

WHY AN MRI MAY NOT BE THE SOLUTION:

Findings shown on an MRI are often not the cause of back pain, so an MRI is usually not recommended within the first six weeks of experiencing pain. Research shows that about 30% of healthy people aged thirty to fifty who are pain free will show a disc herniation on an MRI that's usually unrelated to the existing pain. Additionally, MRI's often show 'degenerative disc disease' in 80% of people in their 50s, but that term is accurate in people of that age and usually not the cause of existing pain. So be aware, an MRI can bring up scary terms, but they're usually normal based on the patient's age.

Early ordering of an MRI can prolong recovery due to common misinterpretation of normal findings. This can lead to needless testing and possibly unnecessary treatment, adding to your risk and cost.



Do I need an MRI?

WHEN TO GET AN MRI:

- If you've had 4 to 6 weeks of radiating leg pain severe enough to warrant surgery.
- If you've had 3 to 6 months of back pain severe enough to warrant surgery.
- If the back pain includes related symptoms like loss of appetite, unexplained weight loss, fever, chills shakes, or severe pain while at rest.
- If the pain is unrelenting and no change in position makes it feel better or worse.
- If you've been diagnosed with spinal stenosis and are considering an epidural for pain relief.
- If you've had back surgery and your pain doesn't improve after 4 to 6 weeks.

WHEN AN MRI IS NEEDED IMMEDIATELY:

The only time an MRI is needed immediately is when someone has either:

- **Inability to go to the bathroom or control their urine.**
- **Progressive weakness in legs due to nerve damage.**

Questions? Text: #IQuestion or call 1.800.531.0987