

Having an X-ray guided joint injection or sample of fluid taken (aspiration)

Department of Radiology

Information for Patients

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Introduction

If you are an outpatient please read your appointment letter carefully to check which hospital your appointment is at. This leaflet tells you about your examination. Please read it carefully as it contains important information and instructions.

What is a joint injection?

A joint injection is an injection of local anaesthetic and/or steroid into a joint. Joint injections are usually carried out to treat inflammation and reduce pain and discomfort. This can be done with X-rays to help guide the needle into place.

What is a joint aspiration?

A joint aspiration is a way of removing a small amount of fluid from a joint using a needle and syringe. The fluid taken out of the joint can be sent for testing to help with the diagnosis of your condition. For example the fluid can be used to check for crystals or to see if there is an infection in the joint.

Joint injections and aspirations can be done on the shoulder, hip, knee, ankle, elbow, wrist, thumb and the small joints of the hands and feet.

**Health information and support is available at www.nhs.uk
or call 111 for non-emergency medical advice**

Visit www.leicestershospitals.nhs.uk for maps and information about visiting Leicester's Hospitals
To give feedback about this information sheet, contact InformationForPatients@uhl-tr.nhs.uk

Important information before you have X-rays or an injection:

Please tell the X-ray staff when you arrive if you:

- **are allergic to iodine or rubber (latex)**, have any other allergies or have asthma.
- **have reacted previously to an intravenous contrast liquid**, the dye used for kidney X-rays and CT scanning and X-rays of your heart and blood vessels.
- **have diabetes**. This is important because the steroid that is injected into your joint could affect your blood sugar level.
- **think there is any possibility that you might be pregnant**.

Important information if you take blood thinning medication

If you are taking medication that thins the blood (anticoagulants or antiplatelets) it may need to be stopped or replaced with a different one for a few days.

Please call the radiology department for advice by phoning the number on your appointment letter as soon as possible. You will be asked what blood thinning medication you are taking, how much you take (the dose), and what you are taking it for.

Common examples of these drugs include aspirin, warfarin, clopidogrel (Plavix®), apixiban (Eliquis), rivaroxaban (Xarelto), ticagrelor (Brilinta), Dalteparin and Heparin.

You may have already been given instructions on blood thinners by the doctor who referred you for this procedure. Please still call the radiology department so we can check this.

What arrangements must I make before my examination?

Before you can have a joint injection, you need to plan the following things:

- You must be collected by a responsible adult, who must take you home in a car or taxi after the joint injection.
- You must have a responsible adult at home with you for at least 24 hours after your procedure.
- **Do not** drive or cycle for a minimum 24 hours after your joint injection.

Important: Driving after an anesthetic is a criminal offence, and will affect your insurance cover.

How do I get ready for the examination?

- Do not eat for 2 hours before the examination.
- You may have sips of water, cordial, sugary drink or other drink up to the examination time.
- You can bring food and drink with you to have after your examination.

Please call the number on your appointment letter to tell us if:

- you have a high temperature (fever) and are feeling unwell
- you are on antibiotics
- you are within a few days of a surgical procedure

It may be that we will need to re-arrange your appointment.

If your injection or aspiration is for your knee or ankle you can wear shorts or a skirt so that you do not need to get changed at the hospital.

Asking for your permission (consent)

The doctor who referred you should have talked to you about the reasons for this procedure and any other options.

You have been referred to a Radiologist or advanced radiographer for this procedure. Radiologists are doctors who have specialised in imaging and X-ray treatments. Advanced radiographers (consultant radiographers or advanced practitioners) are radiographers who have specialised in imaging and X-ray or ultrasound treatments. They will confirm that you understand why the procedure is being done, its potential risks and what the chances of success are. You will then be asked to sign a consent form to confirm this. **You should feel that you have had enough explanation before you sign the consent form.**

If after talking to the Radiologist or advanced radiographer you do not want to have the procedure then you can decide against it at any time.

If the Radiologist or advanced radiographer feels that your condition has changed they will talk to you about whether the procedure is still needed. They may then ask you to return to your referring doctor for review.

If you feel during the procedure that you do not want it to continue we will explain the implications of not doing so to help you fully decide.

Who will be doing the examination?

The examination will be carried out by a doctor (a radiologist) or advanced radiographer who specialises in X-ray treatments and ultrasound scans.

There may also be a radiographer, a nurse or radiology assistant in the room.

As we are a teaching hospital a student may also be present. If you wish, you can ask that a student is not present during your examination

What happens during the examination?

