### Morrison

Steerable Needle®

### **Procedural Information**

Date of procedure: September 2015
Location: Philadelphia, PA, USA
Hospital: Thomas Jefferson
University Hospital

Physician: William B. Morrison, MD

Clinical Case Review 5

# L5 transforaminal epidural injection

### **Case Description**

### **Case history**

Obese 49 year old patient with degenerative disc and facet disease, radicular pain in L5 distribution.

#### **Procedural details**

L5-S1 neural foramen targeted. Because of narrow window and long distance to the target, Morrison Steerable Needle® was used. The needle was placed using standard oblique approach, avoiding the iliac crest. A slight adjustment superiorly was made initially by curving the needle upward near the foramen. As the foramen was approached the needle was straightened out and advanced to the optimal location.

#### **Results and comments**

Transforaminal epidural injection via L5-S1 can be challenging due to the narrow window of access. This can be made even more difficult if the patient is large, requiring a longer needle and more accurate initial placement. Even with perfect initial planning, trajectory can be altered over a distance by fascia and the iliac crest. In this case Morrison Steerable Needle® allowed for a minor adjustment near the target, allowing optimal positioning without need for withdrawl and readjustment.

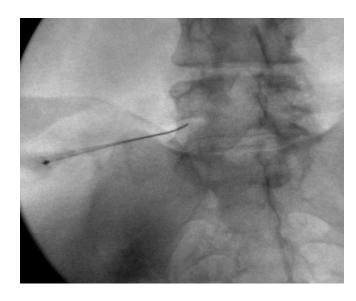


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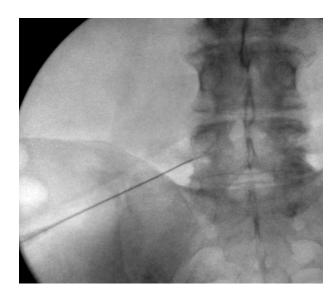
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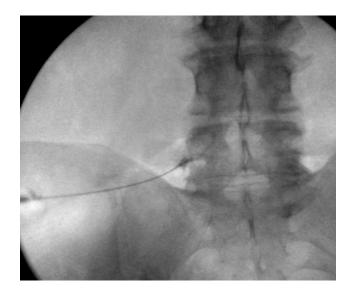
## L5 transforaminal epidural injection



Morrison Steerable Needle® is slightly adjusted near the foramen



Morrison Steerable Needle® is straightened up and advanced to target.



Injection of contrast, opacifying the L5 nerve root.



