



Concord Orthopaedics, P.A.

PART I: ABOUT YOUR SPINAL INJECTION

You have been referred by your physician for a spinal injection. My role in your care is to perform this injection as a means of helping you and your physician treat and/or diagnose your spine problem. There are five handouts available each addressing a specific topic that you can reference. Part I is an overview of my role in your care. Part II is an explanation of why you hurt. Part III is an explanation how corticosteroid injections work to alleviate pain. Part IV is an explanation of how the injections are done. Part V is a summary of frequently asked questions (FAQ). I have been practicing interventional spine care for over 20 years. I hope you find these articles helpful. As always, I remain committed to answering your questions and helping you in this process.

The Role of Spinal Injection in Your Care

Spinal Injection is just one part of a comprehensive approach to spine care. ***As this statement implies, the injection does not replace other important modalities such as exercise, physical therapy, vocational rehabilitation, etc.*** Rather, all treatment modalities work together. It is also important to note that spinal injection is rarely the first step in the treatment process. It should be preceded by medication trial, physical therapy, and manual therapies. If these modalities have not been tried or included in your management, please contact your primary care physician.

What I can Do for You

My role is to perform the injection as part of the treatment regimen prescribed by your doctor. It is important to remember, I do not replace your referring doctor.

The Role of Your Referring Doctor

All treatment decisions are coordinated by your referring doctor. This referring physician is responsible for:

- All diagnostic testing
- Prescription of medications
- Explanation of test results
- All insurance forms
- All out of work notes

Please contact your referring physician, if:

- you are not sure why you have been referred to me
- you are not aware of the results of your testing or what your testing means
- you have not had a recent MRI scan of your spine
 - within the past 2 years for stable conditions
 - within the past 8 weeks for progressive conditions
- you need any insurance or disability forms filled out
- you need any medications including pain medications

About your consultation

The consultation serves three purposes.

- It gives you an opportunity to meet me.
- It gives me an opportunity to meet you.
- It gives both of us an opportunity to ask questions about the spinal injection portion of your care.

[Over]

David J. Nagel, M.D.

About your spinal injection (continued)

It is my experience that the consultation is invaluable for helping allay any anxieties you may have, and it gives me the best opportunity to plan your spinal injection treatment. It also helps us to avoid any surprises which may have an effect on your treatment.

If you have had an injection with me in the past 2 years and if you have not had any surgery in the area where we will be injecting since I last saw you, you may forego the consultation. If you have had a spinal injection at another facility, it is recommended you still have the consultation. However, if you feel comfortable with the procedure, you may forego the consultation.

What if a problem occurs after an injection?

As with many medical procedures, adverse effects may occur. Fortunately, severe complications are rare. In the accompanying handout, called *How is the Injection Done*, I have provided you with a list of potential complications. In order to care for any problems, we offer 24 hour a day, 7 day a week coverage for **problems related to the injection**. All problems not related to your injection need to be referred to your referring physician.

Please note the following are occasional side effects which will abate within a few days. Please do not contact us for these problems:

- An increase in pain in the area where you have pain
- Hot flashes, or a reddening of the face and upper trunk in post-menopausal woman
- An increase in energy level
- An increase in appetite
- Swelling of the ankles
- Mild to moderate increases in blood glucose in insulin dependent diabetics

If you should experience any of the following you should contact me immediately:

- An increase in pain which lasts for more than a week after the injection
- A **severe** increase in pain soon after the injection
- An increase in body temperature occurring more than 24 hours after the injection
- Severe headache located over the top of the head **within** 48 hours of the injection
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If you experience progressive weakness, sensory loss, or bowel or bladder incontinence, please go directly to the nearest emergency room.

If your blood sugar elevates beyond 300 mg/dl, call your primary care doctor.

Please note:

- If I am away, your referring doctor is the back-up doctor on call.
- **I cannot write pain medication for you for any reason. Pain medications can only be dispensed by your referring or your primary care doctors.**

Additional handouts available for your spinal injection care include:

- **Why do you hurt?**
- **What is cortisone?**
- **How is the injection done?**
- **Frequently asked questions.**