Information for Patients having: Ultrasound Guided Joint Injection

Important Information

Introduction

Your doctor has referred you to the Radiology department for an ultrasound examination and an ultrasound guided injection. The aim is to either treat or diagnose your condition and in some instances to do both at the same time. To do this we inject a mixture of local anaesthetic and steroid. Injections of local anaesthetic on its own are used to try and identify where pain is coming from, which then helps decide the best treatment.

What happens during the examination?

The radiologist or sonographer will explain the procedure to you and will be happy to answer any questions you may have. After cleaning your skin they will inject local anaesthetic to numb the area before injecting the steroid and local anaesthetic under ultrasound quidance.

Is there any preparation?

Please note that if you are taking Warfarin or any other blood thinning medicine such as aspirin or clopidogrel please call us on 01603 288469 as soon as you can, as you may need to stop taking these medications if safe to do so.

Special considerations during the SARS-CoV2 (COVID-19) pandemic:

There is a small risk that steroid injections can temporarily reduce the ability of the immune system to fight infection. This effect can last from seven to forty days and as a result there may be an increased risk of contracting COVID-19 infection. This is not guaranteed to happen, but the risk cannot be eliminated. In severe cases of COVID, this may result in hospitalisation, intensive care support, and potentially (although rare) death.

Steroid injection should only be considered by if your pain is severe and/or debilitating and all other appropriate treatments and/or pain therapies have been tried.

You should discuss carefully with your hospital consultant the benefits versus risks of both attending hospital (increased exposure risk), as well as temporary immunosuppression, especially if you are a vulnerable patient in the high risk group.

If you do decide to go ahead, then current advice is to observe strict social distancing for 14 days prior to injection. You should not attend for injection if you have symptoms of COVID-19, recently tested positive for COVID-19 or have had recent contact with a person with symptoms.

Whilst acknowledging the potential risks of corticosteroid injections in relation to COVID-19 we are also aware of the extreme difficulties many patients are facing in relation to

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musculoskeletal pain and the impact this has on their function as well as their physical and mental well-being during these challenging times.

If you have significant health problems and/or are in a high risk group (for example over 70 years old) you may decide after discussion with your referring clinician to isolate for a period after the injection.

Are there any side effects?

During the day of the procedure patients usually feel quite comfortable because of the local anaesthetic. It is common for patients to feel more discomfort than usual at the site of injection for 24 to 48 hours, for which simple painkillers such as paracetamol or ibuprofen are usually enough. Therefore it is usually recommended that patients rest for 2 days following a steroid injection, but we will advise you at the time depending on your particular circumstances. You should ask someone to accompany you to the hospital so they can drive you back after the procedure.

Any time a needle is used on someone there is a tiny risk of an infection (less than 1 in 100,000) which we are careful to prevent happening. You should contact your doctor if the area becomes painful and hot afterwards, particularly if you feel unwell in yourself.

Many patients experience a hot flushing sensation after a steroid injection which usually settles in a few minutes. If you are diabetic you may experience a rise in your blood sugar level for a few days after the injection. This will soon come back down and should not cause you any problems. Steroids may cause mood changes and may also cause disturbances to the menstrual cycle. Rarely the injection may cause thinning or changes to the colour of the skin at the injection site.

Steroid injections usually take a week or so to have an effect and can ease symptoms for a few months.

When will you get the results?

The Radiology Department will send a report of your scan to the doctor who requested it immediately after the procedure.

Finally

Some of your questions should have been answered by this letter, but remember that this is only a starting point for discussion about your treatment with the Doctors looking after you.

Access to Radiology

How to find us:	East Outpatients entrance and follow the signs to Level 2 Radiology and then to ultrasound.
	You can find more information at: www.nnuh.nhs.uk
Hospital transport:	To enquire about hospital transport telephone 0333 240 4100
	4100

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Available via Trust Docs Version: 1 Trust Docs ID: 18058 Page 2 of 3

Contact details:	Telephone: 01603 288469
	Email: ultrasound@nnuh.nhs.uk
	Website: www.nnuh.nhs.uk

If you have any comments or suggestions about this letter, please feel contact us.

The Trust has to submit information to national registers monitoring imaging tests and scans and your anonymised images may be used for teaching and research purposes. All information is stored securely and confidentially. The Trust is a teaching hospital so students may perform or observe procedures.

If you do not want your anonymised data to be submitted to national registers, or a student involved in your procedure, please speak to a member of staff when you come to your appointment. Please be reassured that this will not prejudice your care in any way.

