

# Addendum A

## Pain Management Procedures

### Section A

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|---|--|
| <input type="checkbox"/> Arthrography               | <input type="checkbox"/> Myelogram                       |
| <input type="checkbox"/> Carpal Tunnel Injection    | <input type="checkbox"/> Nerve Root Block                |
| <input type="checkbox"/> Discogram                  | <input type="checkbox"/> Radiofrequency Rhizotomy        |
| <input type="checkbox"/> Bursa Injection            | <input type="checkbox"/> Sacroiliac Joint Injection      |
| <input type="checkbox"/> Discectomy                 | <input type="checkbox"/> Tenography                      |
| <input type="checkbox"/> Epidural Steroid Injection | <input type="checkbox"/> Trigger Point Injection         |
| <input type="checkbox"/> Epidurography              | <input type="checkbox"/> Stellate Ganglion Block         |
| <input type="checkbox"/> Facet Joint Injection      | <input type="checkbox"/> Facet Joint Denervation         |
| <input type="checkbox"/> Facet Nerve Injection      | <input type="checkbox"/> Pulsed Radiofrequency Treatment |
| <input type="checkbox"/> Fine Needle Biopsy\        | <input type="checkbox"/> Lumbar sympathetic block        |
| <input type="checkbox"/> MRI Arthrography           | <input type="checkbox"/> Sacral nerve root stimulation   |

### Section B

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|---|---|
| <input type="checkbox"/> IDET           | <input type="checkbox"/> Discography                    |
| <input type="checkbox"/> Kyphoplasty    | <input type="checkbox"/> Percutaneous disc nucleoplasty |
| <input type="checkbox"/> Nucleoplasty   | <input type="checkbox"/> Dekompressor discectomy        |
| <input type="checkbox"/> Vertebroplasty | <input type="checkbox"/> Spinal cord stimulation        |
| <input type="checkbox"/> X-Stop         | <input type="checkbox"/> Intrathecal pump implant       |