



Please Read This Entire Packet



3900 Lakeville Hwy  
Petaluma, Ca. 94954  
415-444-2988

Dear \_\_\_\_\_,

MR# \_\_\_\_\_

An appointment has been scheduled for you in the Outpatient Procedure Suite, Interventional Physiatry, in Petaluma Kaiser.

Time: \_\_\_\_\_ Day: \_\_\_\_\_

Date: \_\_\_\_\_

Your appointment is with Dr. \_\_\_\_\_

**Please arrive a half hour before your appointment time unless your appointment is at 8:30, then please arrive at 8:30 a.m.**

This Clinic is located at:

Kaiser Petaluma  
Outpatient Procedure Suite  
Interventional Physiatry  
3900 Lakeville Hwy  
2<sup>nd</sup> Floor MOB2

*Your health is important to us.* If you cannot keep this appointment or would like to reschedule to another date/time, please call 415-444-2988. For your convenience you may leave a message.

Sincerely,

Physical Medicine Staff

# Instructions to Follow

- Read the entire packet carefully and follow all instructions to the letter. Failure to comply could mean postponing your Epidural.
- Your health is important to us. **If you are sick with a cold/flu, fever/chills OR you are taking antibiotics for any reason please call to cancel your appointment.** To reschedule or cancel, please call (415) 444-2988 or (707) 765-6225
- You should **take your blood pressure medications** and any pain medications that DO NOT contain blood thinning agents the day of your procedure. **\*\*\*If you take any blood thinning medications/herbal supplements, please see next page and read carefully\*\*\***
- Please bring a written list of your daily/regular medications including those you only take as needed and those you stopped for the procedure.
- For your safety, you must have a responsible adult accompany and drive you to your appointment and back. **Failure to bring a driver will result in cancellation of your procedure.**
- Wear loose fitting clothes such as sweat pants, t-shirt, pull over shirt. Do not wear clothes with metal zippers, buttons, buckles, or belts etc. The metal interferes with the x-ray picture.

## If you are having a procedure **without sedation**

- You may have a light meal up to 2 hours before your procedure.

## If you are having a procedure **with oral sedation**

- You may have a light meal up to 2 hours before your procedure.
- We will give you your oral medication at the Petaluma Facility a half hour before your scheduled procedure time.

## If you are having a procedure **with IV sedation**

- Do not eat solid foods for 6 hours prior to your procedure. You may have clear liquids up to 4 hours before your procedure. .
- If you have any concerns or questions please call my office at (415) 444-2988 or (707) 765-6225

**Please read this page carefully. If you have questions about your medications or herbal supplements, call the Advice Nurse at 415-444-2988 or 707 765-6225**

**Stop all Aspirin and Aspirin like Medications 7 days before Appt:**

Acetylsalicylic Acid, Aggrenox, Artria SR, Aspergum, Aspirin, ASA, Aspro, Bayer, Bex, Coryphen, Dabigatran, Easprin, Ecotrin, Empirin, Entrophen, Excedrin, Halfprin, Norwich Extra-Strength, Novasen, Plavix, Pradaxa, Solprin, Ticlid, Vincent's powders, Xarelto, ZORprin

**Stop all NSAID Medications 3 days before Appt:**

Actiprofen, Advil, Aleve, Anaprox, Apo-ibuprofen, Apo-Napro-Na, Apo-Naproxen, Bextra, Brufen, Cataflam, Celebrex, Celecoxib, Clinoril, Daypro, Diclofenac, Dolobid, Etoldolac, Fenoprofen, Flurbiprofen, Genpril, Haltran, Ibuprofen, Indomethacin, Junifen, Ketoprofen, Ketorolac, Lodine, Medipren, Meloxicam, Menadol, Midol, Mobic, Motrin, Nabumetone, Naprelan, Naprogecic, Naprosyn, Naprox, Naproxen, Naxent, Novo-Naprox, Novo-Profen, Nu- Nycopren, Nuprin, Nurofen, Oxaprozin, Pamprin, Ponstel, Relafen, Relifex, rofecoxib, Rufen, sulindac, Synflex, Toradol, Vioxx, Volteran

**If you are taking Coumadin/Warfarin, contact the Warfarin/Coumadin Clinic at 866-454-4917 at least two weeks prior to your scheduled Appt.**

Your medication will need to be held prior to the procedure. Moreover, **you will need to have an INR drawn the day prior** to document a normal level of anticoagulation (INR of 1.2 or less). You may restart your anti-coagulation regimen the evening of the procedure by calling the Warfarin/Coumadin Clinic or prescribing MD.

**Anti-Coagulants:**

Aragatrobam, Acova, Angiomax, Bivalirudin, Coumadin, Danaparoid, Delteparin, Enoxaparin, Fragmin, Heparin, Innohep, Lovenox, Orgaran, Tinzaprin, Uniparin, Warfarin, Warfilone

**Stop the following supplements 7 days prior to your Appt :**

**Herbal/Vitamin Supplements:**

Dong quai, Ephedra, Feverfew, Fish oil, Garlic, Ginger, Ginkgo Biloba, Ginseng, Green Tea, St. John's Wart, Turmeric, Vitamin E 400 iu or greater



**Lumbosacral Selective Epidural Injections and Medial Branch Block**

***What is a selective nerve root injection and why is it helpful?***

Your doctor has decided to treat your pain by referring you for a fluoroscopically guided selective epidural injection of corticosteroid medicine. Corticosteroids reduce inflammation around nerve roots and, thereby, help reduce pain in shoulder/arm and buttocks/leg. Spinal injections are given in the mid and lower spine.

