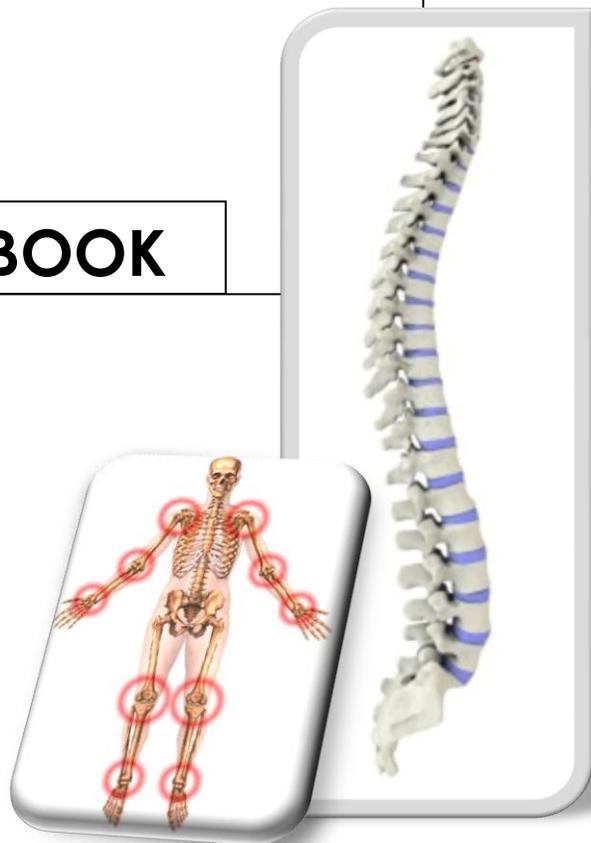


## PROCEDURE HANDBOOK



**Joseph D. Fortin, DO**

- ✦ Physical Medicine
- ✦ Sports Medicine
- ✦ Interventional Pain Management
- ✦ Spinal Diagnostics
- ✦ Electrodiagnostics
- ✦ Rehabilitation



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## **PURPOSE**

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This hand book serves to prepare you for your procedure and also provide instructions for you to follow after the procedure.

Dr. Joseph D. Fortin and staff at STAR are dedicated to technical excellence in the performance of these procedures and the ongoing national and international level research which substantiates them. We are equally committed to top quality patient education and care. It is important to us that you understand (in your own terms) the role these procedures play in your health care. So please take the time to carefully read this and do not hesitate to contact us for further instructions, questions, or concerns.

The equipment and technology used at STAR is state-of-the-art. Our team of engineers ensures it is regularly serviced and operating properly.

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## **WHERE WILL MY PROCEDURE BE PERFORMED?**

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All procedures are conveniently performed at Spine Technology and Rehabilitation in Fort Wayne, Indiana. On the day of your procedure, please report to the main STAR clinic.

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## **CANCELLATIONS**

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We consider your appointment to be an important commitment to you and ask that you assist us by providing notification at least 24 hours in advance of any appointment cancellations or rescheduling. Though we understand that, at times, cancelling an appointment is unavoidable, a charge may be generated for missed appointments. These fees must be settled before your next visit. You are expected to play an important role in your treatment by meeting scheduled appointments. Consistent appointment cancellations and “no shows” will not be tolerated.

### **NO-SHOW AND SAME-DAY CANCELLATION FEES:**

Office Visit \$25

Electrodiagnostics \$200

Procedures \$200

DEXA Bone Density Test \$50

Ultrasound \$100

Trigger Point Injection \$50

Spine Technology and Rehabilitation may terminate the patient-provider relationship for frequent missed appointments and last-minute cancellations.

**By providing us with ample notice, we will be able to accommodate another patient's needs.**

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# INSURANCE AND PAYMENT POLICIES

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The best way to avoid problems with your account is good communication. As insurance plans and benefits change, medical bills may not get processed in a timely manner. We urge you to communicate with us if you do not understand a medical bill or a request from your insurance company.

You need to contact your insurance carrier to verify if this facility is covered under their plan –contact Corona Healthcare, our billing services provider, at (214) 383-0807 to verify we are a participating provider with your insurance plan.

Patients utilizing their health insurance must present their insurance cards at each visit. We will file your claims with your insurance carrier. Failure to provide requested information to your insurance carrier will result in any outstanding balance becoming your responsibility.

After sixty (60) days, payment of the outstanding balance may become your responsibility if the payment is being withheld due to additional information required from the policy holder or delayed response from your carrier. If, after you have paid your balance, your insurance company follows through with payment, we will credit your account.

