

AUBURN DIAGNOSTIC  
IMAGING SERVICES

Merritt Building

# Musculoskeletal / Spinal Injections for Pain Management

Please call 253.395.1955, or 800.531.9165 toll free, to schedule a patient for an exam and fax this form to 253.395.1950. Please have the patient bring relevant films from previous exams (CT, MRI, etc.) to the appointment.

**PATIENT INFORMATION :**

(Please print)

Patient Name: \_\_\_\_\_ Clinical Information: \_\_\_\_\_

Referring MD: \_\_\_\_\_

**SELECTIVE NERVE BLOCKS :**

<input type="radio"/> <b>Cervical</b>	<u>Left:</u>	<u>Right:</u>	<input type="radio"/> <b>Lumbar</b>	<u>Left:</u>	<u>Right:</u>	<input type="radio"/> <b>THORACIC:</b> (specify level and side) _____ _____
<input type="radio"/> C3 nerve (C2-3 foramen)	___	___	<input type="radio"/> L1 nerve (L1-2 foramen)	___	___	
<input type="radio"/> C4 nerve (C3-4 foramen)	___	___	<input type="radio"/> L2 nerve (L2-3 foramen)	___	___	
<input type="radio"/> C5 nerve (C4-5 foramen)	___	___	<input type="radio"/> L3 nerve (L3-4 foramen)	___	___	
<input type="radio"/> C6 nerve (C5-6 foramen)	___	___	<input type="radio"/> L4 nerve (L4-5 foramen)	___	___	
<input type="radio"/> C7 nerve (C6-7 foramen)	___	___	<input type="radio"/> L5 nerve (L5-S1 foramen)	___	___	
<input type="radio"/> C8 nerve (C7-T1 foramen)	___	___	<input type="radio"/> S1 nerve (S1 foramen)	___	___	

**FACET :**

**Injection (steroid/anesthetic):**

<input type="radio"/> <b>Cervical</b>	<u>Left:</u>	<u>Right:</u>	<input type="radio"/> <b>Lumbar</b>	<u>Left:</u>	<u>Right:</u>	<input type="radio"/> <b>THORACIC:</b> (specify level and side) _____ _____
<input type="radio"/> C2-3	___	___	<input type="radio"/> L1-2	___	___	
<input type="radio"/> C3-4	___	___	<input type="radio"/> L2-3	___	___	
<input type="radio"/> C4-5	___	___	<input type="radio"/> L3-4	___	___	
<input type="radio"/> C5-6	___	___	<input type="radio"/> L4-5	___	___	
<input type="radio"/> C6-7	___	___	<input type="radio"/> L5-S1	___	___	
<input type="radio"/> C7-T1	___	___				

