Peripheral Nerve Blocks

Nerves can be damaged in the trunk, pelvic areas and extremities causing pain and functional problems. There are several examples of peripheral nerves such as the ilioinguinal nerve, occipital nerve, brachial plexus, suprascapular nerve, sciatic nerve, tibial nerve, and peroneal nerve. The sciatic nerve can become entrapped and is called piriformis syndrome. Sciatic nerve entrapment can lead to electrical nerve stimulation, fluoroscopy, and/or ultrasound to indentify the nerve. Patients that receive peripheral nerve blocks may deposits potent anti-inflammatory medication (corticosteroid) at the site to decrease nerve irritation with the protocol of using electrical nerve stimulation, fluoroscopy, and/or ultrasound to indentify the nerve. Patients that receive peripheral nerve blocks may experience immediate relief; however, it may take up to a week for the steroid to reach its maximum effect. For some patients, the relief is long lived; while other patients may require repeated injections. For those with temporary relief, the diagnostic information is useful for planning other procedures or treatment.

The Procedure

All injections administered at our facility are performed by physicians under fluoroscopy (live x-ray) or ultrasound. The injection itself will take approximately 15-30 minutes, but the entire procedure takes between 60-90 minutes. You will be positioned on a procedure table. The skin will be sterilized with an antiseptic solution and a sterile drape will be placed over the area. The site will be numbed by injecting a local anesthetic into the skin. It is important at this time to be as relaxed and still as possible. Focusing on steady breathing will often help you to relax. A specially designed needle will then be inserted using fluoroscopy or ultrasound while using a nerve stimulator to indentify the nerve. Using a stimulating needle, a small amount of electrical current is passed along the distribution of the nerve to the area of interest. You will feel a tingling sensation in the area innerved by the nerve of interest. After proper needle placement is confirmed, local anesthetic and a steroid will be administered. The steroid works as anti-inflammatory and reduces compression and pain. Once the needle is withdrawn, you will remain in your position until advised to sit up. You will be observed for approximately 15-20 minutes. Once your vital signs are stable you will be released to your driver who will take you home where you can continue with the aftercare instructions.

How do I prepare for the procedure?

1. The vast majority of patients do not require sedation for the procedure. However, if you have been given a prescription for pre-op medications, please have these filled, but DO NOT TAKE PRIOR TO ARRIVING. The staff will instruct you on when to take the medication once in the office.
2. Eat and drink as normal unless otherwise advised by your physician, but avoid alcohol for 24 hours prior. If your procedure is scheduled at a surgery center, do not eat or drink for 6 hours prior to your procedure. If you have diabetes and your procedure requires that you alter your particular diet, please consult your medical provider managing your diabetic medication.
3. Please take your blood pressure or heart medications the morning of your procedure.
4. Please discontinue your “blood thinning” medications such as Aspirin, Coumadin, Plavix, and Ticlid as advised prior to your procedure (see complete medication list attached). You must obtain permission from your prescribing physician prior to discontinuing these medications. Stopping these medications without discussing it with your prescribing physician can result in stroke, cardiac events, or even death.
5. Notify the nurse prior to the procedure if you think you may be pregnant. The x-rays and medication may harm your fetus.
6. Notify staff of any allergies: iodine, anesthetic, seafood, steroids, latex or contrast dye.
7. Arrange for someone to drive you home. You should not drive for the remainder of the day.
8. Please be sure to have all of your questions and concerns addressed prior to the day of your procedure.

Potential Risk & Most Common Side Effects, but not limited to the following:

Although infrequent, serious side effects can occur with spinal injections as with any procedure.

1. Infection: minor infections, severe infections, such as an abscess, meningitis, are rare.
2. Bleeding: Bleeding is a rare complication but it is more common for those taking blood thinning medications.
3. Spinal Headache: Spinal headache may occur due to dural puncture.
4. Allergic reaction: contrast dye, anesthetic medication, latex, and iodine.
5. Nerve damage: temporary leg weakness, permanent paralysis
6. Elevated blood sugar: Steroids have the potential to increase blood sugar in patients with pre-existing diabetes.
7. Elevated blood pressure: Steroids have the potential to increase blood pressure in patients with hypertension.

If you have any questions following your procedure or experience any complications, please call our office. If you have an emergency dial 911 or go to the nearest Emergency Room.