GREENBERG SPINE
MINIMALLY INVASIVE SPINE SURGERY

UNDERSTAND THE CONDITION - KNOW THE NEXT STEP

Lumbar Spinal Stenosis

Lumbar spinal stenosis is narrowing around the nerves in the low back. It often causes leg pain, heaviness, or cramping with walking or standing that eases with sitting or leaning forward. Treatment ranges from therapy and injections to targeted decompression when function remains limited.

What you may feel

- Leg pain, heaviness, aching, or cramping that begins with walking or standing.
- Relief when you sit, lean forward, use a cart, or ride a stationary bicycle.

How it is evaluated

- Walking tolerance, the neurologic examination, symptom pattern, and circulation are evaluated together.
- MRI shows the nerves and narrowing; CT or a CT myelogram may be useful in selected situations.

How treatment typically progresses

1 Treatment usually starts without surgery

- Physical therapy, flexion-based conditioning, activity modification, and non-opioid medication are common starting points.
- An epidural injection may reduce symptoms and create a window for activity and therapy.

2 When surgery enters the discussion

- Walking and daily function remain substantially limited despite appropriate non-surgical care.
- Decompression creates more room for the nerves; fusion is considered only when instability is also present or would be created.

Emergency: go now

- Seek emergency evaluation for new loss of bladder or bowel control, inability to urinate, saddle-region numbness, or sudden severe weakness in both legs.

Contact the office promptly

- Contact the office for a rapid drop in walking distance, new leg weakness, repeated falls, or symptoms that are not improving with the plan.

Reviewed by Marc Greenberg, MD
Fellowship-trained orthopedic spine surgeon - 2026-07-13
Mayo Clinic (MD) · Johns Hopkins (residency) · Brown (fellowship)

greenbergspinemd.com/stenosis/

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FOR THIS VISIT

Your plan today

Your care team has checked the items below that apply to you. Keep this with you and bring it to your next visit.

Medications started today
☐ muscle relaxant ☐ anti-inflammatory (ibuprofen/naproxen) ☐ acetaminophen (Tylenol)
☐ gabapentin / pregabalin ☐ steroid taper (Medrol) ☐ duloxetine ☐ other: _____

Imaging ordered
☐ MRI ☐ CT ☐ X-ray (flexion/extension) ☐ standing films ☐ CT myelogram
→ scheduling: ☐ you'll schedule ☐ our office / imaging center will call you

Other studies
☐ EMG / nerve conduction ☐ DEXA bone density ☐ vascular study (ABI) ☐ labs: _____

Physical therapy & activity
☐ PT - convenient location; order sent ahead ☐ home exercise program
☐ activity restrictions: _____ ☐ assistive device (cane/walker) ☐ TENS unit

Bracing
☐ none needed ☐ lumbar (LSO) ☐ cervical collar ☐ as directed: _____

Injection
☐ Ordered - referral to a pain-management specialist → ☐ they will call you ☐ you will call them

Surgery
☐ To be scheduled - our surgical scheduler will call you. If you haven't heard within 5 business days, call (260) 484-1400.

Before surgery clearance & prep
clearance: ☐ primary care ☐ cardiology ☐ neurology ☐ pre-op labs ☐ smoking cessation
☐ stop blood thinners as directed

Referrals
☐ Bone Health Clinic (osteoporosis) ☐ weight / nutrition ☐ pain management (medication)
☐ other: _____

Work / activity status
☐ work / school note ☐ off work until _____ ☐ modified duty ☐ FMLA / disability forms

Follow-up
in _____ weeks ☐ after your MRI / injection / EMG ☐ as needed

Notes & questions for your next visit

QUESTIONS OR NEW SYMPTOMS
Call us
Office · (260) 484-1400 · Scheduling · (260) 484-1400 · After hours · (260) 484-1400

Patient education - not a substitute for your surgeon's instructions
HANDOUT LUMBAR-SPINAL-STENOSIS - VERSION 1.0.0