The Department of Physiatry offers a comprehensive evaluation of patients who have a wide variety of musculoskeletal and painful conditions. Our evaluation and treatment plans include:

- Obtaining specific spinal and musculoskeletal diagnosis, with clinical correlation and confirmation through appropriate imaging
- Referral to appropriate surgical and medical sub-specialties
- Referral for specific adjunct physical and occupational therapy programs (while maintaining close collaboration and communication with the therapists)
- Patient education and information
- Standard and state-of-the-art pain procedures for diagnostic, prognostic and therapeutic purposes

Although we do not have the resources to provide long-term opioid management/refills for chronic pain patients, our consultations will provide a thorough assessment. We will assist in the determination of the appropriateness of opioid usage and make recommendation for and assist with opioid titration or tapering. If necessary, we will initiate and coordinate referrals to a multidisciplinary chronic pain center.

Assistance with Diagnoses (Samples listed below by specialty)

**Family Practice/Internal Medicine/Pediatrics:**
- **Spinal pain** – Discogenic pain, radiculopathy/sciatica, vertebral compression fractures, facet pain – at all spinal levels.
- **Musculoskeletal** – Sports/repetitive use injuries. Perform peripheral joint injections including knee, shoulder, hip, deQuervain’s tenosynovitis, carpal tunnel, epicondylitis, etc.
- **Neuropathic pain** – Herpes Zoster/post-herpetic neuralgia, complex regional pain syndrome/reflex sympathetic dystrophy, diabetic neuropathy, post-laminectomy pain. Assess for appropriate neuropathic pain medications, peripheral and sympathetic nerve blocks, spinal cord stimulation.
- **Vertebral compression fractures** – Bracing, exercise programs, thoracic and lumbar percutaneous vertebroplasty.

**Rheumatology:**
- **Spinal pain procedures** – at all spinal levels: Epidurals, facet injections, sympathetic blocks, radiofrequency neurolysis, spinal cord stimulation.

**General Surgery/Oncology:**
- **Pancreatic pain** – Cancer and Pancreatitis: Celiac Plexus block and neurolysis.
- **Post-hernia pain**: Iliinguinal and iliohypogastric nerve blocks, neuroma injections and radiofrequency.
- **Post-thoracotomy pain**: Intercostal nerve blocks and radiofrequency. Neurona injection.
- **Amputation pain**: Both phantom and residual limb pain. Neuroma injection, sympathetic block, spinal cord stimulation.
- **Post-mastectomy pain**: Physical therapy and psychological referral, sympathetic blockade, spinal cord stimulation.
- **Rectal pain**: Impar and caudal blocks.
Urology:

- **Scrotal/Perineal pain**: Ilioinguinal and iliohypogastric nerve blocks. Impar (sympathetic) blocks.

Orthopedics/Podiatry:

- Joint injections, evaluation of referred pain (i.e. neck pain causing shoulder symptoms, back pain causing hip/knee/ankle symptoms). Complex regional pain syndrome/reflex sympathetic dystrophy.

OB/Gyn:


Neurology:

- **Neuropathic pain**: Sympathetic and peripheral nerve blocks, epidural injections, spinal cord stimulation.
- **Headache**: Cervicogenic headache. Facet medial branch blocks, epidurals, occipital nerve blocks, supraorbital nerve blocks, trigger point muscle injection.
- **Neurogenic Thoracic Outlet Syndrome**: Anterior scalene injections.

Please contact us via phone, fax or e-mail with any questions or concerns.

**janf@sutterhealth.org**: 831-458-6240 office, 831-458-6242 personal, 831-458-5890 fax  
**marcusdb@sutterhealth.org**: 831-477-2325 office, 831-458-5891 personal, 831-458-5890 fax  
**warep@sutterhealth.org**: 831-458-6240 office, 831-458-5890 fax