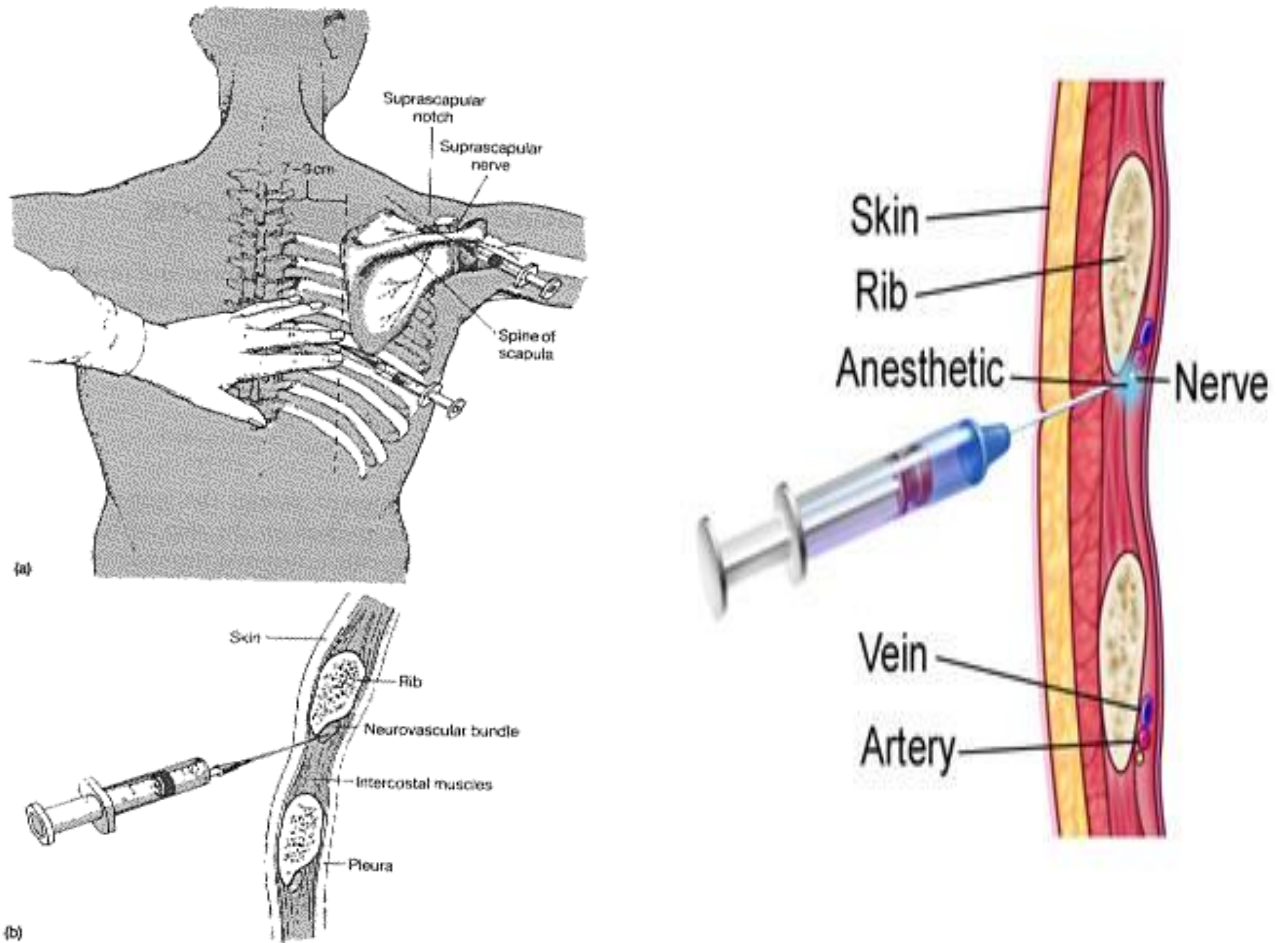




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INTERCOSTAL NERVE BLOCK



What is an intercostal nerve block?

