LUMBAR FACET MBB & RFA

**GRADE B**
**MODERATE LEVEL OF CERTAINTY**

- ≥50% pain relief from MBB before RFA
- Anticoagulation medications should be continued before facet MBB and RFA
- Repeat RFA in patients with 3-6 months of relief, up to 2x per year

**GRADE B**
**LOW-TO-MODERATE LEVEL OF CERTAINTY**

- Sedation should not be routinely used before MBB

**GRADE C**
**LOW-LEVEL OF CERTAINTY**

- Single block before RFA, although using multiple blocks may improve RFA outcomes

**#1**

- 3-month trial of different conservative treatments before facet joint interventions
- Lumbar MBB < 0.5 mL
- IA injections < 1.5 mL
- Larger lesions increase the chance of capturing nerves
- Sensory stimulation should be used with single lesions
- Real-time contrast injection to r/o intravascular uptake
- Injection of steroid after RFA may prevent neuritis
- Interference with implanted electrical devices