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INJECTION CONSENT: ULTRASOUND-GUIDED

What is Cortisone?

Cortisone is the name used to describe a group of drugs correctly known as corticosteroids. Cortisone is used to treat pain in various parts of the body where inflammation is felt to be the root cause of the pain. Cortisone is effective in treating such pain is because it is a powerful anti-inflammatory. The types of cortisone commonly used at OrthoArizona – Mezona Orthopedic include Celestone, Dep-Medrol, and Kenalog. The medications used at OrthoArizona – Mezona Orthopedic are NOT illegal steroids such as those steroids used by some body builders and athletes.

Why inject Cortisone?

Cortisone injections provide anti-inflammatory components directly into the area of inflammation and/or pain, as opposed to a systemic distribution. In regard to musculoskeletal problems, cortisone injections are performed in order to reduce or even eliminate pain associated with a variety of disorders, such as:

- Bursitis (most commonly subacromial and trochanteric bursitis)
- Arthritis (any joint may be injected)
- Miscellaneous conditions where inflammation is a contributor to the pain, (frozen shoulder / adhesive capsulitis, calcific tendinitis, ganglion cyst).
- Tendinitis and Tenosynovitis (such as plantar fasciitis, biceps tendinitis, Tennis and Golfer's elbow)
- Nerve pain (most commonly for sciatica and carpal tunnel)

What is involved?

- The skin is prepared using an antiseptic agent (iodine or chloraprep) and the superficial dermal and soft tissue layers anesthetized with a numbing agent (typically Lidocaine).
- The cortisone filled syringe with needle is then guided into the relevant body part with or without the aid of Ultrasound. The guidance, at times, provides a more accurate visualization and administration of cortisone to be more accurately delivered into the area of suspected/proven pain.
- The degree of discomfort during the procedure is generally mild as the needle used is fine and local anaesthetic is also mixed in with cortisone
- A greater degree of discomfort may occur if: – the underlying inflammation is severe – the area to be injected is severely painful – the needle tip requires to be repositioned several times in order to distribute the cortisone effectively – a previous bad experience has resulted in a fear of needles, or there is a general anxiety/phobia of needles and other medical procedures.
- In cases where a cyst, ganglion, bursa or joint is distended with fluid, the cortisone will be injected after an attempt to aspirate (remove) the fluid in order to improve patient comfort.

Benefits, Risks, Complications and Side-Effects

As for all medical procedures, there are risks associated with the administration of any medication, including cortisone. However this procedure is more likely to provide you with a benefit, such as pain relief. This benefit outweighs the small risk, but of course it will be based on your specific case and with

the provider's consideration of your full medical history. The decision to inject cortisone is not taken lightly and is carefully made by your provider based on your signs, symptoms and past medical history, as well as the suspected diagnosis. Frequently, a trial injection is made where the diagnosis is not clear, and the body region injected is suspected of causing your pain. The risks of a cortisone injection include:

- Allergy to any of the substances utilized during the procedure, such as the cortisone, dressing, local anesthetic or antiseptic. This is usually minor and self limiting.
- The cortisone may result in palpitations, hot flushes and mild mood disturbance. This usually resolves within 24 hours and no treatment is necessary.
- Infection. Infection is a rare but serious complication, especially if injected into a joint. Most infections take at least a day or two to manifest, so pain at the injection site after 48 hours is considered to be due to an infection until proven otherwise. Even if not definitively proven, you may be commenced on empirical antibiotic treatment.
- Local bruising.
- Localized skin and subcutaneous fat atrophy (thinning resulting in dimpling).
- Hypopigmentation (whitening of the skin) at the injection site.
- Mild increase in blood sugar levels in diabetic patients for several days.
- Transient increase in pain at the injection site before the cortisone takes effect. Occasionally this pain may be severe, however usually lasts only 4–24 hours and is treated with a cold pack, Tylenol and anti-inflammatory medication.
- Cortisone injection administered directly into a tendon has been reported to weaken and damage the collagen fibers thus carrying a risk of delayed rupture. For this reason, cortisone is only injected around the tissue surrounding a tendon and the tendon is rested for one week.
- An extremely rare complication is avascular necrosis (bone death) which some doctors suspect may rarely occur when cortisone is injected into a joint, though this has not been proven.

Remember that the side effects of cortisone that are commonly reported in the media, such as osteoporosis, weight gain, acne and diabetes occur when taking cortisone tablets for longer periods of time. These side effects do not occur with the careful use of infrequent cortisone injections.

Are there any alternatives?

Of course there are. Since a cortisone injection is used for treating pain, it is an optional procedure. Other options should be discussed with your provider and may include living with the pain, anti inflammatory medications, exercise, physical therapy and surgery.

CONSENT

I have read the above information and am aware of the risks and benefits of the planned injection. I have been provided with the opportunity to have any questions answered and I therefore give my consent to injection of cortisone.

SIGNATURE _____ DATE _____

PATIENT NAME _____ (Print)

WITNESS SIGNATURE _____

PRIVACY STATEMENT: The information collected by OrthoArizona, Mezona Orthopedic is part of your confidential patient record and will be securely stored. The information is only used to assist us in safely and accurately carrying out your examination and will not be disclosed in any way to any third party or individual.