An intercostal nerve block is an injection of local anesthetic with or without steroid injected just under the rib where the intercostal nerve lies. An intercostal nerve block is typically ordered by your doctor for pain in the area of your ribs that comes after having surgery in that area, a rib fracture, herpes zoster (shingles) or an intercostal nerve entrapment. An intercostal nerve block may be diagnostic and/or therapeutic. One of three things may happen. 1. The pain does not go away – which means that the pain is probably not coming from the nerve(s) at the level(s) of the injection – this has diagnostic value. 2. The pain goes away and stays away for a few hours but the original pain comes back and doesn't get better again. This would mean the block was also of diagnostic value – the pain is probably coming from the nerve(s) at the level of the injection(s), but the steroid, if used, was not of benefit. 3. The pain goes away after the block, the pain may come back later that day, but then the pain gets better again over the next few days. This means that the block was of

therapeutic value – the steroid had a long lasting effect on the pain. If you get good, lasting benefit from the injection, the block may be repeated. It is hoped that each subsequent injection will last longer than the one before.

What are the risks of the procedure?

As the rib cage is designed to protect the lungs, there is a risk of collapsing the lung if the needle penetrates the lung. If severe, this could require the placement of a chest tube to reinflate the lung. Some risks, although remote include: bleeding, infection, organ injury, nerve injury and allergic reaction to the medication(s) etc. Diabetics may have short-term elevation of blood sugars. People prone to fluid retention may have increased fluid retention for 1-2 weeks.

Will the injection hurt a lot?

Most people say the stinging/burning of the numbing medicine is the most uncomfortable part of the procedure though everyone's response to any procedure is individual. As the injection is near a nerve it is possible to get a temporary "electric shock" sensation.

What happens during the actual procedure?

After signing a consent form and checking your blood pressure the procedure will be done with you either in the sitting position or lying on the stretcher depending on the area to be injected as well as your comfort. You will be asked to rate your pain on a scale of 0 – 10. The doctor will feel your back to identify the rib(s) to be injected. The area will be cleansed with an antiseptic soap. Some local anesthetic may be placed under the skin – this is felt as a stinging/burning sensation. A small needle is then advanced to just under the rib. Local anesthetic, with or without steroid, is then injected and the needle is removed. This is repeated for as many levels as needed. When all levels are complete, your skin will be cleansed and a bandage(s) will be applied if needed. The local anesthetic takes about 10 minutes to begin to take effect. The doctor will check your skin to see if the areas injected are numb. On occasion, an injection will need to be repeated to block the nerve. You will be asked what your pain scale is on a scale of 0 –10. Your blood pressure will be checked and you will be discharged to leave with your ride after M.D. approves discharge.

How will I feel after the injection?

After the local anesthetic takes effect, you will feel numb in a band-like fashion that follows the rib(s). Your pain may be improved. It is important to keep track of how you feel for the remainder of the day. The steroid, when used, usually takes two or three days to have an effect in most people and peaks in about two weeks. You may feel lightheaded from the local anesthetic. This is usually short-lived. Some local tenderness may be experienced for a couple of days after the injection. Using an ice pack three or four times a day will help this. You make take your pain medication as well after the injection. It is important to keep track of the amount of pain relief you received as well as how long the pain relief lasted.

