# Epidural injection

PATIENT INFORMATION SHEET INTO4 (SEDATION)



### Your appointment:

Date:

Time:

Location:

Please see our website for more branch details.

#### Duration of examination

The examination will take approximately 40 minutes plus post-procedure care.

#### Please bring with you:

- Your request form
- > All previous relevant imaging
- Medicare and any Healthcare cards
- Current medication list from your GP

Please contact the clinic if you have any queries regarding payment.

For more information on this procedure please call one of our branches.

For more information regarding Benson Radiology please visit:

bensonradiology.com.au

## What is an epidural injection?

A common cause of sciatic pain is an inflammatory response to nerve irritation by a disc protrusion or nerve entrapment. An injection of steroids (anti-inflammatory medication) into the epidural space can act to decrease this inflammation, thus decreasing pain.

### Patient preparation

You will need to fast for six hours prior to the procedure.

Please inform us if you are taking any blood-thinning medication (i.e. Aspirin, Warfarin, Dabigatran or Clopidogrel) or if you have any allergies. You may need to have a blood clotting test before the procedure and have your medication adjusted by your doctor.

Please advise the radiographer if you are, or think you may be pregnant.

#### Sedation

An anaesthetist will perform the twilight sedation. Please note this is not a general anaesthetic and you will still be awake during the procedure. The anaesthetist will use the appropriate amount of sedative and monitor you throughout the duration of the procedure.

# What will happen during the examination?

You will be asked to change into a gown. The procedure is normally performed with you lying face down on the CT examination table. Your skin will be cleansed in the area of interest to create sterile conditions. A local anaesthetic is then injected. CT imaging is used to accurately locate the area that requires injection and to guide the needle. It is important you keep as still as possible during the procedure.

A radiologist (specialist medical imaging doctor) will position a needle using the CT guidance within the epidural space and inject the steroid and sterile saline or local anaesthetic. The needle is removed and a sterile dressing applied.

## Are there any risks?

You will receive a small dose of x-ray radiation.

Infection into the epidural space, which is rare, can also occur.

If the fluid sac around the nerves is punctured, this can lead to a fluid leak that results in a headache. This usually settles over a few days with bed rest and analgesia. Only rarely does this require further treatment.

Spinal cord injury with transient or permanent paralysis is very rare.

Complications such as infection, allergy, and bleeding are considered to be very rare.



# Epidural injection

PATIENT INFORMATION SHEET SCR04 (S)



Following the procedure you may feel some slight grogginess. You will be kept for observation until you are cleared by a nurse and feel comfortable to leave.

You are required to have someone with you to drive you home and stay with you overnight.

Please allow up to four hours for the procedure.

#### After the examination

You may experience some soreness or bruising at the needle site and rarely, some minor muscle spasm. You may also experience some temporary numbness at the injection site and down your leg. A temporary increase in back pain may be felt.

We request you do not perform any lifting or physical activities that may aggravate your condition for at least 12 hours after the procedure

It is important you understand why and how we will be assisting you. If you have any questions, please call one of our branches or speak to our staff on the day of your visit.

# Effects from the treatment

The local anaesthetic may give temporary relief from pain for up to four hours. Paracetamol may be taken if you experience discomfort. The steroid can take up to a week to reach its maximum effect. Relief from symptoms does vary between patients, both in time and scale.

Some people do not receive pain relief from the procedure if inflammation is not the main cause for their pain. Please keep in mind this is generally not a failure of the procedure. This information is useful for your doctor as it indicates other causes of pain that may need to be considered.