STAR suggests you monitor your personal account with us very closely and follow the balance as it ages, at which time you should contact your insurance company and request a “claim status report”.

Patients with no insurance coverage are required to pay in full for services as they are rendered. Insurance co-pays are required at the time of the visit for all insured patients with co-payment and deductible obligations. To enable you to take care of your financial obligations for your care, **STAR accepts payments via cash, check, MasterCard, Visa, Discover and American Express, and ACH payment** (direct withdrawal from your checking or savings account).

It is your responsibility to provide STAR with accurate insurance information. Liability action against another party, such as an auto-related injury, does not involve STAR; therefore, delayed payments are not accepted. Payment is not based on positive outcome of legal action.

If your injury is a result of a work-related injury, you are required to provide us with the name of your employer and proof of coverage through your worker’s compensation insurance company prior to your visit. Any worker’s compensation balance not officially determined worker’s compensation is the responsibility of the patient. If you are unable to pay the balance in full, a 90-day payment plan can be arranged. Please contact Corona Healthcare for more information at (214) 383-0807.

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## **PRECERTIFICATION POLICY**

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If a referral from your primary care physician is required for your office visit and subsequent follow-up, **you must obtain this prior to your visit.** If you are not sure if a referral is required, please contact your insurance carrier or human resources representative. We recommend you also confirm coverage of services at STAR. Being familiar with the specifics of your coverage and coverage limitations will help you insure that you are not left responsible for out-of-pocket expense obligations you are unable to meet.

STAR obtains prior authorization for all services prior to your visit.

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## **MEDICAL RECORDS**

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We will gladly retrieve and copy your medical record chart upon written authorization. There is charge of \$20.00 plus postage for the first ten (10) pages, \$0.50 per page for pages 11-50 and \$0.25 per page for pages 51+ for medical records. Payment is required in advance. If the records request is a rush order, an additional \$10 will be charged. Please allow up to 30 days to complete medical record retrieval and completion of forms.

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# PROCEDURES UNDER SEDATION

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## WHAT TO BRING WITH YOU

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- ✦ **A Driver.** You **must** have someone with you to drive you home after the procedure. Some injections may cause your arm or leg to be weak for a few hours. Sedative medications given prior to procedures prevent you from being able to drive safely (or operate any machinery) following your injection.
- ✦ All insurance cards (the staff will need to make copies of these when you arrive).
- ✦ Any current x-rays, MRIs, or CT scans of the area we will be treating. If you have had any of this imaging related to your procedure area, you are responsible to obtain these films and bring them with you to your appointment. The physician must have these films to complete the procedure.

FAILURE TO PROVIDE ANY OF THE ABOVE MAY RESULT IN RESCHEDULING YOUR PROCEDURE.

## GENERAL INFORMATION

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You **MUST** be healthy on the day of your procedure.

- ✦ NO INFECTIONS, INCLUDING DENTAL
- ✦ NO FEVER
- ✦ NO SORE THROAT

### **Antibiotics:**

If you have been on antibiotics recently, you need to have **finished** taking the antibiotics at least one (1) week before your injection. The doctor who prescribed the antibiotics should verify that the infection is gone prior to the injection procedure. If you have any reason for taking antibiotics prior to procedures performed at STAR, notify our office for instructions.

### **Allergies:**

Please inform our office if you are allergic to contrast dyes, local anesthetics (such as Novocain), steroid (such as Cortisone or Prednisone), seafood or shellfish, latex, iodine or any medications.

### **Food/Drink:**

No food or drink three hours prior to the procedure. No smoking three hours prior to the procedure. No alcoholic beverages are to be consumed eight hours before the procedure.

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**Medications:**

Please take all of your routine medications unless otherwise instructed.

Call our office for specific instructions if:

- ✦ you are on insulin.
- ✦ you are on blood thinners (such as Coumadin, Plavix, or Ticlid). All blood thinners, including Aspirin and Ibuprofen, need to be held for five to seven days before your procedure.
- ✦ you are on chronic steroids.
- ✦ you have had a mitral valve replacement, stent implant, or joint replacement in the last year.

**PROCEDURE CARE**

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Upon arrival, a staff member will escort you to a room where you will dress into a procedure gown. The clinical staff is there to ensure you are as comfortable as possible before and after the procedure. You will be asked to complete a pain diagram with a pain scale, and the medical staff will be in to explain the procedure to you. (Instructions for this will be given again at the time of your check-in.) Clinical staff will take your vital signs, answer any questions you may have and provide other necessary monitoring before, during, and after the procedure. At this time an IV will be started if you will be receiving sedation medications.

