



Cervical Epidural Steroid Injection

PATIENT INFORMATION & PROCEDURE GUIDE

Understanding Your Diagnosis

Cervical radiculopathy, or a "pinched nerve," occurs when a nerve root in your neck is irritated. This can be caused by a **disc herniation**, **spinal stenosis**, or **bone spurs**. This inflammation is what leads to the pain, numbness, or "electric" sensations you feel traveling down into your arm or hand.

The Treatment: Cervical Epidural Steroid Injection (CESI)

A CESI is a minimally invasive treatment where anti-inflammatory medication (steroids) is placed into the epidural space. This medication works to reduce swelling around the nerve, "putting out the fire" of inflammation to relieve pain and help you return to your normal activities.

Our Approach: C7-T1 Interlaminar

At Abilene Pain, Dr. Pugh performs these injections using the **C7-T1 Interlaminar approach**. This specific level, located where the base of the neck meets the upper back, offers the safest and most effective anatomical entry point. From here, the medication can flow upwards to target the specific irritated nerves in your cervical spine.

Procedure Day Highlights:

- Performed under **Live X-Ray (Fluoroscopy)** for maximum precision.
- We use local numbing medication to ensure a comfortable experience.
- The entire procedure typically lasts about 15 minutes.
- You will be able to walk out and go home shortly after the injection.

Benefits

- Significant reduction in radiating arm pain.
- Reduced need for oral pain medications.
- Improved ability to perform physical therapy.

Recovery

- Return to regular activity same day
- Full relief usually develops over 3 to 7 days.
- A brief follow-up will be scheduled to assess your

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Abilene Pain Locations

Main: 1925 Hospital Drive

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Procedure Summary: Cervical Epidural (CESI)

You have undergone a Cervical Epidural Steroid Injection, a specialized procedure designed to treat chronic neck, shoulder, or arm pain originating from the cervical spine. Using real-time imaging, we have delivered a concentrated blend of anti-inflammatory medication (steroid) and local anesthetic into the epidural space—the area surrounding the spinal nerves. This procedure was performed to reduce nerve root inflammation and "dull" the pain signals traveling from your neck to your extremities.

Activity Restrictions

- **Driving:** No driving for 24 hours if you had IV sedation.
- **Lifting:** As tolerated
- **Exercise:** As Tolerated

Wound Care

- **First 24 Hours:** Leave dressings intact
- **Showering:** Okay to shower
- **Submersion:** Permitted after 24 hours

Pain Management Expectations

- **The Flare:** Expect a potential increase in localized soreness or a "fullness" sensation in the neck for 2–5 days.
- **Management:** Use ice packs (20 min on/off) and continue baseline medications.
- **Results:** Peak relief typically occurs between 6 weeks and 3 months

Red Flags

- New or worsening leg weakness, numbness, or "foot drop."
- Sudden loss of bowel or bladder control.
- **Fever** >101.5°F, chills, or **drainage at the incision site.**
- **Severe headache** that worsens when sitting or standing.

Follow-Up Schedule

- **1 Month:** Formal functional assessment of procedural efficacy.

Blood Glucose

If receiving a steroid injection, expect a temporary rise in blood glucose levels, which usually resolves within a few days. Diabetic patients should monitor their sugar levels closely for 48–72 hours post-procedure.

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