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MEDIAL BRANCH BLOCK

Diagnostic facet nerve block: patient education, instructions, and pain diary

WHAT ARE THE FACET JOINTS?

The facet joints are small joints on the back of the spine that guide and limit its movement. They can become painful from arthritis, injury (such as a car accident or fall), loss of disc height, or years of repetitive heavy lifting. Facet joint pain cannot be diagnosed reliably by x-ray, CT scan, or MRI. It is diagnosed by temporarily numbing the small nerves that carry pain signals from the joints. These nerves are called the medial branch nerves.

WHAT IS A MEDIAL BRANCH BLOCK?

A medial branch block is a **diagnostic test**. Using x-ray guidance, the physician places a thin needle next to the medial branch nerves and injects a small amount of local anesthetic (numbing medicine). Usually two or three nerves are treated at one visit. If your usual pain is substantially relieved while the numbing medicine is working, the facet joints are likely the source of your pain, and you may be a candidate for **radiofrequency ablation**, a procedure that provides longer-lasting relief.

Most insurance plans, including Medicare, require **two separate diagnostic blocks** with significant relief before they will approve radiofrequency ablation. Your pain diary is the record we use to document your response, so please complete it carefully.

BEFORE YOUR PROCEDURE

- Read the handout **Preparing for Your Procedure**.
- **Sedation is usually not given** because the test depends on your ability to judge your pain relief accurately. If you receive oral sedation, you must bring an adult driver with you.
- It is helpful to arrive with your usual pain present so that the test is accurate. Ask us if you are unsure about taking an as-needed pain medication beforehand.
- Take your regular daily medications. Never stop a blood thinner unless we have told you to and the prescribing doctor has approved it.
- You may eat and drink normally unless you are having IV sedation.

DURING AND RIGHT AFTER THE PROCEDURE

You will lie face down (for the low back) or face down or on your side (for the neck). The skin is cleaned and numbed, the needles are positioned with x-ray guidance, a small amount of contrast dye confirms placement, and the numbing medicine is injected. The procedure itself takes about 15 to 30 minutes. Afterward, you will stay briefly so we can record your pain and have you try the movements that usually hurt. Serious complications are rare; risks include bleeding, infection, allergic reaction, and nerve injury.

Coastal Spine & Pain, LLC

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AT HOME: TEST YOUR PAIN

- For the next several hours, **do the activities that normally cause your pain** (within reason) and record your pain score on the diary on the next page.
- Relief from the numbing medicine usually lasts from a few hours up to about 12 hours, depending on the medicine used. It is normal for your pain to return after that.
- Bring the completed diary to your next appointment or have it with you when our office calls to check on you.

AFTER THE PROCEDURE

- **Driving:** do not drive for 12 hours after the procedure. If you received sedation, do not drive, drink alcohol, or sign important documents for 24 hours.
- **Activity:** you may return to your normal activities the next day. Be careful walking if an arm or leg feels numb or weak.
- **Bandage:** remove the bandage the next day. You may shower; do not soak in a tub, pool, or hot tub for 24 hours.
- **Soreness:** some soreness at the injection sites for a few days is normal. Apply ice wrapped in a thin towel for 15 to 20 minutes, 2 to 3 times a day. Never place ice directly on the skin.
- **Medications:** resume your regular medications. If you stopped a blood thinner, restart it the day after the procedure unless you were told otherwise.
- If a steroid was added to your injection, you may have temporary steroid side effects such as flushing, trouble sleeping, or higher blood sugar. If you are diabetic, check your blood sugar more often for the next week.

WHEN TO CALL US

Call our office right away if you have:

- Redness, warmth, swelling, drainage, or increasing tenderness at the injection site
- A fever of 101°F or higher, or chills
- A severe headache that is worse when you sit or stand up and better when you lie down
- New or increasing numbness, tingling, or weakness in your arms or legs that does not go away within several hours
- Severe or rapidly worsening pain

Call 911 or go to the nearest emergency room if you have:

- Weakness, paralysis, or inability to move your arms or legs
- Loss of control of your bladder or bowels
- Chest pain or difficulty breathing
- Signs of a severe allergic reaction, such as swelling of the face or throat, hives, or trouble breathing

Questions or Concerns

Call Coastal Spine & Pain at **(251) 291-2311**, Monday through Thursday, 8:00 a.m. to 4:30 p.m.

For a medical emergency, call 911 or go to the nearest emergency room.

PAIN DIARY FOR MEDIAL BRANCH BLOCK

Please complete as accurately as possible

Patient name: _____ Date of procedure: _____ Area treated: ☐ Neck ☐ Mid back ☐ Low back ☐ Right ☐ Left ☐ Both

Rate your pain from **0 (no pain)** to **10 (worst pain imaginable)**. At each time, try the activities that usually cause your pain, then record your score and the activity you tried.

Time	Pain Score (0 to 10)	Percent Relief (0% to 100%)	Activity Tried
Before the injection			
30 minutes after			
1 hour after			
2 hours after			
3 hours after			
4 hours after			
6 hours after			
8 hours after			
12 hours after			
Next day			
2 days after			

How long did the relief last? _____ hours Did you take any pain medication after the procedure? ☐ No ☐ Yes: _____ at _____

Comments:

Please bring this diary to your next appointment or have it with you when our office calls.

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