

# POST PROCEDURE INSTRUCTIONS

The purpose of this procedure is to provide treatment which may help you. These instructions are for procedures, not surgery. Surgery instructions will be individualized to the patient and type of surgery and separate from these instructions. Typically, a procedure is to apply medication and this medication may include a steroid which is used to decrease swelling and nerve irritation which may be causing your pain. It may also include a type of local anesthetic which may provide pain relief. The local anesthetic may also cause some weakness or numbness of your legs (for back procedures) or of your arms (for cervical procedures). This should wear off within several hours after the injection.

The following information will help you over the next few days as to what you can expect.

1. Please take it easy for the rest of today. If instructed, you may resume your normal daily activities the following day.
2. Your arms or legs may be weak, **DON'T FALL!**
3. If you feel sore where the needle entered for the injection, **PLEASE USE ICE (NOT HEAT) ON THE AREA FOR THE REST OF THE DAY.** You may leave the ice on for up to 20 minutes at a time. The day after the procedure you may begin to use ice or heat to the injection site ... whichever provides the most relief.
4. As long as your primary doctor has indicated no restrictions, you may take a mild pain medicine such as acetaminophen (**Tylenol**) the day of the procedure. Ibuprofen (**Advil, Aleve, Nuprin, Motrin IB, etc.**) or aspirin 24 hours **after** the procedure may be used if needed.
5. Common and generally benign reactions to injections include flushing or feeling of warmth, increased appetite, water retention, difficulty sleeping and increased menses may occur due to the steroids.
6. Keep the band-aid clean and dry for 24 hours. Do not submerge the procedure site in water for the remainder of the day. (No swimming, bathing, or whirlpools) You may take a shower. You may remove the band-aid after 24 hours.
7. Please keep a record of your pain level on a scale of 0-10 until you return to our office. ***It may take up to two weeks (up to a month for radiofrequency procedures) to know whether the injection was helpful. You can expect soreness at the actual injection sites for a couple of days. THIS IS NORMAL AND WILL GO AWAY.***
8. If directed to do so, please notify our office 14 days following the injection to report how much relief and the duration of the relief you have. If you call, please leave a message on voice mail with your report with your phone number with times you are available for returned phone calls. Some insurance carriers require this information for approval of future injections and/or treatments so it is important that this is reported. **Please use the following categories to describe your relief:**  **None or Slight Improvement (0-20%);**  **Moderate Improvement (30-40%);**  **Significant Improvement (50-70%);** or  **Excellent Improvement (75-100%).**
9. If the area where the needle was inserted becomes hot, red, swollen, or increasingly tender, or if you develop a fever with these symptoms, **please contact our office immediately.**
10. If you develop increasingly severe back pain, numbness or weakness of the legs or arms, or loss of control of bladder or bowel functions, **please contact our office immediately.**
11. **If you are diabetic,** watch for elevations of your blood sugar which are a normal response. Follow up with or notify your **PRIMARY CARE PHYSICIAN** if the blood sugar does not seem to be returning to normal within one to two weeks after this procedure.
12. If you are currently on anticoagulants ("blood thinners") you may resume taking these medications the day after the procedure unless instructed otherwise.

**INSTRUCTIONS FOR FOLLOW-UP:** \_\_\_\_\_

**FOLLOW UP OFFICE VISIT:** \_\_\_\_\_

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\_\_\_\_\_  
\_\_\_\_\_

**MEDICATION(S):** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

PLEASE SIGN BELOW:



\_\_\_\_\_  
Patient Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

Patient demonstrated understanding  No Barriers Identified  Barriers Identified \_\_\_\_\_