

LUMBAR MBB AND SACRAL LATERAL BRANCH BLOCKS

PROCEDURE:

- 1) A L5 dorsal primary ramus block and B S1, S2, and S3 lateral branch blocks
- 2) Fluoroscopic needle guidance

REASON FOR PROCEDURE: Sacroiliac joint disorder/pain

PHYSICIAN:

MEDICATIONS INJECTED: 0.5 mL of 1% lidocaine per site

LOCAL ANESTHETIC INJECTED: C

SEDATION MEDICATIONS: None

ESTIMATED BLOOD LOSS: None

COMPLICATIONS: None

TECHNIQUE: Time-out was taken to identify the correct patient, procedure and side prior to starting the procedure. With the patient lying in the prone position, the patient was prepped and draped in the usual sterile fashion using DuraPrep and a fenestrated drape. Fluoroscopy was used to identify the anatomic location of the L5 primary dorsal ramus, as well as the S1, S2, and S3 posterior foramen. Local anesthetic was given by raising a skin wheal and going down to the hub of a 27-gauge 1.25-inch needle. The 3.5-inch 25-gauge Quincke needle was advanced to the location of the L5 dorsal primary ramus at the junction of the superior articular process and sacral ala, as well as the lateral branch nerves at the lateral border of the posterior/dorsal sacral foramen utilizing intermittent fluoroscopy. A negative aspiration was done to make sure that there was no intravascular placement. Medication was then injected slowly.

The procedure was completed without complications and was tolerated well. The patient was monitored after the procedure. The patient (or responsible party) was given post-procedure and discharge instructions to follow at home. The patient was discharged in stable condition. A follow-up appointment was made.

Note: The patient has been instructed to call us in 2-3 hours to inform us what percentage of pain relief was obtained after the facet nerve blocks from today. The patient was also instructed to do the activities that would normally worsen the pain.

Pre-procedure pain score: 9/10

Post-procedure pain score: 0/10

Notes: Talk about relief since last injection, or any interim events if you haven't seen them in clinic since the last injection, or improved function examples. Maybe mention a particular positioning change for that patient or that they were especially sensitive to the lidocaine sticks. Add anything that will help you on your next injection.