

PREOPERATIVE DIAGNOSIS: , Low back pain.,POSTOPERATIVE DIAGNOSIS: , Low back pain.,PROCEDURE: , Lumbar epidural steroid injection, L5-S1.,ANESTHESIA: , Local.,SPECIAL EQUIPMENT: , Fluoroscopic unit.,DETAILS OF PROCEDURE: , The patient was taken to the Radiology Suite and was placed in the prone position where the entire back region was scrubbed, prepped, and draped in a sterile fashion with Betadine solution. The lumbar area was then draped with sterile towels and sterile drapes. The surgeon was gloved with sterile gloves and mask in order to create a sterile environment for the epidural injection. The fluoroscopy x-ray unit was then brought into the sterile field for a PA x-ray visualization of the spine. A Steinmann pin was then placed across the spine to localize the level of the planned injection. Local infiltration using 0.5% preservative-free Xylocaine via a 25-gauge needle was then placed into the dermis and subcutaneous tissue. A Tuohy needle was then oriented perpendicular to the skin and was then advanced through the dermis and subcutaneous tissues. Continuous injection of 0.5% preservative-free Xylocaine was used during the advancement of the Tuohy needle into the deeper spinous tissues. A solution of 80 mg of Depo-Medrol with 2 cc of 1% Xylocaine injectable and 5 cc of normal saline were then injected into the epidural space.