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All criteria must be met prior to referral for steroid injection and this form must be signed by both the referring clinician and the patient and sent with the referral form. Any incomplete forms will be sent back to the referrer and could delay the procedure.

If the referring clinician is unable to sign the form due to remote appointments, please insert the following phrase into the clinical details for the request: “The COVID-19 discussion as detailed on this form has taken place and the patient consents to proceed”.

If the patient is unable to sign due to remote appointments they will be required to sign on the day of the procedure.

Each patient referred for an image-guided steroid injection should be reviewed on a case-by-case basis in order to determine if the treatment is still suitable for current symptoms. All reasonable non-injection pain management measures should have been explored.

Steroid medication is known to have a suppressive effect on the immune system that could lead to an increased risk of a worse outcome if patients become ill with an infection. Unfortunately these effects are poorly understood for coronavirus because of the novel nature of the infection and the lack of research into it, but we do know that coronavirus can result in becoming seriously unwell if contracted.

The overall effects of steroid injections and therefore the associated risks are small compared to oral or intravenous steroid preparations. However, we believe that it is better to avoid these risks where an injection can be safely delayed.

For patients who are already at high risk of becoming seriously unwell, other treatments should be considered first and if a referral for a steroid injection is still required then this should be discussed with the Radiologist prior to referral.

Please discuss the following at consultation when referral is made:

1. Any underlying health conditions that may put the patient in a higher risk category have been discussed and documented at the time of referral.
2. The procedure may be disrupted, delayed or potentially cancelled if there are changes to guidance during the COVID-19 pandemic.
3. Although precautions are taken, coming into the hospital can increase your chances of contracting COVID -19.
4. Conservative measures including analgesia and activity modification have failed.
5. The patients' pain is having a significant negative effect on daily living.
6. The patient has been given the information leaflet on image guided injections and they are aware they will need to bring a signed copy to the appointment.
7. The patient is aware of a potential increased risk of having a steroid injection and the lack of clear evidence relating to COVID -19 and the patient has been engaged in shared decision making.

This information has been based on the guidance from the British Orthopaedic Association website and NHS England.

<https://www.boa.ac.uk/uploads/assets/30a67bae-1e3a-4b76-bf97b7f86600230b/Corticosteroid-use-for-musculoskeletal-and-rheumatic-conditions-during-COVID-19-Pandemic-V1.pdf>

Referring Clinician:

I have explained the above details to the patient (if this discussion has not taken place in person, I have confirmed this discussion has taken place via the patient request in ICE).

Signed:..... Print Name:..... Date:

Patient:

The information listed above has been discussed with me at my consultation.

Signed:..... Print Name:..... Date:

Note: this can be signed on the day of the procedure