

[redacted]
[redacted]
Phone [redacted]

Fax [redacted]

OPERATIVE REPORT**PATIENT NAME:** [redacted]**CHART #:** [redacted]**DATE OF SURGERY:** 11/30/2012**PREOP DIAGNOSES:**

1. Right facet thoracic spine disease.
2. Right facet spondylosis, chronic and recurrent.

POSTOP DIAGNOSES:

1. Right facet thoracic spine disease.
2. Right facet spondylosis, chronic and recurrent.

PROCEDURE PERFORMED:

1. Right facet diagnostic and therapeutic injection T7-T8, T8-T9, T9-T10 under fluoroscopic beam guidance and conscious sedation right side.
2. Right medial branch block under fluoroscopic beam guidance and conscious sedation T7-T8, T8-T9 and T9-T10 medial branch block under fluoroscopic beam guidance and conscious sedation, right side.

SURGEON: [redacted]**ANESTHESIA:**

Per anesthesia group.

CONSENT:

The risks have been discussed. Discussed summary of MRI and clinical findings. The patient agreed to proceed.

ANTIBIOTICS:

None indicated.

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 right upper extremity, pulse oximetry to left upper extremity. The back was prepped 5 times with alcohol prep, 5 times with Hibiclens prep.

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Under strict aseptic technique, AP identified T7-T8 through T9-T10 vertebral bodies, oblique tilt to the right 10 degrees, caudad approximately 10 degrees. Under DDD, depth-direction-depth identified a Quincke 22-gauge needle was placed on one attempt to the T7-T8, T8-T9, T9-T10 intraarticular facet joint. Aspiration for heme, CSF and paresthesias negative. This was placed intraarticular. At this point, human allograft membrane was reconstituted and injected intraarticular to T7-T8, T8-T9- and T9-T10. After this was done, the needles were taken just out of the capsule. At this point I injected Depo-Medrol 80 mg mixed with bupivacaine 0.25% x 3 mL, 1 mL injected to T7-T8, T8-T9 and T9-T10.

Maintaining the same oblique tilt angle to the right, the needle was taken out of the facet joint and leaned laterally, placed just above the foraminal orifice at T7-T8, T8-T9 and T9-T10. I injected 0.5 mL of Isovue, no vascular runoff noted. At this point, I injected bupivacaine 0.25% x1 mL injected at each site. After this was done, all needles were extracted. The patient self rolled to the transfer Aldrete 10/10, Bromage 0/3, Ramsay 2/6. The patient tolerated the procedure well.

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