

## Who is A Good Candidate for Nerve Surgery?

### The optimal patient for nerve pain surgery has:

- **Pain in a specific area for more than three months** that has not been relieved by other methods like physical therapy or medications.
- A **prior workup** by other specialists such as orthopedic surgeons, physical medicine doctors, pain specialists, or neurologists—without discovering an obvious cause for the pain.
- **Prior tests** can be particularly helpful in suggesting nerve injury, such as MRIs, EMG/NCV, and diagnostic nerve blocks.

### You may qualify for surgery if your pain has lasted more than 3 months following:

#### Prior Surgery

- Knee replacement (Knee Pain)
- Leg, ankle or foot operations (Foot Pain/Foot Drop)
- Hip replacement (Thigh Pain - Meralgia Paresthetica)
- Abdominal surgery, laparoscopic surgery, abdominoplasty, etc.
- Hernia repair (Groin/Hernia Pain)
- Mastectomy, breast reconstruction or augmentation (Post Mastectomy Pain Syndrome - PMPS)
- Chest surgery

- Low Back pain with or without prior spine surgery
- Neck and facial surgery
- Amputations, including phantom pain

#### Trauma

- Falls (low back, buttock, and leg pain)
- Sports injuries (ankle sprains, ligament tears)
- Car accidents, whiplash

#### Compression

- Thoracic Outlet Syndrome (nTOS)
- Carpal Tunnel
- Forearm and Elbow Pain
- Abdominal Pain (ACNES)
- Nerve compression in the legs (lateral femoral, saphenous, peroneal nerves)

#### Other Causes

- Shingles - Post-herpetic Neuralgia (PHN)
- Diabetes - New onset of foot pain, numbness or ulcers
- Sole of the Foot Pain/Numbness - Tarsal Tunnel Syndrome

#### Headaches

- Migraine Headaches
- Whiplash, Occipital Neuralgia
- Post-whiplash Headaches
- Post-traumatic Headaches

