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## **Radio Frequency Lesioning**

**WHAT IS A RADIO FREQUENCY LESIONING (RFL)?** Radio Frequency lesioning is a procedure using a specialized machine to interrupt nerve conduction on a semi-permanent basis. The nerves can be usually blocked for 6-9 months (can be as short as 3 months or as long at 18 months or more)

### **AM I A CANDIDATE FOR RADIO FREQUENCY LESIONING?**

You must have responded well to local anesthetic/cortisone blocks (Facet MBB), to be a candidate for RFL

### **WHAT ARE THE BENEFITS OF RADIO FREQUENCY LESIONING?**

The procedure disrupts nerve conduction (such as conduction of pain signals), and it may in turn reduce pain, and other related symptoms. Approximately 70-80% of patients will get good block of the intended nerve. This should help relieve that part of the pain that the blocked nerve controls. Sometimes after a nerve is blocked, it becomes clear that there is pain from the other areas as well.

### **HOW LONG DOES THE PROCEDURE TAKE?**

Depending upon the areas to be treated, the procedure can take from about twenty minutes to over an hour.

### **HOW IS IT ACTUALLY WORK?**

Since these tiny pain nerve endings cannot be seen on x-ray, the needles are positioned using bony landmarks that indicate where the nerves usually are. Fluoroscopy (x-ray) is used to identify those bony landmarks. A local anesthetic (like Novocaine) is injected to minimize the discomfort. After confirmation of the needle tip position, a special needle tip is inserted. When the needle is in good position, as confirmed by x-ray, electrical stimulation is done before any lesioning. This stimulation may produce a buzzing or tingling or pressure sensation or may feel like hitting your "funny bone". You may also feel your muscles jump. You need to be awake during this part of the procedure so you can report what you're feeling, often you may report pain in the area that you suffer. The tissues surrounding the needle tip are then heated when electronic current is passed using the Radio Frequency machine, for a few seconds. This "zaps" the nerves semi-permanently.

### **WILL THE PROCEDURE HURT?**

Nerves are protected by layers of muscle and soft tissues. The procedure involves inserting a needle through skin and those layers of muscle and soft tissues, so there is some discomfort involved. However, we numb the skin and deeper tissues with a local anesthetic using a very thin needle prior to inserting the needle. There may be moderate discomfort involved for a few days or weeks after. You may have numb areas with increased sensitivity (like a deep sun-burn).

### **WILL I BE "PUT OUT" FOR THIS PROCEDURE?**

No. This procedure is mostly done under local anesthesia. Most patients

receive some intravenous sedation and analgesia, which makes the procedure easier to tolerate. It is necessary for you to be awake enough to communicate easily during the procedure.

### **HOW IS THE PROCEDURE PERFORMED?**

It is done with either the patient lying on the stomach for low back pain, or on the side for neck pain. The patients are monitored with blood pressure cuff, and blood oxygen-monitoring device. X-ray (fluoroscopy) is used to guide the needles.

### **WHAT SHOULD I EXPECT AFTER THE PROCEDURE AND WHAT ARE THE SIDE EFFECTS?**

Initially there will be muscle soreness for up to a week after the procedure. Ice packs will usually control this discomfort. After the first two weeks are over, your pain may be gone or quite less. Some patients may have some "deep sun-burn" type feeling. Some may develop hypersensitivity or burning pain or numb areas for a few weeks. The relief of pain is noticed in about 2 to 3 weeks, not right away.

### **WHAT SHOULD I DO AFTER THE PROCEDURE?**

You should have a ride home. We advise the patients to take it easy for a day or so after the procedure. You may want to apply ice to the affected area. Perform the activities as tolerated by you.

### **CAN I GO TO WORK TO WORK THE NEXT DAY?**

You should be able to return to your work the next day. Sometimes soreness at the injection site causes you to be off work for a day or two.

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**HOW LONG WILL THE EFFECTS OF THE PROCEDURE LAST?** If successful, the effects of the procedure can last from 3-18 months, usually 6-9 months.

**HOW MANY PROCEDURES DO I NEED TO HAVE?** If the first procedure does not relieve your symptoms completely, you *may* be recommended to have a repeat procedure after re-evaluation. Because these are not permanent procedures, they may need to be repeated when the numbness wears off (often 6-12 months).

**WILL THE RADIO FREQUENCY LESIONING HELP ME?** It is very difficult to predict if the procedure will indeed help you or not. Generally speaking, the patients who have responded to repeated local anesthetic blocks will have better results.

**WHAT ARE THE RISKS?** The risks although infrequent, include: Allergic reaction to the medications used; Bruising or infection at the injection site; damage to nerves or blood vessels near the lesioned nerve. The other rare risks may include infection, bleeding, nerve injury etc. *In over 15 years of practice, Dr. Gopal has performed over 20,000 spinal procedures on patients with no reported serious complications.*

**WHO SHOULD NOT HAVE THIS PROCEDURE?** If you are allergic to local anesthetics, or have an active infection or illness going on, you should not have the procedure.

**CERTAIN MEDICATIONS MAY INCREASE THE RISK OF COMPLICATIONS.**

\* If you are on Coumadin (warfarin), Heparin, Aggrenox, Lovenox (enoxoparin), Ticlid (ticlopidine), Plavix (clopidogrel), Pradaxa (dabigatran), Eliquis (apixaban), Xaralto (rivaroxaban) OR any other BLOOD THINNING products you will need to get a medical clearance allowing you to stop your medication from your primary physician or cardiologist, prior to your scheduled procedure. **DO NOT STOP TAKING YOUR MEDICATIONS UNTIL WE CALL AND NOTIFY YOU THAT YOU HAVE A MEDICAL CLEARANCE.** You can continue to use Celebrex and your pain medicines before the procedure. You should continue to **TAKE YOUR ROUTINE MEDICATIONS.** If you are on antibiotics please notify us.

**REMEMBER:**

- **This and all Procedures are performed at New York Advanced Surgical Intervention Care – 2008 Eastchester Road, 2<sup>nd</sup> level Suite B, Bronx NY 10461 or at 984 N Broadway Suite 510, Yonkers NY 10701**
- **Please DO NOT stop taking your blood pressure, diabetic, insulin, or cardiac medicines in days prior to the procedure**
- **Have an adult drive and be there on your discharge after the procedure.**
- **Wear loose, comfortable 2 piece clothing.**
- **Please do not bring any valuables inside the procedure area as you undergo anesthesia**
- **If you are diabetic, steroids may temporarily affect your blood sugar. If you are fasting for IV sedation/anesthesia related to the procedure, you may miss the morning dose of your diabetic medicine, check with your medical doctor**

- **Stop taking Coumadin or Plavix (related products) 7 days prior to the scheduled procedure as directed by your medical doctor**
- **Bring any requested MRI, CT, X-ray images on the day of the procedure.**
- **If you are pregnant or if there a possibility that you may be pregnant, let the physician know immediately, as the X-ray camera cannot be used.**
- **When you check in, you will need to sign consent forms, advise the medical staff of any allergies, especially to shellfish, iodine, contrast dyes or Latex.**
- **IV sedation; No FOOD for 8 HOURS before the procedure. Clear fluids (Water, Apple Juice) are OK 4-6 hours before the procedure. If you are Diabetic and have taken your medicines, please make sure you drink Apple Juice 4-6 hours before your procedure.**

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