

**OPERATIVE REPORT****PATIENT NAME:** [REDACTED]**CHART #:** [REDACTED]**DATE OF SURGERY:** 12/21/2012**PREOP DIAGNOSES:**

1. Right facet disease, chronic and recurrent.
2. Right facet disk arthropathy, chronic and recurrent.

POSTOP DIAGNOSIS:

1. Right facet disease, chronic and recurrent.
2. Right facet disk arthropathy, chronic and recurrent.

PROCEDURE PERFORMED:

1. Right facet intraarticular injection of human allograft membrane under fluoroscopic beam guidance and conscious sedation, L3-4, L4-5, and L5-S1.
2. Right medial branch block under fluoroscopic beam guidance and conscious sedation, L3-4, L4-5 and L5-S1.
3. Right capsular injection of facet joint, L3-4, L4-5 and L5-S1.

SURGEON: [REDACTED]**ANESTHESIA:** Per anesthesia group.**CONSENT:** The risks have been discussed. Discussed summary of clinical findings. The patient agreed to proceed.**ANTIBIOTICS:** None given.**COMPLICATIONS:** Negative.**PROCEDURE:** After risks and benefits were discussed, the patient agreed to proceed. Consent was signed. IV was started in the dorsum of the right hand under aseptic technique, alcohol prep. RL at TKO. The patient was taken to the fluoroscopic room and placed in prone position, pressure points padded, monitors placed, EKG x 3, blood pressure to left upper extremity, pulse oximetry to left upper extremity. The back was prepped 5 times with alcohol prep, 5 times with Hibiclens prep. Under strict aseptic technique with the patient in the prone position, sterile drapes, sterile technique, AP identified the right L4-5 vertebral body with oblique tilt to the right 15 degrees to obtain Scotty dog image.

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First lidocaine subcu, then under DDD, depth-direction-depth identified. A Quincke 22-gauge needle was placed intraarticular at the L3-4, L4-5 and L5-S1 anterior facet joints. Aspiration for heme negative, CSF negative. At this point, I injected 1 mL intra-articular human allograft membrane at L3-4, L4-5 and L5-S1. The needle was taken out and injected into the capsule. At this point, injected Depo-Medrol 80 mg mix of bupivacaine 0.25%, 1 mL in the site. At this time, maintaining the same oblique angle to the right, the needle was taken out of the capsule, leaned laterally at both sides, verified by Scotty dog at L3-4, L4-5 and L5-S1. I injected 0.5 mL of Isovue, no vascular runoff was noted. At this point, I injected bupivacaine 0.25% x 1 mL at each site, blocking the medial branch nerves.

The patient self-rolled to the transfer bed with Aldrete score of 10/10, Bromage score 0/3, and Ramsey 2/6. The patient tolerated the procedure well.

MDIT DigitalSig



D: 12/25/12

T: 12/27/12