COMPLEX SPINAL PAIN / RECOVERY GUIDE

After spine injections

Epidural · Facet / medial branch · SI joint

Take it easy today. Track how you feel. Your individual discharge orders take priority.

Patient: _____ Procedure / date: _____

TODAY & THE NEXT DAY

Have someone drive you home. Do not drive for 24 hours, or longer if you are weak, numb, dizzy, or taking sedating medicine. If sedated, have a responsible adult stay with you as directed; avoid alcohol, machinery, and important decisions for 24 hours.

Rest today, with short, gentle walks. Avoid strenuous exercise and heavy lifting today; increase activity gradually as directed. Get help walking until numbness or weakness from the numbing medicine has fully worn off.

SKIN CARE & COMFORT

Keep the puncture site clean and dry today. Unless told otherwise, remove the small bandage and shower the next day. Avoid soaking or swimming until the puncture site is closed and dry and your team permits it.

For soreness, use a wrapped cold pack for 10–15 minutes at a time. Do not place ice on bare or numb skin.

WHAT TO EXPECT

Mild soreness or a brief pain flare can occur. Numbing medicine may help for only a few hours. Steroid benefit may take several days, sometimes a week.

After a diagnostic block: record pain and relief at the times requested. Try usual safe activities that normally hurt, without overexerting yourself.

MEDICINES & FOLLOW-UP

Use your discharge medication list. If a blood thinner or aspirin was held, restart only at the written time agreed with your treating team.

If you have diabetes and received steroid, monitor glucose more often for the next several days; follow your diabetes action plan and call for readings outside your advised range.

Call the team for a severe headache, especially one worse upright and better lying flat, or pain that keeps worsening.

WHEN TO GET HELP

Emergency care now: new or increasing weakness, groin numbness, loss of bladder / bowel control, or inability to urinate; severe back pain with these symptoms; chest pain, trouble breathing, or severe allergic reaction. Go to the ER; call 911 if severe or unsafe to travel.

Call the clinical team today: fever 100.4°F (38°C) or higher, chills, spreading redness, pus, wound opening, persistent bleeding, or pain not controlled by the prescribed plan. Do not wait for a portal reply.



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YOUR DISCHARGE PLAN

Pain diary / follow-up: _____
Blood thinner restart: _____
Activity restrictions: _____

Clinical / after-hours number:
_____

Urgent concerns: use your discharge contact, not appointment scheduling.

Sources reviewed 05 Oct 2026:
Hopkins: epidural recovery UCSF: discharge care