**LUMBAR EPIDURAL STEROID INJECTIONS :**

(Specify level and side) \_\_\_\_\_

**JOINT & SOFT TISSUE INJECTIONS/ASPIRATIONS :**

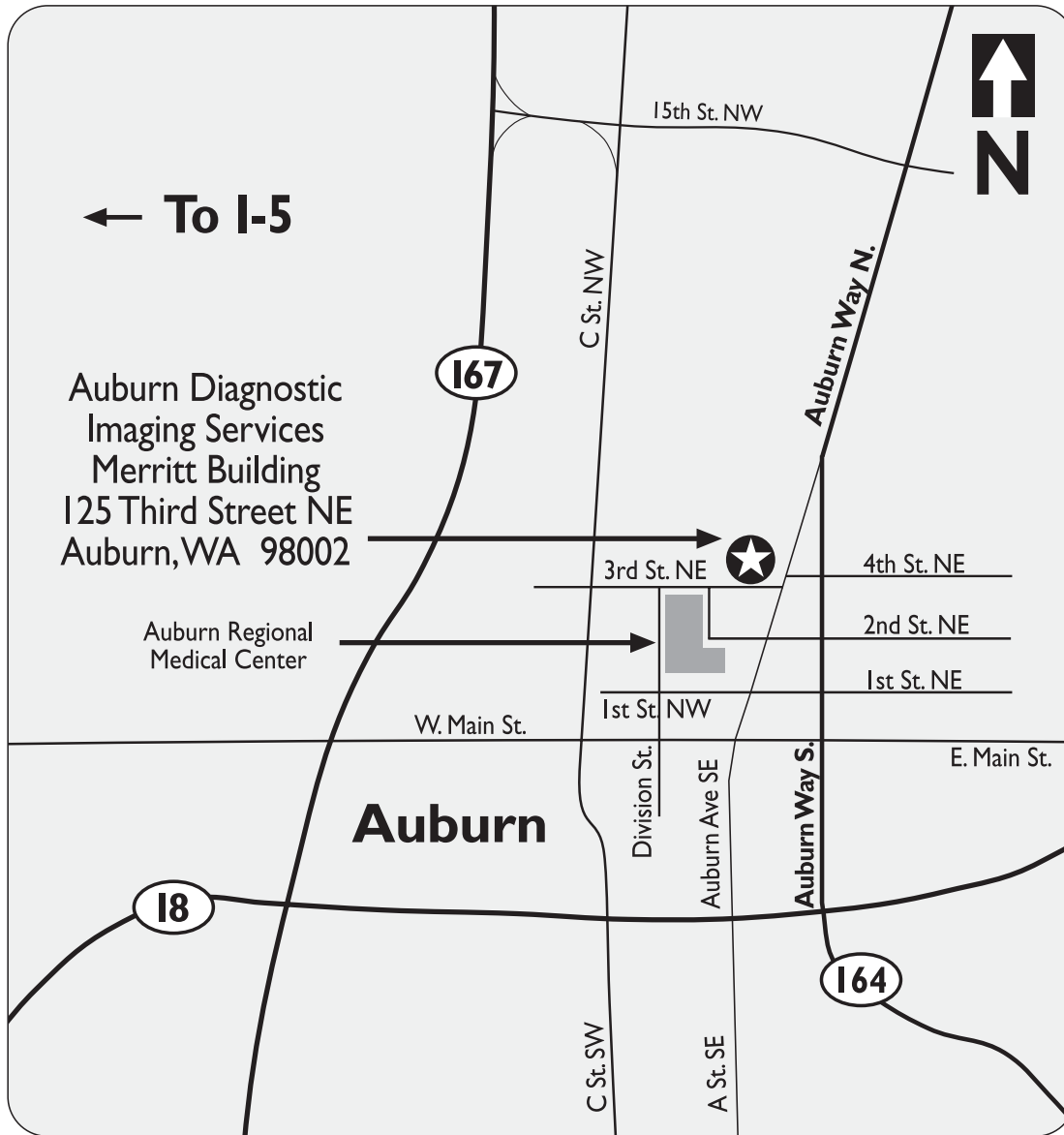
<input type="radio"/> <b>Joints</b>	<input type="radio"/> <b>Soft Tissue</b>	<input type="radio"/> <b>Laboratory</b>
<input type="radio"/> S1 Joint _____	<input type="radio"/> Bursa _____	<input type="radio"/> Gram Stain _____
<input type="radio"/> Other Joint (specify) _____	<input type="radio"/> Aspiration (specify) _____	<input type="radio"/> C + S _____
<input type="radio"/> Joint Aspiration (specify) _____	<input type="radio"/> Other (specify) _____	<input type="radio"/> Crystals _____
		<input type="radio"/> Other _____

**OTHER :**

(Please specify) \_\_\_\_\_

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## Merritt Building



### Patient Preparation Allow 1 hour

No preparation necessary.

### Driving directions to the Merritt Building:

#### *From the North (Seattle):*

Take Highway 167 S. to the 15th Street N.W. exit. Turn Left onto 15th Street N.W. Turn Right onto Auburn Way N. Stay straight to go onto Auburn Avenue S.E. Turn Right onto 3rd Street N.E. Stop at Merritt Building, 125 3rd St. N.E.

#### *From the South (Tacoma/Olympia)*

Take Highway 167 N. to Highway 18 going East. Take the "C" Street S.W. exit. Turn Left onto "C" Street S.W. Turn Right onto 3rd Street N.W. Stop at Merritt Building, 125 3rd Street N.E.