



# Non-Epidural Steroid Injection

*What to expect from your procedure*

**This handout explains a non-epidural steroid injection. This injection is given to ease pain.**

**You will need to keep a diary of your pain symptoms for 1 week after your procedure.**

## **What is a non-epidural steroid injection?**

This is a minimally invasive treatment in which a steroid medicine is injected. Local *anesthetic* (numbing medicine) may also be used.

Steroids (short for *corticosteroids*) are strong medicines that are used to ease pain. Steroids lessen the inflammation that causes pain. They are used to treat many inflammatory conditions. Your injection may be into a ligament, within a joint (*intra-articular*), or at a trigger point. Your doctor will explain the specific area that will be injected.

## **How is it done?**

The doctor will use local anesthetic to numb the skin where the needle will be inserted. The doctor then uses X-ray or ultrasound to help guide the needle to the correct nerve or ligament. When the needle is inserted, you may feel tingling or a deep ache. You will tell the doctor when this happens.

To make sure the injection is done in the right place, the doctor will ask you questions at certain times during the procedure. When the doctor is sure the needle is in the right place, the anesthetic medicine is injected. You may feel some discomfort, tingling, or pressure from the injection.

You may receive a light sedation for this procedure, but you will stay awake so that you can talk with the doctor.

## **How long does it take?**

The procedure takes about 15 minutes, but plan to spend 1 or 2 hours at the clinic from the time you are admitted until you leave.

## **Side Effects**

There is a risk for side effects with any medical procedure. Talk with your doctor about side effects before having any treatment.

Possible side effects from this procedure are:

- Pain at the injection site.
- Infection.
- Bleeding.
- Nerve injury.
- Allergic reaction.
- Headache.
- Not being able to pass urine.
- More pain than usual.

## **How to Prepare**

### *Medicine Changes*

**You may need to stop taking blood-thinning medicines such as warfarin (Coumadin), clopidogrel (Plavix), enoxaparin (Lovenox), and others before having this procedure.** Tell your pain doctor if you are taking blood-thinning medicine. Your pain doctor will tell you if you need to stop taking this medicine before the procedure.

If your pain doctor wants you to stop taking this medicine, talk with your doctor who prescribed the medicine as soon as you have scheduled your injection.

You may keep taking low-dose aspirin and anti-inflammatory medicines.

### *On the Day of the Procedure*

Note: You may eat and drink as usual if you will **not** receive sedation.

#### **For all patients:**

- Wear loose, comfortable clothing.
- Arrive at least 30 minutes before your appointment.
- It is best to bring someone with you who can drive you home.
- Take all your other usual medicines, except for blood-thinners (see above).
- **If your blood pressure is high and not well-controlled, your procedure may need to be scheduled for another time.**

## Questions?

Your questions are important. Call your doctor or health care provider if you have questions or concerns. UWMC clinic staff are also available to help.

Weekdays from 8 a.m. to 5 p.m.:

Call the Center for Pain Relief at 206-598-4282.

After hours and on weekends and holidays:

Call 206-598-6190 and ask for the Pain Fellow on call to be paged.

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### If you will be receiving sedation:

- You **must** bring someone with you who can drive you home after the procedure.
- Starting 8 hours before your appointment:
  - Do **not** eat any solid food.
  - For the first 4 hours, you may drink only clear liquids.
  - For the 4 hours before your appointment, do **not** drink anything.
  - If you need to take any medicines during this time, take them with only a small sip of water.

### We will not be able to give you sedation if you do not follow these diet guidelines.

- **If you will be receiving sedation and you have diabetes**, you must also ask your diabetes care provider how to manage your medicines the morning of your procedure since you will be fasting.

### When can I resume my usual activities?

- If you had sedation, do **not** drive or use machinery for 24 hours after your procedure.
- If you have pain relief after your procedure, do **not** start doing all the activities you have not been able to do because of your pain. Remember, you still have the underlying problem that caused your pain. If you overdo it, your pain may return quickly, even within a few days of feeling better.
- It is important to do an exercise program that slowly strengthens the muscles you have not been able to use because of your pain. It will take time to build up your strength.

### Follow-up

You will go home with the *Patient Self-Reported 1-Week Pain Diary*. You will use this to record your pain levels after your procedure.

One week after your procedure, you **must** call the clinic to report your results. **Your follow-up appointment will not be scheduled until you have made this call.**

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