When it is time for your procedure a clinical staff member will escort you from the holding room to the procedure suite. A radiology technologist will be there to assist the nurse in your care and to assist the doctor in operating the imaging equipment.

The clinical staff will then explain what will take place in the procedure room and answer any other questions you may have. While lying down on the x-ray table in the procedure suite, you may be given IV medication. This is a sedative medication that will keep you feeling relaxed and drowsy.

The area to be injected will be thoroughly cleaned and then a sterile drape will be applied. Using the x-ray machine (fluoroscopy), the doctor will guide a very thin needle to the appropriate area. The x-ray machine allows the doctor to see exactly where the needle is going at all times. He will then instill a combination of solutions which may include a dye (to verify correct needle placement), an anesthetic (to decrease pain), and steroids (to decrease inflammation).

In addition to the x-ray placement, the special x-ray dyes allow the doctor to visualize leaks, bulges, or tears in the structure injected (whether it is the disc, facet, or sacroiliac joint). The number of structures studied depends on the character and distribution of your symptoms and the findings on your x-rays, MRIs and CT scans. After some procedures (such as discography and sacroiliac joint arthropathy), patients are sent to a nearby imaging facility to have a CT scan customized to the region of interest. These studies give the doctor a detailed look at the internal architecture of spinal structures which are outlined by the special dye. This precision localization or "inside look" at your anatomy enables the physician to further diagnose your problem.

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## **AFTER THE PROCEDURE**

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You may have some body weakness (which will depend on the site of the injection; generally arm weakness can be associated with neck injections and leg weakness with the back injections) for the next three to four (3-4) hours following the procedure. You can expect soreness of the injection site for two to four (2-4) days following the procedure. Your pain may go away immediately or it may take several days. This is because of the different medications used. The first medication (a local anesthetic) will only last from one to six (1-6) hours. Other medications that may be used (a combined short and long acting steroid) may not start working for two to five (2-5) days after the injection(s).

**If your neck or back feels worse after the procedure, you should:**

1. Rest the area for the next several days.
  2. Apply ice to the area that hurts, on for 20 minutes, then off for 30 minutes. Place a towel between the ice and your skin to prevent damage to the skin or underlying nerves. A bag of frozen vegetables works great for this.
  3. Take your usual pain medication. Ask the nurse or doctor for further information regarding your pain medication.
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**PLEASE REVIEW THE FOLLOWING FOR INSTRUCTIONS SPECIFIC TO THE PROCEDURE YOU ARE SCHEDULED FOR.**

## **DISCOGRAPHY**

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Discography is a diagnostic test to determine if one or more of the discs in your neck or back are the cause of the pain you have been experiencing. This is done by inserting a needle into the suspected disc or discs and injecting contrast material to “re-create your pain”.

### **After Discography:**

You can expect soreness where the needles were inserted.

#### **CERVICAL**

- ✦ Soreness and some swelling in front of the neck.
- ✦ Discomfort with swallowing.
- ✦ Probable increase in the stiffness of your neck.
- ✦ Tenderness in the front of the chest on the right side.
- ✦ A possible, temporary loss or weakness of your voice.

#### **THORACIC**

- ✦ A sore upper back where the needles were inserted.
- ✦ A probable increase in the stiffness of your neck.
- ✦ Discomfort with prolonged standing, sitting, and especially bending.
- ✦ A possible temporary increase in your general symptoms.

#### **LUMBAR**

- ✦ A probable increase in the stiffness of your back and leg.
- ✦ Discomfort with prolonged standing, sitting, and especially bending.
- ✦ A possible temporary increase in your general symptoms.

## **FACET BLOCK**

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The purpose of a facet block is to diagnose the pain generator as well as decrease pain and inflammation arriving from the facet joint in your back.

### **After the Facet Block:**

Expect some soreness and stiffness at the injection site.

## **MEDIAL BRANCH BLOCK**

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A Medial Branch Block is ordered to confirm positive results obtained from a Facet Block. Under fluoroscopy, a fine needle is guided into the medial branches that innervate the facet joint. A long acting anesthetic medication is instilled. If a patient is again relieved of pain after the procedure, it is considered a confirmation that the pain generator has been identified.

