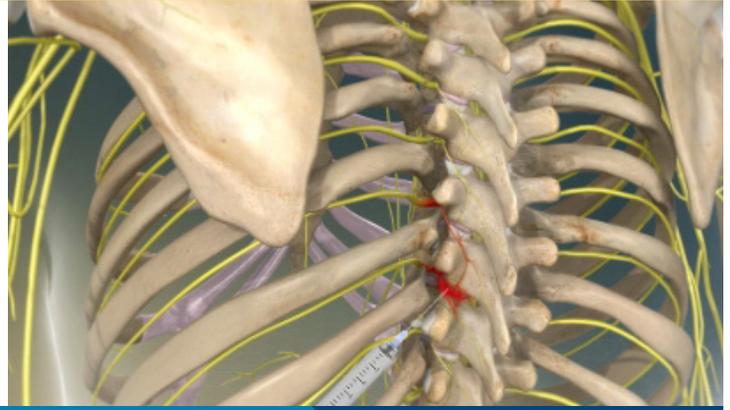


# Thoracic Medial Branch Block



A thoracic medial branch block is a diagnostic treatment intended to determine whether a particular thoracic facet joint is the source of your pain.

## Duration

Less than 15 minutes

## How is it performed?

Prior to the steroid injection, you will be lying on your stomach. The site of the injection will be cleansed, and your physician will administer a dose of local anesthetic to numb the area. Under the guidance of fluoroscopic x-ray, your physician will insert the needle into the proper space. Once assured the needle is in the correct place, the medication solution will be injected. Your vital signs will be monitored for the duration of the procedure.

## Prior to your procedure

You will have the option of receiving no sedation or:

- oral sedation – or –
- intravenous sedation

If choosing sedation, you must not eat for six hours or drink anything for four hours before the procedure.

You should continue taking all medications except blood thinners before the procedure. Please see your medication handout to know when to hold and resume these medications.

[more on back](#) ▶

## Conditions treated

You may benefit from a thoracic medial branch block if you suffer from:

- Spondylolisthesis
- Spondylosis
- Thoracic facet syndrome
- Chronic chest wall pain
- Chronic mid-back pain

## To schedule a procedure

Please contact the nurse navigators to schedule any procedure.

- for McCullough-Hyde Ross Medical Center, call 513 246 7182\*
- for Good Samaritan Hospital and Bethesda Surgery Center, call 513 246 7958\*

\*Please note these numbers are for scheduling only

## To ask other questions

Please call 513 246 7000. Select Option 3 three times.

# Thoracic Medial Branch Block

◀ continued from front

## What are some of the risks and side effects?

This procedure is a relatively safe, non-surgical treatment, with minimal risks of complications. Some of the most common or possible side effects are:

- As with any injection through the skin, it is possible for bacteria to gain entry, causing an infection. The risk of this with an epidural injection is very small.
- Pneumothorax, or collapsed lung.
- Increased pain.
- Bleeding is also a risk of this procedure, which is why you are counseled to stop taking aspirin products, anti-inflammatory products and blood thinners.
- You also may experience some weakness in the legs.

## What to expect after the procedure

You may feel brief pins and needles and/or pressure in the low back after the injection. The numbing medication will wear off over the first couple days.

**This is a diagnostic injection and is not intended to last very long.**

Ice is typically more helpful than heat during the first few days after the injection.

You may engage in regular activity immediately following the procedure. Keep a log of your pain relief as this may help you recall when your physician asks you.

You should resume all medications and regular eating habits immediately.

If you had sedation, you should not drive for 24 hours.

You should call your doctor if you have a fever over 101 within 72 hours of the procedure.