

## SELECTIVE NERVE ROOT BLOCK

### **What is a nerve root and why is a selective nerve root block helpful?**

Nerve roots exit the spinal cord and form nerves that travel into the arms or legs. These nerves allow movement of the arms, chest wall, and legs. These nerve roots may become inflamed and painful due to irritation, for example, from a damaged disc or a bony spur. A selective nerve root block provides important information to physicians but is not a primary treatment. It serves to prove which nerve is causing pain by placing temporary numbing medicine over the nerve root of concern. If a patient's usual pain improves after the injection, that nerve is most likely causing the pain. If the pain remains unchanged, that nerve is generally not the reason a patient may be experiencing pain. By confirming or denying the exact source of pain, it provides information allowing for proper treatment, which may include additional nerve blocks and/or surgery at a specific level.

### **What happens during the procedure?**

The patient is placed on the X-ray table and positioned in such a way that the physician can best visualize the bony openings in the spine where the nerve roots exit the spine using x-ray guidance. The skin on the back is scrubbed using a type of soap (Betadine). Next, the physician numbs a small area of skin with numbing medicine. This medicine stings for several seconds. After the numbing medicine has been given time to be effective, the physician directs a very small needle, using x-ray guidance near the specific nerve being tested. A small amount of contrast (dye) is injected to insure proper needle position. This may increase the patient's usual pain for about 30 minutes. Then a small mixture of numbing medicine (anesthetic) and anti-inflammatory (cortisone/steroid) is injected.

### **What happens after the procedure?**

Patients are then moved to the recovery area where they are monitored for 20 minutes. Patients are then asked to report the percentage of pain relief and report the relief experienced during the next week by keeping a pain diary. A follow-up appointment may be made in 3-4 weeks. The arm(s), chest wall or leg(s) may feel weak or numb for a few hours following the procedure. This is fairly common and happens following a selective nerve root block. A repeat block may need to be scheduled if indicated.

### **General Pre/Post Instructions**

Patients may eat a light meal before the procedure. If a patient is an insulin dependent diabetic, they should take their insulin and eat. Patients may take their routine medications. (e.g. high blood pressure and oral diabetic medications). If you are on **Coumadin (Warfarin), Plavix (Clopidogrel), Lovenox, Pletal (Cilostazol), Effient (Prasugrel), Teclid (Ticlopidine), or Pradaxa (Dabigatran)**, notify the office so that special instructions may be given. If you are allergic to iodine, contrast, or medical dye, please inform the office. Patients can expect to be at the facility approximately 1 1/2 hours. A driver must accompany the patient and be responsible for getting them home. No driving is allowed the day of the procedure. Patients may return to their normal activities the day after the procedure, including returning to work unless instructed otherwise by the physician.

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