Treatment Guidelines
Facet Injections & Facet Rhizotomies

1. Documentation that the patient has a clinical picture of facet joint pain with cervical, thoracic or lumbar pain that can radiate to scapula, chest or buttock/thigh, respectively; tenderness to palpation over the suspected joint, pain increased by extension or extension and rotation of the spine. Neurologic examination is normal. YES_____ NO_____

2. Imaging studies prior to injection demonstrate abnormality of the joint to be injected or demonstrate instability at the appropriate level on flexion/extension films. The ideal imaging study, if available, would be CT-Nuclear SPECT, or if not available, Nuclear SPECT, injecting only levels that are "hot" on the imaging study. YES_____ NO_____

3. Facet injections will only be paid for by Workman's Compensation if appropriate follow-up is provided. This will be in the form of a written VAS kept by, and signed by the patient. Local anesthetic and steroid of choice can be used. The VAS includes pre-injection pain level and post-injection pain level immediately after the injection and at each hour for 24 hours (while awake) as well as VAS at 48 and 72 hours. A diagram of pre-injection and post-injection pain location immediately after and one hour after the injection is included. YES_____ NO_____

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