Your procedure is scheduled on _____

at _____ O'Clock

and you should arrive 15-30 minutes early at:

☐ Good Samaritan Hospital Faculty Medical Center,
375 Dixmyth Ave., Cincinnati
872-2553

☐ Summit Surgical Center,
500 E-Business Way, Sharonville 45241
354-3737

☐ Beacon West Surgical Center,
6480 Harrison Ave., Cincinnati
354-7750

BEACON
Orthopaedic Center
Summit Woods
513-354-3700

Spinal Injection

Your physician has recommended that you receive an injection into the spine as part of your medical care. A common such procedure is an "epidural," but this an inexact description of the procedure. "Epidural" refers to an anatomic space in the spine where inflammatory processes can occur in certain disease states and can cause symptoms including pain, tingling, numbness and weakness. Typically, the medication injected is a synthetic corticosteroid ("cortisone" or "steroid") along with a local, short acting anesthetic (thus the term epidural steroid injection, or ESI is used.) The intent is to suppress the inflammatory reactions in the targeted areas thus providing a more desirable environment for healing to occur. Anesthesiologists use "epidural" anesthesia during major surgical procedure such as childbirth, but the medications are different as are the goals of the procedure.

There are several injection techniques used to access the epidural space. The physician performing the procedure will decide upon the best one in consultation with the requesting physician if needed. Using clinical expertise and diagnostic testing and imaging, the injection can be placed very close to the suspected abnormal area maximizing the effect of the injection. Sometimes, the procedure is repeated a few days to weeks later depending on the patient's clinical response. The epidural space is not always the target: depending on the clinical presentation, other spinal structures such as the facet joints and sacroiliac joints can be injected to decrease inflammation and alleviate discomfort originating from these areas.

The actual procedure takes about 10-15 minutes, while the pre-procedure and post-procedure events take another 45 minutes. Drs. Brannan or Duplechan, who will be performing the injection, will give post-procedure instructions for activity and medical follow-up. The patient will also be given instructions to call in case of an unforeseen emergency. Return to regular activity is within 2-3 days. Symptom control is variable, and will depend on several factors. Office follow-up with the ordering physician should be within 1-3 weeks. The ordering physician will receive a dictated note for the patient's chart describing the procedure in detail.

John J. Brannan, MD and Lester S. Duplechan, MD of Beacon Orthopaedics are Board Certified Physiatrists and are experienced interventionalists trained to perform these spinal injections. All of the procedures are performed under fluoroscopic (i.e. X-ray) guidance in the outpatient hospital setting using only local anesthesia. Drs. Brannan and Duplechan are members of the International Spinal Intervention Society (www.spinalinjection.com) and the North American Spine Society (www.spine.org) and adhere to all of the their clinical and ethical guidelines regarding the safe uses of spine interventions. They will explain the procedure to be done and will provide an opportunity for the patient or family to ask questions. Rarely is a sedative or anti-nausea medication needed, but since the procedure is performed in the hospital setting, such medications are readily available. Side effects of the procedure are uncommon, but can occur. Some of them include: local pain from the skin puncture, small amounts of bleeding, temporary numbness and or weakness, spinal headache or infection. Patients may not receive an injection if they have had a dose of warfarin (Coumadin) within 5 days. *Patients must inform the ordering physician if they are on warfarin prior to scheduling so alternative medications can be considered.*