

# Injections

## A Shot in Your Claim

### PRESENTER

Holly Garrett RN, MSN, CCM  
Nurse Case Manager, Choices Case Management



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# Today's Presenter



## Holly Garrett, RN, MSN, CCM

Nurse Case Manager

Choice Case Management

- Over 20 years in field, telephonic and catastrophic case management for Workers' Compensation claims
- Extensive experience as an educator, trainer and mentor to nurses, case managers and clinicians

# Injections

## A Shot in Your Claim

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# Learning Objectives

- Symptoms and signs it's time to consider an injection
- The primary types of injections used in workers' comp injuries
- How to best maximize positive outcomes
- The importance of post-injection treatment and follow-up

# What is an injection?

The act of administering a liquid, especially a drug, into a person's body using a needle and a syringe.



# Why an injection?

- Medication is placed directly into the intended body tissue
- More of the drug is available
- The body receives more benefit of the medicine
- Only an injection can administer medication to the spinal nerves

# Purpose of injections in Workers' Compensation

## Diagnostic

**Assists in providing definitive diagnosis**

- Contrast material improves imaging
- Replicates symptoms/ discomfort to help identify the cause of pain

## Therapeutic

**Provides pain relief; assists in recovery**

- Decreases inflammation
- Reduces friction
- Relaxes muscles
- Encourages healing



# Purpose of injections in Workers' Compensation

## Diagnostic

Joint imaging exam –  
MRI/ MRA, CT  
Discogram/ Discography  
Selective nerve blocks  
Medial branch blocks

## Therapeutic

Joint injection – steroid or  
viscosupplementation  
Trigger point  
Facet joint  
Epidural steroid  
PRP – Platelet Rich Plasma

## Diagnostic injections are used along with CT, MRI, or Fluoroscopy to:

- Introduce contrast agents into affected joints, helping to outline structures such as:
  - Joint capsules
  - Ligaments
    - Can assess the degree of tears
  - Cartilage

**Diagnostic injections** are used to replicate pain symptoms to locate the pain source.

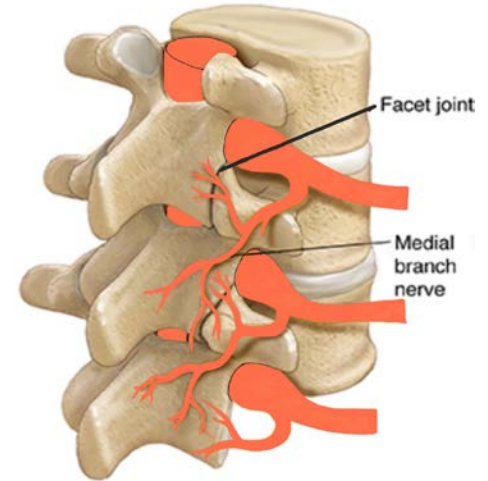
**Discogram/ Discography** – to identify which level of disc protrusion is the pain generator

- Slight sedation
- Fluoroscopic guidance
- Dye is injected into select discs
- Patient describes symptoms
- Definitive treatment is spinal surgery

**Diagnostic injections** are used to locate the pain source.

## Medial Branch Blocks

- Fluoroscopic guidance
- Anesthetic/steroid is injected into targeted area
- Pain relief is assessed
- Definitive treatment is spinal nerve ablation



**Types of pain which  
can be treated by a  
therapeutic injection**

**Acute  
Chronic  
Inflammation  
Degenerative  
Nerve  
Muscle**

# Medication commonly used in therapeutic injections

1

## Anesthetic

- Provides temporary loss of sensation (numbing)

2

## Anti-inflammatory

- Reduces inflammation/swelling

3

## Corticosteroid

- Reduces inflammation/swelling

4

## Viscosupplementation

- Lubricates, relieves pain, reduces friction

# Common Anesthetics used in injections

Mepivacaine  
Bupivacaine / Marcaine  
Lidocaine / Xylocaine

# Common Corticosteroids used in injections

Methylprednisolone  
Hydrocortisone  
Triamcinolone  
Betamethasone  
Dexamethasone



# Most therapeutic injections have a combination of an Anesthetic and a Steroid

**Anesthetic**  
provides *short term*  
pain relief

**Steroid**  
provides *long term*  
pain relief

# Common locations of therapeutic injections

Any joint

Muscles of the back

Vertebrae of  
the spine

# Therapeutic Injection

## Joint

### Corticosteroid and Anesthetic

- Minimally invasive treatment – decreases pain & inflammation
- Injection done in the medical office
- Common sites
  - Knee
  - Shoulder
  - Elbow
  - Hip
  - Wrist



# Therapeutic Injection

## Knee Joint

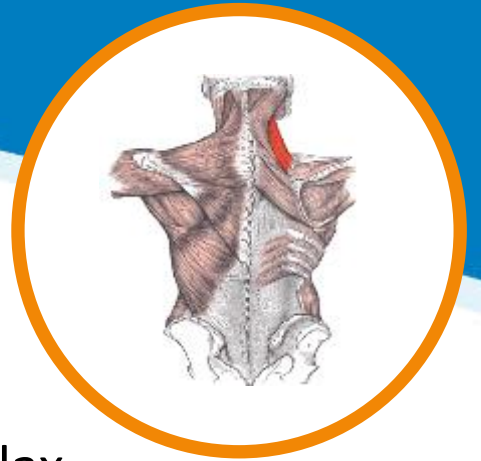
- Viscosupplementation
  - Synvisc
  - Orthovisc
  - Euflexxa
  - Monovisc
  - Hyalgan
- May provide temporary or long-term relief of symptoms
- Is helpful when other forms of treatment are not beneficial
- Can be useful when knee replacement surgery is not appropriate