***What are the facets (Zygapophysial) joints?***

The facets are small paired synovial joints which reside at the back of the vertebral column in the cervical, thoracic, and lumbar spine. These joints prevent the vertebrae from sliding backward and forward upon one another and they can be a source of back or neck pain.

***What is a medial branch block?***

Because the facet joints are very small, pain deriving from them cannot be accurately diagnosed by imaging studies or a physical examination alone. In order to determine if a particular facet joint is painful a series of two fluoroscopically guided diagnostic injections must be performed. This typically involves introducing several small needles next to the nerves innervating the facet joint and anesthetizing them on two separate occasions.

***BENEFITS***

Fluoroscopic (x-ray) guided procedures are performed for both diagnostic and therapeutic purposes. The fluoroscope allows the doctor to accurately place the medicine at the exact site of the problem. A diagnostic procedure is performed to help identify the source of pain. A therapeutic injection is performed to provide pain relief. A medial branch block is a diagnostic procedure.

## **ALTERNATIVES**

Before considering injection therapies for your pain, you should feel that you have exhausted other, more conservative care options, including: “tincture of time,” physical therapy, oral medications, ice, heat, anti-inflammatory medicines, etc. If you feel you have not exhausted these other treatment modalities, you may wish to post-pone your procedure. This is an elective procedure and we want you to be comfortable with your decision. We are happy to see you in the future if you decide to continue more conservative treatments for the time being.

## **RISKS OF PROCEDURES**

Outlined below are the common and rare risks associated with the procedure. Minor risks occur in approximately 1 in 5 people and tend to be short-lived. Rare procedural risks occur infrequently, less than 1% of the time, but when they occur they can be significant and long lived. Please read the following details, your doctor would be happy to address any of your questions/concerns.

**Minor Risks (5-20%):** transient increase in pain, transient dizziness/vertigo, nausea, headache

**Rare (<<1%):** Death or spinal cord injury (paraplegia, quadriplegia), stroke, heart attack, seizure, permanent nerve or spinal cord injury, permanent bone loss or bone death, bleeding into the spinal canal, spinal headache, infection in the spinal canal or disc spaces. Serious allergic reaction to contrast dye is also possible, such as anaphylactic shock.

## ***What will happen to me during the procedure?***

All injections provided at the Kaiser Petaluma Outpatient Procedure Suite, Interventional Physiatry are performed by specialty-trained spine physicians under fluoroscopic (x-ray) guidance. Using fluoroscopy allows the physician performing the injection to place the medicine precisely into the epidural space. You will be positioned on your abdomen on the exam table. A “time-out” will be done for your safety, you will be asked to state your name, birthdate, procedure, where your pain is located, and allergies.

The physician will clean your skin with Chlorhexidine. After your spine has been cleaned thoroughly a sterile drape will be placed. Then the physician will view the bones in your spine using the fluoroscope. This will allow him to identify the proper location for the injection. After viewing the bones in your spine the physician will use numbing medicine to anesthetize the skin of your back. After the skin has been adequately anesthetized a small needle will be directed into the epidural space. When the needle is in proper position a small amount of iodine based dye will be injected. \*\*\* If you are allergic to iodine a different contrast solution will be used. Visualization of the dye in the epidural space confirms that the medicine will go near the nerve roots. When the cortisone is injected you may feel a slight burning sensation in your back or down either your legs. This is normal, and it suggests that the cortisone is migrating along your nerve roots.

Pain relief from the steroid injection may not become noticeable until a few days or up to two weeks after the injection. Some experience relief for only one or two weeks while others may have good relief for many months. If you do not receive lasting pain relief you will need to speak to your referring doctor about other treatment options. Steroid injections can be done a maximum of three times a year. **If you are undergoing a medial branch block, you must submit your pain diary before we can proceed with the next injection.**

\*\*\*If you are a diabetic your blood sugar will increase for 48 hours after the steroid injection and you will need to monitor this.

**If you have a recent spine MRI which was performed outside Kaiser Permanente you must hand carry it with you to your visit.**

## Directions to Petaluma Kaiser

### From Marin County:

- Merge onto US-101 N and go north to Petaluma.
- Take the CA-116 E exit toward SONOMA / NAPA.
- In Petaluma, turn LEFT onto LAKEVILLE HWY / CA-116.
- End at **3900 Lakeville Hwy**  
Petaluma, CA 94954-6906, US

### From the North Counties:

- Merge onto US-101 S toward SAN FRANCISCO.
- In Petaluma, take the CA-116 E exit toward NAPA / SONOMA
- Turn LEFT onto LAKEVILLE ST / CA-116. Continue to follow CA-116.
- End at **3900 Lakeville Hwy**  
Petaluma, CA 94954-6906, US

### From East Bay

- Merge onto I-80 W.
- Merge onto CA-37 W toward SAN RAFAEL.
- Merge onto US-101 N and go north to Petaluma.
- Turn RIGHT onto LAKEVILLE HWY.
- End at **3900 Lakeville Hwy**  
Petaluma, CA 94954-6906, US

### From Vallejo / Fairfield

- Merge onto I-80 W toward CA-12 / NAPA / SAN FRANCISCO.
- In Vallejo, merge onto CA-37 W toward SAN RAFAEL.
- At junction of Lakeville Hwy and CA-37, turn RIGHT onto LAKEVILLE HWY.
- End at **3900 Lakeville Hwy**  
Petaluma, CA 94954-6906, US