

CT/Fluoroscopic/Ultrasound-guided Joint Injection:

WHAT DOES A JOINT INJECTION INVOLVE?

A common cause of a painful joint is synovitis (inflammation of the lining of the joint). It can be useful to inject a corticosteroid and/or local anaesthetic directly into the joint or the soft tissue next to a joint (often called a bursa) to reduce the inflammation and provide pain relief. **This procedure is most often used in the shoulder, knee or hip but may also be helpful in other joints.**

The correct position for the injection is selected using CT, fluoroscopy (similar to an x-ray 'movie') or ultrasound as a guide.

HOW IS A JOINT INJECTION PERFORMED?

The area of interest is cleaned and then covered with a small sterile drape. An injection of local anaesthetic is then used to numb the skin and the deeper tissues over the joint.

Under CT, fluoroscopic or ultrasound guidance, a fine needle is passed into the appropriate area. If this is being done using CT or fluoroscopy, a small amount contrast media (x-ray dye) is injected to assess the position of the needle. Once the needle is in the correct position, corticosteroid and/or local anaesthetic is injected.

This procedure takes about 30 minutes.

BEFORE A JOINT INJECTION:

- Please bring any related prior imaging with you.

AFTER A JOINT INJECTION:

- You will be given a 'Pain Assessment' form to complete over the next 10 days.
- **Please read the aftercare information we give you.** Although it is unlikely that you will develop any infection at the site of the examination, we ask that you monitor it for any signs of redness and inflammation or increasing pain. **If inflammation or redness does occur, you will need to contact either your GP or your referring doctor.**
- The radiologist will send a written report of the procedure to your referring doctor later in the day.