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## **PROLOTHERAPY**

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Prolotherapy has the potential of being effective at eliminating chronic pain due to tendon or ligament weakness. Prolotherapy is a technique in which a substance is injected into an affected ligament or tendon where it attaches to a bone. The inflammation caused by the injection stimulates the body to repair the painful area, thus resulting in healing of the affected ligament or tendon. The body deposits new collagen as it is attempting to heal itself. Collagen is what the tendons and ligaments are made of. Having strong ligaments and tendons means you will have less joint pain.

## **SACROILIAC JOINT INJECTION**

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The purpose of a sacroiliac joint injection is to diagnose the pain generator as well as decrease pain and inflammation arising from the sacroiliac joint in the low back and hip area.

### **After a Sacroiliac Joint Injection**

- ✦ You may have some soreness and stiffness at the injection site.
- ✦ It is possible to experience leg weakness on the side where the procedure was completed for up to six (6) hours.

## **STELLATE GANGLION BLOCK (CERVICAL SYMPATHETIC NERVE BLOCK)**

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The purpose of a stellate ganglion block is to decrease pain and inflammation arising from the sympathetic nerve chain of the cervical spine.

### **After a Stellate Ganglion Block**

Some patients experience these symptoms (only for a few hours) on the side of the procedure after it is completed: watery/red eyes, dilated pupils, and droopy eyelids.

- ✦ Your face may be droopy on the side of the injection.
- ✦ Some patients also experience temporary hoarseness, weakness, or loss of their voice.
- ✦ Expect some swelling and stiffness at the site of the injection.

## **LUMBAR SYMPATHETIC NERVE BLOCK**

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The purpose of a lumbar sympathetic nerve block is to decrease pain and inflammation arising from the lumbar sympathetic nerve chain of the lumbar spine.

### **After a Lumbar Sympathetic Nerve Block**

- ✦ You can expect soreness at the injection site for the next two to four days.
  - ✦ Some patients experience discomfort in the groin area on the side of the procedure.
  - ✦ You may experience some changes in the SENSATION, COLOR, OR TEMPERATURE of your legs for several hours following this procedure.
  - ✦ It is advisable to limit your activities for the first 24 hours.
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## **SPINAL CORD STIMULATOR**

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The purpose of a spinal cord stimulator (SCS) is to place a lead in the epidural space that surrounds the spinal cord. The lead is then connected to an external power source which creates and delivers small electrical pulses through the lead to the spinal cord. This produces a tingling sensation which covers the pain the patient is experiencing.

### **After Spinal Cord Stimulation**

- ✦ Control stimulation by following STAR's instructions for screener use.
- ✦ Monitor your response to SCS by keeping a trial screening log.
- ✦ Care for surgical site. Call STAR immediately if you experience fever, chills, pain, drainage, or redness of the site of incision.

## **STEREOTACTIC RADIOFREQUENCY LESIONS**

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The purpose of stereotactic radiofrequency lesions is to interrupt the nerve supply to the small joint in the spine. This is done by creating lesions or burning nerves to interrupt the pain signal.

### **After Stereotactic Radiofrequency Lesions**

- ✦ Expect soreness at the injection site for seven to ten (7-10) days.
- ✦ Pain may change in quality or intensity for six to eight (6-8) weeks.

## **SELECTIVE NERVE ROOT BLOCK**

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The purpose of a selective nerve root block is to determine if a nerve in the neck or back is causing pain and to decrease pain and inflammation arising from structures in the neck and back. This is done by injecting a potent anti-inflammatory and numbing medication into the nerve sheath.

### **After a Nerve Root Block**

- ✦ Expect soreness at the injection site for two to four (2-4) days.
- ✦ Pain relief may not come for five to seven (5-7) days when the steroid starts to take effect.

## **EPIDURAL STEROID INJECTION**

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The purpose of an epidural steroid injection is to decrease pain and inflammation arising from structures in the neck or back.

### **After Epidural Steroid Injection**

- ✦ Expect soreness at the injection site for two to four (2-4) days.
- ✦ It is possible that you might have some upper or lower body weakness for three to four (3-4) hours following the injection.



## **MYELOGRAPHY**

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Myelography is a test to study the spine by “coloring” the spinal fluid and then taking x-rays of the spine.

### **After Myelography**

- ✦ Expect soreness at the injection site for two to four (2-4) days.
- ✦ Lie down for the first 24 hours and increase fluid intake; after the first 24 hours, GRADUALLY increase sitting up time.
- ✦ If a headache develops that is worse when sitting up and better when lying down, this may be directly related to the myelogram.
- ✦ Call STAR if fever, neck pain, or nausea/vomiting develop.

