

Cervical Medial Branch Block/Cervical Radiofrequency Ablation (RFA)

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

Cervical radiofrequency ablation (RFA) is a longer lasting procedure that is done if a patient experiences good relief with the cervical medial branch block.

Conditions treated

You might benefit from a cervical medial branch block if you suffer from:

- Spondylolisthesis
- Spondylosis
- Cervical Facet Syndrome
- Chronic neck pain
- Whiplash

Duration

Less than 30 minutes

How is it performed?

Prior to the steroid injection, the site of the injection will be cleaned, 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. Each joint has two nerves, so multiple levels may be needed, depending on the number of sites to be treated. Once the needle is in the correct place, the steroid solution will be injected. Your vital signs will be monitored for the duration of the procedure. If you get 80 percent relief for a day with the medial branch blocks, the next step is the cervical radiofrequency ablation.

Prior to your appointment

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 or ask your doctor.

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:

- Dizziness
- Difficulty walking, weakness
- Drowsiness the first day of the procedure. This is not uncommon if anesthesia is used. The most common side effect from the steroid medication is muscle cramping, increased appetite, flushing, headache, elevated blood sugar and nausea. All of these symptoms can last up to 2 weeks, but typically resolve in 3-5 days.
- If you have congestive heart failure or are prone to fluid retention, you should monitor your weight each day after the procedure and call your doctor if you have a weight gain of more than 3 pounds.
- If you have glaucoma and experience blurred vision, you should call your ophthalmologist to have your eye pressures checked.

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- Hiccups and temporary weakness in the legs have been reported, but again are very infrequent.

What to expect after the procedure

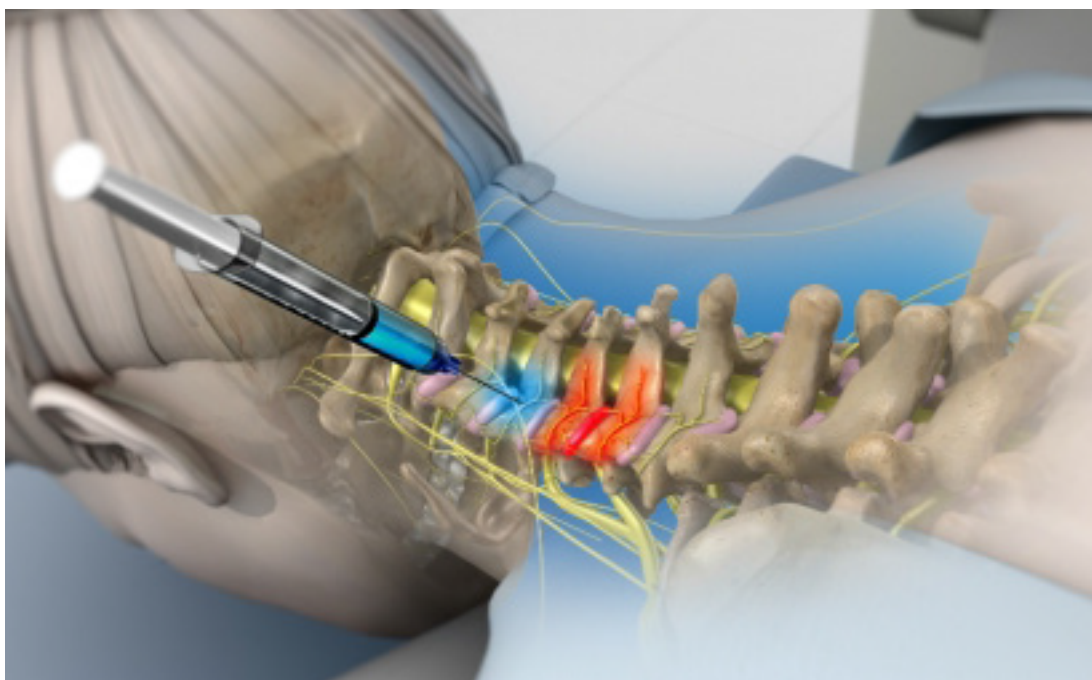
Once the steroid is injected, you might feel brief pins and needles and/or pressure in the arms. This should resolve. As the days progress, you should start to notice a decrease in your pain. Keep a log of your pain relief to help you recall when you contact your physician or advanced practice provider asks. **Some people get longer relief with the diagnostic block, but this is not typical.**

After the radiofrequency procedure, you can expect to have soreness around the injection sites for up to 3 weeks. Pain relief typically improves each day with maximum improvement after a month. Pain relief typically lasts 6-14 months. However, not all patients will achieve pain relief with this procedure and some will experience shorter periods of pain relief than others.

Ice is typically more helpful than heat during the first two to three days after the injection.

You should not engage in physical activity for 24 hours following the procedure.

You may resume taking medications (except blood thinners) and regular eating habits immediately. You should call your doctor if you experience a fever over 101 within 72 hours of the procedure.



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