A cervical radiofrequency ablation (RFA) is an outpatient procedure for treating neck, shoulder, and upper back pain. It is also called cervical facet thermal coagulation or rhizotomy. This information sheet will explain what it is. Your doctor can explain if it is for you.

What are cervical facet joints?

Facet joints connect the vertebrae, the bones of the spine. They help guide your spine when you move. The neck area of the spine is called the cervical region. It contains seven vertebrae.

Facet joints are found on both sides of the spine. Each is about the size of a thumbnail. Cervical facet joints are named for the vertebrae they connect and the side of the spine where they are found. The right C2-3 facet joint, for example, joins the 2nd and 3rd cervical vertebrae on the right side.

Medial branch nerves are found near facet joints. They communicate pain from the facet joints. They tell the brain when a facet joint has been injured.

What is cervical facet joint pain?

You may feel pain if a cervical facet joint is injured. Sometimes it feels like muscle tension. Other times it can be severe pain.

The cartilage inside the joint may be injured. Other times only connecting ligaments surrounding the joint are injured.

Facet pain also depends on which joint is affected. Cervical facet joint pain can occur in an area from your head down to your shoulder blade. The diagram shows areas of pain usually associated with cervical facet injuries.

How do I know if I have cervical facet pain?

If you have pain in one or more of these areas, and it lasts longer than two months, you may have cervical facet pain.

Common tests such as x-rays or MRIs may not show if a facet joint is causing pain. The best way to diagnose facet pain is to block the pain signal in a medial branch nerve with a local anesthetic (numbing medicine).

What is a cervical RFA?

RFA uses radiofrequency energy to disrupt nerve function. When this is done to a cervical medial branch nerve, the nerve can no longer transmit pain from an injured facet joint.
What happens during an RFA?

A local anesthetic will be used to numb your skin. The doctor will then insert a thin needle near the facet joint. Fluoroscopy, a type of x-ray, must be used to position the needle. The doctor will then check to make sure it is at the correct nerve by stimulating it. This may cause muscle twitching and provoke some of your pain.

Once the needle is properly placed, the nerve will be numbed. Radiofrequency energy will then be used to disrupt the medial branch nerve. This is often repeated at more than one level of the spine.

What happens after an RFA?

You will be monitored for up to 30 minutes after the RFA. When you are ready to leave, the staff will give you discharge instructions. You will also be given a pain diary. It is important to fill this out because it helps your doctor know how the RFA is working. Take it easy for the rest of the day.

You may feel sore for one to four days. It may be due to muscle and nerve irritation. Your neck may feel numb, weak, or itchy for a couple weeks. Maximum pain relief normally comes in two to three weeks.

How long can I expect pain relief?

Nerves regenerate after an RFA, but how long this takes varies. Your pain may or may not return when the nerves regenerate. If it does, another RFA can be done.

This pamphlet is for general education only. Specific questions or concerns should always be directed to your doctor. Your doctor can explain possible risks or side effects.