BEFORE YOUR PROCEDURE

1. **Bring your insurance card(s) with you. Leave your valuables at home.**
2. Arrive at **ELPIS PAIN MANAGEMENT CENTER, 4122 KEATON CROSSING BLVD, SUITE 102, O'FALLON, MISSOURI 63368.**
3. You will need a driver to bring you and wait for the duration of your stay here at the Pain Center. You need a driver due to the anesthetic used in the procedure, not due to sedation.
4. **If you prefer to have Intravenous (IV) sedation for your procedure** you are allowed to have solid foods (this includes milk and soup) as long as you **finish eating 8 hours before your procedure**. This means you can have a full breakfast at 6 am if you have a procedure at 2:00 pm. You can also have clear liquids (including jell-o, soda, water, certain clear juices like apple, cranberry grape and other without pulp – no orange or tomato juice) as long as you finish these 2 hours before your procedure. This means that you can have black coffee, jell-o or a glass of water at 12:30 pm before your 2:30 pm procedure.
5. You should take all your morning medicine (except diabetic medicine, if you are having IV sedation) with a sip of water atleast 3 hours before the procedure. We ask that you bring an up-to-date, current list of your medicines every time you come for a procedure or office visit. This is due to the fact many of our patients have multiple doctors and often have their medicines change.
6. Please notify us if you are pregnant, allergic to contrast dye, or iodine.
7. It is necessary for you to stop taking blood thinners for this procedure. (**Ibuprofen, aspirin, coumadin, heparin, lovenox, plavix, aggrenox, etc.**) Before stopping, you should discuss this with your primary doctor to make sure it is alright to do so. **IT IS EXTREMELY IMPORTANT FOR YOU TO NOTIFY US IF YOU ARE OR HAVE BEEN TAKING BLOOD THINNERS!!**

AFTER YOUR PROCEDURE

1. Pain relief may not be immediate. If pain relief is immediate, it may return within several hours. Sometimes, the pain becomes worse for the next day or two following the procedure. You are expected to recall the duration and effectiveness of the pain relief during and immediately after the procedure.
2. We will keep you in recovery until you are stable. Usually 15 minutes for patient's not receiving IV sedation and 30 minutes for those who do. We will bring your driver or family member back to you in recovery.
3. Your vital signs will be monitored by the nursing staff and we will also make your next appointment for you before you leave.
4. **When you first begin to walk, it is important that you ask the nurse for assistance.**
5. You may not drive; operate heavy machinery or power tools for at least 8 hours after your injection.
6. You may resume your normal medications (except blood thinners-be sure to check with your nurse regarding when and if you may restart these medicines.) You may want to take it easy for the day of your injection; however normal everyday activity is encouraged for the days following.

WHAT TO EXPECT

How quickly can I expect pain relief?

Most patients can expect pain relief within the first 15 to 20 minutes after the injection of local anesthetic. This pain relief may only last several hours; however, if the physician has also used steroid medication, you may also receive some pain relief that will begin roughly 36 hours after the injection. Duration of pain relief is somewhat variable, as it differs from patient to patient.

How much relief will I get & how long will it last?

Relief varies from one person to the next. The steroid may take several days to work and peaks in about 2 weeks. Therefore, it may be several weeks before you feel a change in your pain. After the first day, you can perform activities as before and return to work.

You may notice your pain increase in the next day or two following the procedure. This is normal. If you experience severe neck or back pain, new numbness or weakness of your arms or legs, loss of control of your bladder or bowels, or have signs of infection (temperature greater than 99.9°, drainage, redness/heat at insertion site) – **CALL IMMEDIATELY**. If you experience pain at the injection site, you may apply ice to the affected area for 20 minutes every 2 hours. No heat is to be used on the injection area for the remainder of the day. No tub bath or soaking in water (pools/Jacuzzi, etc) for the remainder of the day. After the first day, you can perform activities as before & return to work. You may receive an appointment to have another injection or an office visit. If you have any questions at this time, don't hesitate to ask.

Please be aware that if you are a Diabetic the use of steroids will elevate your blood sugar, so close monitoring of your glucose by you and your PCP is recommended. If you are on Insulin, it is recommended to contact your PCP prior to the procedure for any adjustments in your Insulin dosing.

NOTE: YOUR PROCEDURE WILL BE CANCELLED IF:

You have an active infection, flu, cold, fever, or very high blood pressure.

You do not have a responsible driver to take you home, arrive late for your procedure

You are unable to follow the medication / fluid restrictions.

Call the office at (636) 329 - 9077 for procedure related questions.
