Transforaminal decompression was first popularized by Kambin and has been had many reiterations. This surgical experience utilizes a method of decompression popularized in Germany and the Netherlands in which an endoscope is placed targeting the specific pathology (ie: the herniated nucleus pulposus) sparing the remainder of the disk. The authors utilized this technique for multiple compressive pathologies. It became clear that despite a steep learning curve successful outcomes with this procedure were achievable. With review of the outcomes it also became clear that certain pathologies were better treated by these physicians than others. The classic disk herniation with subsequent LE radiculitis and LBP secondary was the presentation that was most successfully delt with by utilizing this procedure. It also was advantageous in patients who had primary LBP with disk herniations and LE radiculitis who would also need fusion, or total disk replacement. The outcome at two years exceeded the success of long quoted success with classic microdiscectomy as described by Caspar and others. The posterior compressive lesions could be delt with in this minimally invasive fashion and then the less invasive anterior surgical technique of total disk replacement or anterior stand alone arthrodesis and internal stabilization could be performed. This subgroup also did very well at two years. Further clinical experience and follow-up is necessary as is a prospective multi-center study to help bring this technique to the mainstream in the USA, and establish it as the "gold standard".