

**DEPARTMENT OF DIAGNOSTIC RADIOLOGY AND NUCLEAR MEDICINE
SECTION OF NEURORADIOLOGY**

**PATIENT INFORMATION SHEET
Lumbar Epidural Injection**

Indications for the Procedure: Lumbar Epidural Injection is a treatment to reduce or stop back and/or leg pain caused by conditions of the spine such as degenerative spine and disc disease, disc herniation, and spinal canal stenosis.

Description of the Procedure: The patient is placed on his/her stomach on the X-ray table. The skin of the back is cleaned with an antiseptic, which contains iodine. With a small needle puncture (stick), the skin and deeper tissues of the lower back are numbed with lidocaine, an anesthetic drug (numbing medicine). Next, using X-ray guidance, a thin needle is placed into the spine of the lower back. A small amount of dye material is then injected through the needle into the spine. The dye is used to confirm the correct location of the needle in the spine. X-ray pictures may be taken of this location. Then, an anesthetic and steroid mixture for pain relief is injected into the lower spine. At the end of the procedure, the needle is withdrawn from the back, and a tiny puncture mark on the back is covered with a Band-Aid. The patient is either observed in the X-ray department for 1-2 hours or returned to his or her hospital room for observation.

Risks of the Procedure: Serious complications from this procedure are rare. There may be bleeding within or outside of the spine or at the puncture site, local infection at the puncture site or in the spine, allergic reaction to the contrast material, injury to nerves, or continued back and/or leg pain.

Alternatives to the Procedure: Alternatives to this procedure include continued use of medication for the relief of pain or possible surgery.

Probable Consequences of Refusing the Procedure: Consequences may include not being able to reduce or stop the back and/or leg pain.

Person(s) Performing the Procedure: The key portions of the procedure will be performed by an attending physician who is a member of the medical staff of Rush University Medical Center, or a fellow or resident in Neuroradiology who will be observed and supervised by a member of the medical staff. Residents and fellows are licensed physicians. Fellows have completed a residency in radiology and are in an approved post-residency training program. Residents are in training in an approved residency program. The parts of the procedures fellows or residents will perform will be based on their level of training and competence.