## **CELIAC PLEXUS BLOCK**

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Most pain sensations from your abdomen first pass through a bundle of nerves called a plexus. A celiac plexus block involves injecting these nerves with a medicine (local anesthetic) that numbs the area to reduce pain. This type of block has been found to be helpful to reduce the pain caused by the pancreas.

## **VERTEBROPLASTY**

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The purpose of vertebroplasty is to decrease pain arising from a compression fracture in one or more of the vertebrae (bones) of the spine. This is done by using live x-ray to guide a needle into the fractured vertebra through a small incision in the skin. Acrylic bone cement is injected into the vertebrae to stabilize it by filling the fracture regions within the bone.

### **After the Vertebroplasty**

You may have some soreness and bruising at the injection site. In most cases pain caused by vertebral compression fractures will be gone or diminished within 48 hours.

## **PLATELET RICH PLASMA THERAPY (PRP)**

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The process involves a simple blood draw, placing the blood in a custom processing container, and centrifuging it under specific conditions. The plasma of the blood containing the stem cells is then carefully extracted. The PRP is delivered to the exact coordinates of your damaged tissue utilizing ultrasound or fluoroscopic control and the skilled technique of our physician expert.

### **After the PRP:**

The post procedure recovery usually involves mild to minimal soreness for several days. We ask the patients to allow roughly 8 weeks to enjoy notable differences and a dramatic alleviation of pain and restoration of function.

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# PROCEDURES WITHOUT SEDATION

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PLEASE REVIEW THE FOLLOWING FOR INSTRUCTIONS SPECIFIC TO THE PROCEDURE YOU ARE SCHEDULED FOR.

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## MUSCULOSKELETAL ULTRASOUND GUIDED INJECTIONS

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An ultrasound machine is used to look at soft tissue structures and joints, including muscles, ligaments, tendons, and bursae for any abnormalities. Depending on the findings, a needle may be guided under ultrasound to inject a potential anti-inflammatory, as well as numbing medication into the joint space, bursae, tendon sheath, or nerve.

### **After Ultrasound Guided Injections**

Patients are expected to go to physical therapy following these injections. Here they will learn a very specific home exercise program pertaining to the particular body part or joint that was injected. Therapy is what will provide the long term pain relief, if done faithfully, by retraining certain structures to work properly.

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## DEXA Bone Scan

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Dual Energy X-Ray Absorptiometry (DEXA) is the preferred technique for measuring bone mineral density (BMD). We perform DEXA scans to diagnose osteopenia and osteoporosis. Scanning generally takes 20 minutes to complete; it is painless and noninvasive. DEXA is relatively easy to perform and the amount of radiation exposure is low. The patient is not to wear any jewelry or metal.

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## ELECTRODIAGNOSTICS (EMG)

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**What are Electrodiagnostic Studies?** Electrodiagnostic studies can be helpful in the evaluation of a patient with weakness, numbness, pain and symptoms such as fatigue and abnormal sensations.

The two main procedures used to study nerves and muscles are the needle electromyographic (EMG) examination and nerve conduction studies (NCS).

**EMG** – During the EMG, your physician will evaluate the electric activity in your muscle by inserting a fine needle electrode into selected muscles. The needle insertion may cause temporary mild discomfort. The physician can determine whether the muscle is working normally by seeing the electrical activity on the computer screen and by listening to the various sounds. A new sterile needle is used for each patient to prevent the transmission of any infection.

**Nerve Conduction Studies** – Your physician will tape small metal electrodes on your skin and apply a brief electric stimulus to one portion of a nerve. This will cause a tingling sensation. Your physician can evaluate the electrical response of the muscle.

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**Special Preparations** – You do not need to do anything to prepare for this test, except on the day of the test keep your skin free of lotions and emollients. Inform your physician if you are taking a blood thinner, or have hemophilia or a cardiac pacemaker.

**Results** – your physician has been specially trained to perform and interpret the results of the electrodiagnostic studies. A report will be sent to your referring physician.

**Please Remember** – You may be sedated for this exam and therefore it is not an appropriate time to discuss your results. It takes extended time to do this exam, therefore your test results and all other clinical questions will need to be addressed at your follow-up office visit.







**Spine Technology and Rehabilitation**

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**OFFICE HOURS:**

**Monday, Tuesday, Thursday and Friday**

**8:00am to 5:00pm**

**Wednesday**

**10:00am to 5:00pm**

**Closed weekends and holidays**