# Therapeutic Injection

## Trigger Point

- Used to treat painful areas of muscle
  - Trigger points or knots of muscle which do not relax
  - Trigger points may irritate the nerves around them and cause referred pain.
- Typically a mixture of anesthetic & corticosteroid is used
- Most frequent location is the back
- Multiple injections given at one time in the medical office



# Therapeutic Injection

## Facet Joint

- Primarily useful for arthritic changes in the facet joints
- Injection is targeted at the facet joint of the vertebrae
- Fluoroscopy is used to guide the needle to the accurate treatment region
- Typically a mixture of anesthetic and corticosteroid



# Therapeutic Injection

## Epidural Steroid Injection

- Given to relieve radiculopathy – radiating pain
- Lumbar spine is most common, but also done in thoracic & cervical
- Must be done under sterile conditions with guided fluoroscopy – surgical center
- Typically the needle is inserted between the vertebrae and the medication is inserted in the epidural space which is the outer layer surrounding the spinal cord



# Therapeutic Injection

## Epidural Steroid Injection

- Injections must be given 1 month apart – can give up to 3/year
- May increase pain and inflammation for 3-7 days
- Should only be done by Pain Management MD or Anesthesiologist
- Not FDA approved





# Therapeutic Injection

## PRP / Platelet-Rich Plasma

- Blood is drawn from the patient and plasma is extracted
- At the next appointment, the PRP is injected into the site of injury
- Platelets break down and release growth factors which triggers the body's healing process

# When should injections be considered?

After all conservative treatment is completed and pain has not decreased significantly

When pain is slowing progress in therapy

As an alternative to surgery or long-term oral pain medication

# The most important role of injections is to:

decrease pain  
*which should  
lead to*  
increased  
mobility

So...

injections  
must be  
provided along  
with therapy or  
home exercises



# How do injections impact the claim?

## Risks & Benefits

**Risk** - Injection is an added cost.

- Trigger point - \$268
- Epidural - \$1,129

**Benefit** – Pain relief may lead to a RTW.

# How do injections impact the claim?

## Risks & Benefits

**Risk** – There are many side-effects to the medications given and the injections.

- Infection
- Bleeding
- Allergic reaction
- Increased blood sugar/ Diabetes
- Spinal cord damage/ paralysis

**Benefit** – Injection may provide long term pain relief.

# How do injections impact the claim?

## Risks & Benefits

**Risk** - If the first injection isn't satisfactory, the claim may be delayed while additional treatment and additional injections are requested.

**Benefit** – Injection may provide pain relief and help bring the claim to a close.

# What can I do to ensure the best outcome for my claim?

Consider adding a Nurse Case Manager to the file! This could be the “shot” needed to boost your claim to closure!

## **Early referral to a NCM can:**

- Decrease medical cost
- Prevent treatment delays
- Improve treatment outcomes
- Impact TTD costs
- Facilitate and expedite earlier RTW

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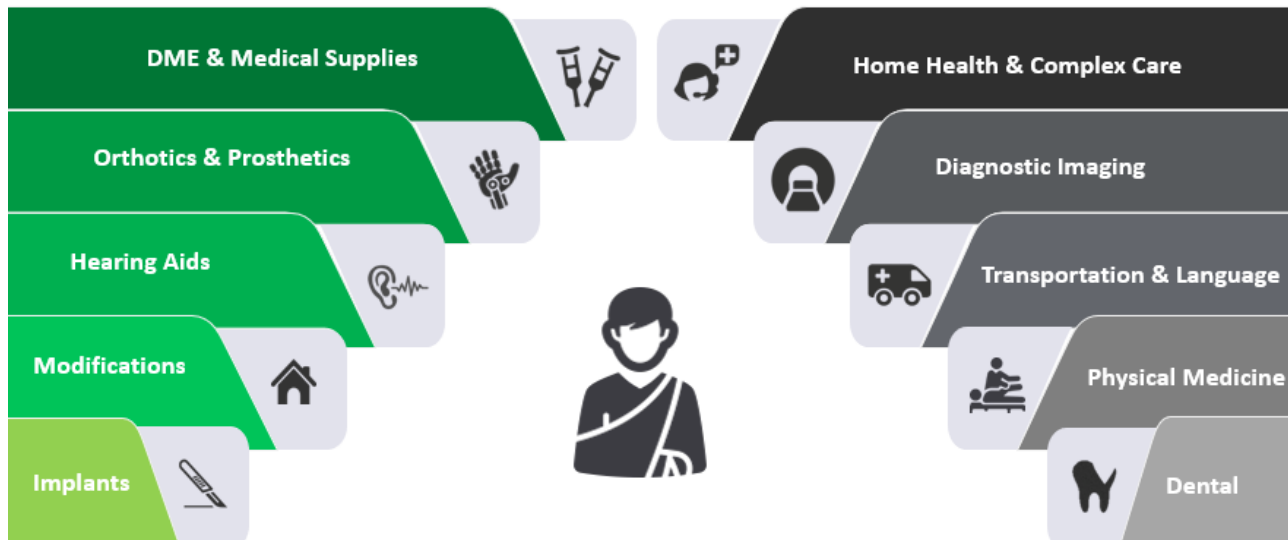
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# Thank You!

