

Pain Injection Information

Injections are one means of managing pain. This document provides clear information to patient and family prior to consenting for any intervention. It is the patient's right to be informed and to accept or decline to have the procedure done. This information includes alternatives to the procedure, such as therapy or medication - as well as the risks and benefits.

Risks of steroid medication: Some of these injections require the use of steroid medication, such as epidurals, sympathetic blocks and joint injections. Steroids can affect the immune system and blood sugar levels. Patients with immune system deficiencies should be aware of the increased incidence of infection. If a patient is actively infected then the clinic must be informed.

Risks of injections in patients taking blood thinners: No blood thinning medication or anticoagulants may be used during the procedure, and the medications must be stopped for a specified period of days prior to the injection. However, stopping medication prescribed from your other provider can present risks. These include blood clots, stroke, heart attack and other medical conditions that are being treated by your blood thinning medication. Contact your physician to obtain approval prior to stopping any medication. Some of these medications include but are not limited to Coumadin (warfarin), Plavix (clopidogrel), Pradaxa, Xarelto, Lovenox, Eliquis, Heparin and many others unlisted. If you forgot to stop your medication please tell Dr. Frey or the medical staff.

Use of radiation: The use of radiation will occur with injections, and there are risks associated with exposure to x-rays. Anyone who is pregnant or could be pregnant should inform staff so we can cancel the procedure.

Epidural injection: The risks to epidural steroid injections include but are not limited to infection, stroke, bleeding, low blood pressure, weakness or numbness of arm or leg, lung puncture, nerve damage, headache requiring an epidural blood patch, blood clots requiring surgery and very rarely paralysis and hospitalization. The use of steroid within the epidural space will raise blood sugar especially in diabetic patients, rash, and irritability.

Sympathetic Blocks: Sympathetic blocks are another method of treating chronic pain known as neuropathic pain. It is used to treat pain in the upper extremity (cervical) or lower extremity (lumbar). The cervical sympathetic block takes place very close to the throat and neck so there are extra risks with this procedure including hoarse voice, lung puncture requiring a chest tube, nasal stuffiness, arterial puncture and the aforementioned common risks. The lumbar sympathetic block is close to the kidneys and so inadvertent kidney damage can occur, vessel puncture, nerve root irritation to the lumbar spinal nerves causing damage, numbness, tingling and/or weakness, and hospitalization.

Joint/Bursa/Trigger Point injection: Any joint injections such as to the knee, hip or shoulder include risks which include but are not limited to joint infection, stroke, bleeding, low blood pressure, weakness or numbness of arm or leg, joint pain, nerve damage, and headache. The use of steroid will raise blood sugar, especially evident in diabetic patients. Trigger point injections, occipital nerve blocks and bursa injections are direct injections into areas that can relieve pain. The risks include but are not limited to infection, stroke, numbness to the skull, dizziness, bleeding, nerve damage, lung puncture requiring a chest tube, and hospitalization.