- On arrival at the Radiology Department you will be directed to the relevant waiting area. You may be asked to change into a hospital gown and sometimes paper pants. If you are having an injection or aspiration of your knee or ankle you may wear short trousers or a skirt so that you don't need to get changed at the hospital.
- You will be taken into an X-ray procedures room where the examination will be explained to you and you may ask any questions. The radiologist or advanced radiographer will decide on the best way to place the needle into your joint in order to perform the injection or aspiration.
- Sometimes X-rays may be taken of your joint before the procedure begins.
- You will then be asked to lie down on the examination table. You will be asked to lie in position and to lie still for the rest of the examination.
- Everything is kept clean (sterile). Your skin is cleaned with antiseptic and you have some of your body covered with sterile sheets.
- The skin and deeper tissues over the joint are numbed with local anaesthetic. When the local anaesthetic is injected it stings to start with, but this soon wears off and the skin and deeper tissues should then feel numb. If the procedure does become uncomfortable you should tell the member of staff who will be with you throughout the procedure.
- The radiologist or advanced radiographer will use X-rays to help guide the tip of the needle into the joint. If X-rays are being used a small amount of contrast liquid (a colourless liquid that shows up on X-rays) may be injected into the joint to check the position of the needle. Sometimes ultrasound scanning may be used instead of X-rays.
- If you are having a joint injection a small amount of steroid (to reduce inflammation) and local anaesthetic will be put into the joint.
- If you are having a joint aspiration a syringe will be used to remove some of the fluid from the joint.
- At the end of the examination, the injection site will be covered with a wound dressing.

What happens after the examination?

We may ask you to wait in the Radiology Department for a short time (15 to 30 minutes) after your examination. For a few hours after the examination your joint may feel uncomfortable.

- **Do not drive or cycle for 24 hours after your examination.** You will need someone to drive you home after your examination.
- **For 3 to 4 days:** Light activity such as sitting, standing and some walking is allowed but we ask you not to carry out heavy manual work for 3 to 4 days.
- **It may take 3 to 4 weeks** to see the benefit of a joint injection. If the procedure does not work then the doctor who referred you for the injection may talk to you at your follow-up appointment about any other options.

How long will it take?

The time will vary for each patient. Most examinations take about 20 and 40 minutes. You may be asked to stay in the Radiology Department for a short time afterwards. You should expect to be in the department for up to 2 hours in total.

Are there any risks and complications?

As with any procedure or operation, complications are possible. A joint injection or aspiration is a common examination that has little risk. We have included the most common risks and complications in this leaflet, although they are different for each person. Your risks will be discussed with you before you sign the consent form.

- **Infection** - there is a very small risk of an infection being introduced into the joint. This affects less than 1 in 100 people. If over the next few days the injection site becomes red, hot or painful, or if you get a high temperature (fever) contact your GP or call the NHS helpline on 111.
- **Bleeding or bruising** - there may be a small amount of bleeding or bruising at the injection site. This affects less than 1 in 100 people. Bleeding and bruising can cause pain for a few days.
- **Increased pain** - your pain symptoms can get worse (become aggravated) for a few hours or days before the injection starts to work. If you have increased pain several days after the injection it could be a sign of infection and you should call your GP or NHS 111 for help.
- **Tingling or numbness or a heavy feeling** - you may get this feeling due to the local anaesthetic in the joint. This usually gets better over the next 2 hours.
- **Reaction to contrast liquid** (for patients having a joint injection with X-ray) - some patients may be allergic to the contrast liquid and may have symptoms such as feeling or being sick (nausea or vomiting), or a rash. Side effects usually happen within 20 minutes. If you develop symptoms at home you should contact your GP or call 111.
- **Reaction to local anaesthetic** - Feeling dizzy, low blood pressure, allergic reaction, irregular heart rate. In most patients this is temporary and settles on its own.

Possible side effects from the steroid injection:

- **Feeling dizzy, headache, low or high blood pressure, feeling sick, being sick, loose poo (diarrhoea) or redness in the face** (flushing) for a short time. Most patients do not get these side effects. Usually these side effects happen straight away, but can happen in the next few days.
- **Irregular periods** - patients who have menstrual periods may notice that their menstrual cycle is slightly irregular for a few months.
- **Changes to your blood sugar levels** - patients with diabetes should monitor their blood sugar more closely over the next few days.

If you have any problems after the examination please call your GP or call NHS 111.

What are the risks from exposure to radiation in this procedure?

The main risk from having X-rays is an increase in the risk of getting a cancer in the future. This risk is thought to be very small. We are all exposed to natural background radiation every day of our lives. This comes from the sun, food we eat, and the ground. Each examination gives a dose on top of this natural background radiation. The risks of radiation are slightly higher for an unborn child so we must ask some patients aged 10 to 55 years about their periods and possibility of being pregnant.

The benefits of this examination are likely to outweigh any potential risk and the risk from not having the examination could be greater. We will take all safeguards to minimise the amount of X-rays you receive.

How do I get the results?

If you have had a joint aspiration the results will be given to you the next time you see the doctor who referred you for this examination. An explanation of how to get your results will be given to you following your examination.

What if I need to talk to someone?

If you have any questions or concerns, or cannot make your appointment, please call the Radiology Department on **0116 258 8765 (option 7)** - Monday to Friday, 9am to 5pm, excluding bank holidays.



اگر آپ کو یہ معلومات کسی اور زبان میں درکار ہیں، تو براہ کرم مندرجہ ذیل نمبر پر ٹیلی فون کریں۔
على هذه المعلومات بلغة أخرى، الرجاء الاتصال على رقم الهاتف الذي يظهر في الأسفل
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