



ORTHOPEDIC ASSOCIATES OF HARTFORD, PC
Enfield, Farmington, Glastonbury, Hartford, New Britain, Newington, Rocky Hill
www.oahct.com

Pre-Procedure Information **Medial Branch Block**

A Medial Branch Block is a diagnostic spinal procedure to assess whether or not an individual's pain is emanating from the facet joints. Facet joints are located throughout the entire spine, both in the neck, in the midspine and in the lumbar spine. This is strictly a diagnostic procedure to assess whether or not the facet joint is contributing to an individual's pain and to assess whether or not an individual is a candidate for Radiofrequency Lesioning, which provides long-term pain relief (for up to two years).

Medial branch blocks are performed at the surgical center with the use of fluoroscopy, which is a real-time x-ray. After undergoing a medial branch block, (which typically lasts less than a week) an individual will maintain a pain diary/log. The patient reports back to their physician as to whether or not pain has been reduced or completely eliminated. Typically, individuals undergo two successive medial branch blocks. If two successive medial branch blocks are successful, the patient is then a candidate for radiofrequency lesioning.

General Information

1.) All procedures are done in the Operating Room at **the following locations:**

- **Dr. Memmo performs his cases at:**
 - Orthopedic Associates Surgery Center**
1111 Cromwell Ave., Rocky Hill, 860-529-0295
 - **Dr. Codisotti performs his cases at 2 locations:**
 - Glastonbury Surgery Center**
195 Eastern Blvd., Glastonbury, CT 06033 860-633-0003
- or*
- Southington Surgery Center**
81 Meriden Ave.
Southington, CT 06489 860-378-8228

2) **Please remove all jewelry and valuables and leave them at home.**

3.) Please call the surgery center between 2 – 3 pm the business day prior to your procedure for your arrival time. A nurse will call you 2 – 3 days prior to your procedure to ask pertinent questions relating to your procedure.

4) Patients who feel anxious can ask your physician for a prescription for Valium prior to the procedure. **Patients who receive sedation must have a designated driver.**

5.) The medications that may be used by your physician are listed here:

- ***Omnipaque**~ contrast dye that is visualized using fluoroscopy (x-ray).
- ***Lidocaine**~ numbing agent injected into the skin before the needle is inserted.
- ***Marcaine**~ short-acting numbing medication injected to reduce pain.

6.) You may have a light breakfast and/or lunch prior to the procedure, unless otherwise directed by the nurse.

7.) A nurse will discuss with you any specific restrictions based on your procedure. Most people are able to return to work the same day. Any job restrictions can be discussed with your physician.

8.) Please bring your insurance cards and photo identification. Please arrange to have someone drive you home.

Contraindications

Patients with the following medical conditions are **NOT** to undergo this procedure and should notify your physician of these conditions: **pregnancy, Bleeding disorders such as problems clotting, systemic infection, uncontrolled high blood pressure, and uncontrolled diabetes.**

Alerts

***Please advise your physician if you have an allergy to shellfish, contrast dye, or if you have uncontrolled high blood pressure; congestive heart failure or impaired kidney function.**

CERVICAL (NECK) PROCEDURES

- require patients discontinue Non-steroidal Anti-inflammatory Medications (NSAIDS) these include: **Advil, Aleve, Anaprox, Ansaid, Arthrotec, Daypro, Diclofenac, Feldene (piroxicam), Ibuprofen, Ketoprofen, Lodine, Mobic, Motrin, Naproxen, Naprosyn, Relafen, Sulindac, Toradol, Vicoprofen, Voltaren, Nabumetone, Etadolac, Indocin.**
- **You** should also discontinue Aspirin-containing products. These include: **Alka-Seltzer, Anacin, Baby Aspirin, Bayer Arthritis, Bufferin, Darvon compound, Ecotrin, Excedrin, Fiorinal, Pepto-Bismol, Percodan, salicylates, BC powder, Salsalate, Disalcid, Soma compound (plain Soma is ok).**
- ***Please let your physician know if you are taking a medication that thins the blood (such as Coumadin, Pradaxa, Plavix, Aggrenox, Fragmin, Halfprin, Heparin, Lovenox, Orgaran, Persantine {dipyridamole}, Pletal {Cilostazol} and Ticlid)**
****These medications require medical clearance (a note from your primary doctor or cardiologist) giving permission for you to discontinue your medication. Lab work may also be required the day before your procedure (for patients on Coumadin).**

Patients taking **Metformin, Acto plus Met (Glucophage/Riomet), Kambiglyze, Avandamet, Glucovance, Metaglip or Janumet** must discontinue these drugs the day of the procedure. These medications can be resumed 24 hours after the procedure.

This is due to a potential interaction with the contrast dye that is administered.

Patients taking an MAO inhibitor (**Parnate/tranylcypromine, Eldepryl, Deprenyl, Atapryl, Selegiline, Nardil {Phenelzine}, Marplan/isocarboxazid, Matulane/procarbazine**) must discontinue the medication 48 hours before the procedure and can resume the medication 24 hours after the procedure. Medical clearance (a note from the psychiatrist or prescribing physician) is recommended.

Potential Complications

Rare but potential complications that have been reported in the medical literature include the following: Infection, bleeding, dural puncture. It should be recognized that for all procedures, meticulous sterile technique is utilized; procedures are performed in an operating room with state of the art equipment including fluoroscopy (x-ray). The use of contrast dye is utilized to appropriately localize the flow of medication that is injected.

Potential Side Effect

A potential side effect you may or may not experience is pain at the injection site.