



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

Pre-procedure Information **Epidural Injection**

An epidural injection is a safe, minimally invasive spinal injection procedure used to treat conditions commonly referred to as "sciatica." Spinal conditions that can typically cause sciatica can result either from a disc herniation or advanced osteoarthritis which can narrow canals within the spine. Typically, individuals with sciatica present with symptoms such as low back pain as well as leg pain, numbness and tingling. Your physician performs epidural injections on those patients who do not respond to therapy or oral medications. He can perform these procedures in the neck or the low back. The injection will include both a local anesthetic, such as Marcaine, as well as a long-acting corticosteroid, such as Kenalog. These medications are injected into the epidural space. The steroid decreases inflammation surrounding an irritated nerve and flushes out those chemicals that are causing pain. For all spinal procedures, your physician utilizes fluoroscopy, which is a real-time x-ray that allows him to visualize precise placement of the needle.

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.) Call the surgery center between 2 – 3 pm the business day prior to your procedure to get your arrival time. A nurse will also be calling 2-3 days prior to your procedure to ask pertinent questions relating to the procedure.
- 3.) Patients who feel anxious can ask 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 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.
- ***Steroid**~ a long-acting agent to reduce inflammation, and 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 doctor of these conditions: **Pregnancy, Bleeding disorder such as clotting abnormalities, systemic infection, uncontrolled high blood pressure, and uncontrolled diabetes.**

Alerts

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

***Please let your doctor 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). Pradaxa should be stopped 3 days before the procedure, Coumadin 4 days, and Plavix 7 days.**

CERVICAL (NECK) PROCEDURES require patients discontinue for 7 days prior to procedure 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.

CERVICAL (NECK) PROCEDURES should also discontinue Aspirin-containing products for 7 days prior to 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).**

You may continue taking all other medications including Aspirin (unless you are having a Cervical (Neck) Procedure)

Patients taking Metformin, Acto plus Met (Glucophage/Riomet), 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, nerve damage, dural puncture, paralysis. It should be recognized that for all of your physician's 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 Effects

Some potential side effects you may or may not experience include: Numbness in your low back or legs for several hours after the procedure; pain at the injection site; facial flushing or feeling warm; headache; insomnia; stomach upset; increased energy; increased appetite; and/or abnormal menstruation.

Patients with Diabetes may experience an increase in blood sugars, and will be required to monitor their blood sugars for 7 days.