix or Aggrenox may need to be stopped several days prior to your injection. Please also let us know if you are taking Coumadin, as this may affect your eligibility to have the injection performed. If you are taking any of these medications, in particular Coumadin, Aggrenox, Plavix, Pradaxa, Warfarin or Aspirin, please let us know the name of the physician that prescribed these medications when you contact us with this information.
5. If you have diabetes mellitus, and are taking the medication Metformin, also known as Glucophage or Glucovance, please inform the office and our Physician prior to your injection. Taking this medication will not keep you from having the injection but some minor changes in the procedure itself may be done.
6. In regards to any other types of medications that you may be on, such as antihypertensives, heart medications, antibiotics, pain medication or anti-seizure medications, it is advised that you take these as prescribed. If you have any questions concerning any other types of medications, please contact our office several days prior to the procedure for further clarification.

**Special Instructions for neck (cervical) and upper back (thoracic) Injections:** All Patients must stop taking aspirin or aspirin-based products (Ticlid, Aggrenox, Pradaxa or Plavix) for at least 5 days prior to the procedure. Nonsteroidal anti-inflammatory medications (Ibuprofen, Aleve, Diclofenac, Mobic, Celebrex, etc.) must be stopped five days prior to the procedure, NSAID patches or gels are fine. Glucophage or Glucovance must be stopped 1 day prior to and the day of the procedure. Coumadin must be stopped 5 days before the injection. Finally, review the information on the back of this sheet to help prepare you for your visit.

The desired effects of the injection will be to diminish your pain and increase your mobility. The risks of this injection are rare. Major risks include infection, bleeding, and a mild increase in pain for one or two days immediately following the injection, and potential spinal headache depending on the approach that is used for your injection. These injections are performed using sterile technique, and your back is thoroughly cleansed with an antiseptic soap, thus diminishing the chance of any type of infection. The use of the fluoroscope for precise needle guidance helps to minimize the chance of any type of spinal headache or other negative outcomes. The injection itself will include a steroid, often mixed with a small amount of local anesthetic.

The positive results that are seen from these injections can often take one to two days to be noticed. This is due to the fact that there is often a delay in the onset of the steroids that are injected. There are no specific restrictions as far as the injection is concerned and doing activity as tolerated is recommended.

\*\*\*Explanation of procedures on reverse side\*\*\*

We look forward to seeing you on the day of injection, and hope this injection will benefit you in reducing your pain and increasing your mobility.

### **Cervical/Thoracic Epidural Injection**

This is a procedure that has been shown to help relieve neck pain, upper back and arm pain by reducing inflammation. It can also be a diagnostic procedure further helping to locate the source of your pain. The epidural steroid injection may not relieve all the neck, upper back and arm pain, but it will help to reduce the pain and increase your overall level of function.

### **Cervical Facet/Medial Nerve Block Injections**

This is a procedure that has been shown to help relieve neck, upper back and headache pain, by reducing inflammation. It can also be a diagnostic procedure, further helping to locate the source of your pain. The injection may not relieve all the pain, but it will help to reduce the pain and increase your overall level of function.

### **Lumbar Epidural Injection**

This is a procedure that has been shown to help relieve low back pain and leg pain by reducing inflammation. It can also be a diagnostic procedure further helping to locate the source of your pain. The epidural steroid injection may not relieve all the low back and leg pain, but it will help to reduce the pain and increase your overall level of function. By allowing you to become more active, the cycle of pain will hopefully be broken and allow you to speed your recovery.

### **Sacroiliac Joint Injection**

This is a procedure that has been shown to help relieve low back, pelvic and buttocks pain by reducing inflammation. It can also be a diagnostic procedure further helping to locate the source of your pain. The injection may not relieve all the pain, but it will help to reduce the pain and increase your overall level of function. By allowing you to become more active, the cycle of pain will hopefully be broken and allow you to speed your recovery.

### **Facet Joint and Medial Nerve Branch Injection**

This is a procedure that has been shown to help relieve low back and leg pain above the knees, by reducing inflammation. It can also be a diagnostic procedure further helping to locate the source of your pain. The injection may not relieve all the pain, but it will help to reduce the pain and increase your overall level of function. By allowing you to become more active, the cycle of pain will hopefully be broken and allow you to speed your recovery.

### **Possible Side Effects:**

- Agitation, restlessness, headaches, sleep problems and facial flushing, due to steroids.
- Regional numbness or weakness and dizziness. You may have increased numbness for one-half hour to six hours after the block. Fainting may occur and we advise you not to operate a vehicle or perform any activities that require coordination for twelve hours after the block.
- Reactions to medications include minor or temporary allergic reaction and/or a temporary decrease in blood pressure, which may require additional treatment. These problems occur approximately one percent of the time.
- Increased pain may occur in up to Twenty percent of patients, lasting from one to seven days after the block.
- Patients may have a headache after the procedure. Treatment usually requires oral fluids and over the counter pain medications or may necessitate additional procedures.

Other rare complications might include hip (bone) damage caused by steroids, temporary or permanent nerve impairment, infection or bleeding.

If the nerve block is performed, specifically for diagnostic purposes, a steroid will not be used. If this is the case, complications or side effects associated with steroid use will not be a possibility.