

Cortisone Injection

Patient Information

This information is designed for patients that have been referred by a doctor, physio or other medical professional. The reasons for having a steroid (cortisone) injection should have been discussed by your referrer prior to your appointment with our Doctor.

What is a Steroid injection?

Steroid injections are used to ease joint pain or reduce inflammation in soft tissue injuries, for example bursitis, tendon damage, tennis elbow and plantar fasciitis.

How should you prepare for your Appointment?

Plan to be at Onsite Ultrasound for approximately 45 mins. Wear something loose fitting that makes the site of the injection easy to access. Consider that the Doctor may require you to remove your outer garments, for example remove your shirt to inject your shoulder. In this case you may prefer to wear a singlet top under your shirt for your discretion.



Bring a list of any medications you are currently taking, this is required for the consent form you will fill out on the day of your appointment prior to injecting.

Depending on the area injected, it is advised to have a support person to drive you home after the procedure. This is not a requirement, and most people are able to drive themselves however sometimes the area injected may feel slightly painful, heavy or dull from the local anaesthetic.

What should you expect on the day of your appointment?

You will be required to fill out a consent form prior to your steroid injection. You **must** include **all** medications that you are taking, in particular warfarin or blood thinning drugs. Please indicate on the consent form if you are diabetic as the steroid injection may cause some temporary instability to your blood sugar levels. It is also **very important** that you indicate if you have had a recent infection anywhere in your body.

Prior to the injection the Doctor will explain the procedure to you and you will have an opportunity to ask questions or share concerns. Depending on the area being treated you may be asked to sit on the bed or lie down. The Doctor will then locate the site of the injection using the ultrasound probe. The area around the injection will be cleaned using a sterile solution and the steroid will be injected. Usually the steroid is combined (in the same syringe) with a local anaesthetic which will provide some short term pain relief. After the injection is complete the Doctor will ask you to sit in the waiting room for 10 minutes and check that you are feeling ok before you leave.

What to expect after your Injection?

In most cases you can return immediately to work after your injection. The local anaesthetic will wear off after 4-5 hours and the area may become painful. You can take some paracetamol for two to three days afterwards to help with the pain. After a few days it is likely that you will start to feel much better, however it is important to note that although your pain and inflammation may have improved your injury is not 'magically' healed. Healing can take up to 6 weeks so it is important not to overdo it.

N.B There are a small percentage of people that **do not** report any improvement in their symptoms following cortisone injection.

After one week (not before) you should engage in a rehabilitation on program with your physiotherapist, this is very important to aid in a full recovery.

Work and Exercise

You can usually return to work immediately, even heavy manual work such as building but it is important that you're careful with your injured area outside of work. You must simply avoid unnecessary activities that aggravate the injury, for example recreational sports or household duties that would put excessive strain on the injured area. Heavy weight training should be avoided for at least 2 months after the injection.

Drug Testing in Sport

Cortisone injections are subject to conditions in sport. If you are an athlete who can be drug tested then you need to contact drug Free Sport NZ and discuss what you must do to ensure that you are not at risk of failing a drug control test.

Call 0800DRUGFREE or visit www.sportscheck.org.nz

Risks

Allergic reaction immediately after the injection:

Allergic reaction to steroid injections is rare. The Doctor will ask you to wait at Onsite for 10 mins after your injection. If you notice any redness around the site of injection, itchiness, dizziness, faintness or shortness of breath please inform our receptionist who will alert the Doctor.

If these symptoms occur once you have left the premises, please contact your GP, out of hours emergency clinic or attend the Hospital Emergency Department without delay, and explain you have recently received a steroid injection.

Infection from this injection is very rare, but very serious:

If you experience redness around the site of the injection, a high temperature or pain that lasts for more than 4 days after the injection, or starts 3-4 days after the injection this may indicate infection. Contact your GP or attend an out of hours Emergency Clinic as soon as possible. Patients that are on low dose antibiotics or are diabetic need to be especially careful.

Other things to note

- Female patients may notice their menstrual cycle is slightly irregular for 5 months following a steroid injection.
- There can be instances of facial flushing after steroid injection.
- There is a small risk of depigmentation and a skin dimple due to steroid induced lipoatrophy (loss of fat tissue), when steroid is used in superficial injections (often of the hands and feet), however this is rare.
- If you are diabetic, it is advised to contact your GP post injection as your blood sugar levels may need to be monitored and anti-diabetic drug dosage may need to be adjusted.

CHECKLIST

- ☐ FILL OUT THE ATTACHED CONSENT FORM AND **BRING IT WITH YOU TO YOUR APPOINTMENT**
- ☐ MAKE SURE YOU HAVE LISTED ALL MEDICATIONS YOU ARE TAKING ON THE CONSENT FORM
- ☐ WEAR SUITABLE CLOTHING

You can view this information on our website www.onsiteultrasound.co.nz

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Consent Form

Please answer the following questions:

PLEASE TICK

- Do you have a latex allergy?
- Do you have any other allergies?

Yes ☐ No ☐

Yes ☐ No ☐

If **yes**, please state below

- Are you on any blood thinning medications such as Warfarin, Aspirin, Plavix, Heparin, Pradaxa?

Yes ☐ No ☐

If **yes**, please state which anti-coagulant you are on below (**please advise us if you are on Warfarin**)

- Are you diabetic?
- Do you suffer from Asthma?
- Do you have any heart or kidney conditions?
- Do you have an infection anywhere on your body?
- Are you currently taking any prescription medication?

Yes ☐ No ☐

Yes ☐ No ☐

Yes ☐ No ☐

Yes ☐ No ☐

Yes ☐ No ☐

If **yes**, please state which medication(s) you are on below

Declaration: I have read the information provided and am aware of the risks and benefits of being administered cortisone of the (body site being injected): _____

I understand that multiple injections may be required before my condition improves and that my condition may not improve even with multiple injections. I have been provided with the opportunity to have any questions answered and I therefore give my consent to injection of cortisone.

PATIENT NAME: _____

SIGNATURE: _____

DATE: _____

Medication (office use only)	
1. Kenacort 40mg	volume:
2. Ropivacaine 0.75%	volume:
3. Xylocaine 2.0%	volume: