**DISCOGRAM**

Patient name

DOB

Preoperative Diagnoses: --- ---- Radiculopathy and nerve damage, Failed back

Postoperative Diagnoses:

Surgeon: Amit Bhandarkar, M.D.

Assistant: None

Complications: None

Specimen: None

Blood Loss: -Scant

Surgeon: Amit Bhandarkar, M.D.

Date: 9 March 2016

PROCEDURES:

1. [Left] [L 4-5] Transforaminal lumbar epidural steroid injection.

2. Epidurography with radiographic interpretation left L4-5

Preoperative area:

All the risk of injections were discussed with the patient in the preop area risks including but not limited to stroke, paralysis, infection, hematoma formation spinal fluid leak was discussed. The temporary nature of the pain relief was also explained. Patient completely understood and consented for the procedure understanding the risks and benefits.

Procedure 1: Provocative discogram L3-4

Procedure 2: Provocative discogram L4-5

Procedure 3: Provocative discogram L5- S1

Procedure 4: Radiographic interpretation of L3-4 discogram

Procedure 5: Radiographic interpretation of L4-5 discogram

Procedure 6: Radiographic interpretation of L5- S1 discogram

The Patient was taken to the operative suite and placed prone on the operating room table and was prepped and draped sterilely. After anesthesia induction, site mark verification and time out, we brought the C-arm in to localize our injection sites. We placed wheals of local anesthetic into the skin and then I proceed to place spinal needles into the L3-4 and L4- 5 discs. Dfd

The needles were removed the sites were cleaned and dressed with band aids. The patient was able to go to the recovery in stable condition having tolerated the procedure without significant difficulty.

Discography Report:

L3-4 discogram was negative. Patient with moderately degenerative disc appearance with injection of contrast material. Patient with no pain at low or high pressures noted over opening pressure.

L4-5 discogram negative. Patient with No pain at low or high pressure over opening pressure. Patient with moderately degenerative- appearing disc morphology upon injection of the contrast material.

L5- ! discogram negative. Patient with a significantly degenerative disc appearance upon injection of contrast material with full thickness annular tears. Patient with significant disc collapse. Again no pain with pressurization, low or high over opening pressure