Patient information and consent form for infiltrations (injections), arthrograms or myelograms

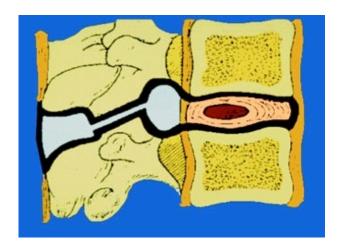
Diagnosis

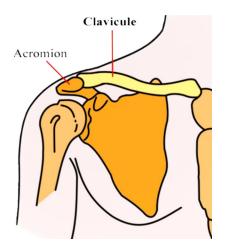
Principle

The injections are used to try to find out the cause of your pain or to treat it. This can ease your symptoms for hours or weeks to months.

Injections can be administered to the following areas:

- Facet joints (back)
- Nerve root (back)
- Peridural/spinal (back)
- o Joints (sacroiliac joint, hip joint, shoulder joint)
- o In myelograms: spinal canal





Procedure for infiltrations:

An anaesthetic (local anaesthetic), either with added cortisone or on its own, is injected into the above-mentioned site, using either sonography, CT or X-ray for guidance.

Procedure for myelograms:

For myelograms, an X-ray contrast medium is injected into the spinal canal after a local anaesthetic has been administered; this procedure is carried out in an X-ray room under sterile conditions.

Procedure for arthrograms:

A small amount of contrast medium containing iodine and gadolinium is injected into the joint capsule under fluoroscopy. As the joint capsule is filled with the contrast medium, there may be a brief feeling of tension in the joint.

Precautionary measures

- You should not take any blood-thinning medication such as Marcoumar, Plavix, Xarelto, Eliquis or aspirin (regular dose).
- The administration of local anaesthetic could temporarily impair the nerve function and therefore the strength and/or sensitivity. We therefore strongly advise you not to drive a vehicle while the local anaesthetic is effective (4-6 hours). Please let us know if you have intolerances to particular medicines.

Side effects

- Side effects are rare.
- Pain: After the anaesthetic wears off, you may experience temporary pain.
- <u>Allergy:</u> A small number of patients are allergic to the medication used. In very rare cases, an allergy may result in shortness of breath and circulatory failure.
- <u>Side effects of medication:</u> Cortisone may cause temporary reddening of the face and feelings of warmth, local reduction in fatty tissue (atrophy) or temporary difficulties with adjusting the blood sugar level for people with diabetes.
- <u>Bleeding:</u> Bleeding is very rare and usually stops without any further treatment. Occasionally a small bruise may develop.
- <u>Nerve damage:</u> It is possible for an impairment of nerve and muscle function to occur (reduction in sensitivity, paralysis) lasting for various lengths of time; however, this may also be permanent.
- <u>Infection:</u> There is a risk of infection. An infection is a rare but serious complication, which is why we work in sterile conditions and using sterile materials in order to keep the risk as low as possible.

Procedure after infiltration

- After the infiltration, we would like to ask you to wait in the waiting room for 20 minutes. After this, you can go home immediately. You may experience a temporary tingling, numbness or weakness in the affected leg.
- You will be given a pain log on the day of infiltration. Please log your pain every day and bring the log with you to your check-up, or return it by post if your check-up is done over the phone.

Procedure after myelograms

- See separate radiology information sheet.

Procedure after arthrograms

-	After the arthrogram, the joint can be moved normally again but you should not put abnormal strain on it for
	five hours.

I consent to the intervention described above. The procedure and the associated risks have
been sufficiently explained to me, and all of my questions have been answered to my satisfac-
tion.

Date, patient's signature

Date, doctor's signature

Comments:

On the day of the infiltration, please inform the doctor carrying out the infiltration of any of the following three points that apply:

- Allergies
- Blood-thinning medication
- Diabetes