

## **Post-Procedure Instructions**

A small bandage may be placed at the injection site, you may remove the bandage 24 hours after the injection.

You may place an ice pack on the injection site for 10-20 minutes at a time if there is soreness. Be careful not to burn your skin with the ice and always place a towel between the ice and your skin.

You may shower, but avoid baths, pools, or whirlpools for 24-48 hours following the procedure.

Plan on resting the remainder of the day. It is recommended that you not return to work that day or participate in any strenuous activity. You can usually resume normal daily activities the day after the injection. You usually can start or resume your individualized exercise program or physical therapy program one day after your injection.

The provider performing your injections may instruct you to perform gentle stretches 20 minutes prior to going to bed the night of the injection and upon waking the next morning. This will assist in reducing any discomfort you may experience.

Tylenol or other over-the-counter analgesic may be taken if needed for discomfort or spasms.

Side effects which may occur, but will go away in a few days include: Trouble Sleeping, Briefly Increased Pain, Facial Flushing, Hiccups, Small Amount of Bleeding at the Injection Site, Back Stiffness, Pain at the Injection Site.

Diabetic patients need to monitor their blood glucose (blood sugar levels) before meals and at bedtime over the next 72 hours and continue to follow a diabetic diet and notify this office or their PCP if their blood sugar goes over 350.

It takes a few days, even a week or longer for the steroid medicine to reduce inflammation and pain. **(You may experience increased stiffness, spasms, and pain to the area of injections. This is normal.)**

Call your doctor or go to the Emergency Room if you experience any of the following:

- Sever pain or headache
- Fever or chills
- Loss of bladder or bowel control
- Progressive weakness
- Redness or swelling around the injection site

Patient Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**(Instructions Reviewed Pre-Procedure)**

Employee Signature: \_\_\_\_\_ Date: \_\_\_\_\_