



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

**Pre-Procedure Information**  
**Radiofrequency Lesioning (Rhizotomy) of Medial Branch Nerves**

Radiofrequency Lesioning (Rhizotomy) is a safe, minimally invasive procedure that has been shown to be quite effective in treating pain that comes from small joints within the spine called facet joints. Candidates for this procedure typically have localized pain within their spine, have tried physical therapy and oral medications but continue to have pain. Typically, this pain is localized either in the neck or the low back. Before being considered for this procedure, an individual will undergo two successful medial branch nerve blocks, which is strictly a diagnostic procedure to confirm and localize which joints are causing pain. Radiofrequency Lesioning offers more long-term relief, typically lasting six to 24 months. This procedure can also be repeated when the pain typically returns.

**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. Codispoti 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 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.

3.) Patients who feel anxious can ask your physician for a prescription for Valium prior to the procedure. In some cases, conscious sedation (IV) is used. **Patients who receive sedation must have a designated driver.**

The medications that may be used by your Physician are listed here:

- \***Lidocaine**~ numbing agent injected into the skin before the needle is inserted.
- \***Marcaine**~ short-acting numbing medication injected to reduce pain.

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

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

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

7.) Your physician recommends the following web sites for additional information:

www.spine-health.com. ; www.oahct.com

**Contraindications**

Patients with the following medical conditions are **NOT** to undergo this procedure and should notify your physician of these conditions:

- 1.) Pregnancy
- 2.) Bleeding disorder such as problems with clotting
- 3.) Systemic Infection
- 4.) Uncontrolled high blood pressure
- 5.) 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

- For patients undergoing injections in the cervical spine (neck); Non-steroidal Anti-inflammatory Medications (NSAIDS) must be discontinued **7 days** before procedure which include: **Advil, Aleve, Anaprox, Ansaid, Arthrotec, Daypro, Diclofenac, Feldene (piroxicam), Ibuprofen, Ketoprofen, Lodine, Mobic, Motrin, Naproxen, Naprosyn, Relafen, Sulindac, Toradol, Vicoprofen, Voltaren, Nabumetone, Etodolac, Indocin.**
- You should also discontinue **Aspirin-containing** products **7 days** prior to the procedure. . 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, Plavix, Aggrenox, Fragmin, Halfprin, Heparin, Lovenox, Orgaran, Persantine {dipyridamole}, Pletal {Cilostazol}, Ticlid, and Pradaxa. )**  
**\*\*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 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, nerve damage, dural puncture, paralysis. It should be recognized that for all of the procedures, meticulous sterile technique is utilized; procedures are performed in an operating room with state of the art equipment including fluoroscopy (x-ray).

### Potential Side Effect

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