



PRAIRIE

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Information on your Diagnostic Injection (with Cortisone)

A diagnostic injection will help your surgeon determine if your symptoms are coming from an intra-articular source (i.e. within the hip joint itself). If this is the case, then you may be a candidate for hip arthroscopy surgery. However if the cause of your symptoms is an extra-articular source (i.e. from the hip area but outside the hip joint itself) then it is unlikely that surgery would help your symptoms. The cortisone in the injection is a powerful anti-inflammatory and may help alleviate some or all of your symptoms permanently.

The diagnostic injection is performed by a radiologist under x-ray guidance at the hospital. The radiology department will contact you to set up an appointment for your diagnostic injection. There is no cost for this injection. Please contact our office to schedule a follow-up appointment for approximately 1-2 months after the injection to go over the results. **To avoid a prolonged wait to get in to see your surgeon to discuss the results, please phone to make this appointment around the time of your injection.**

The diagnostic injection consists of a long-acting local anesthetic – i.e. “freezing (usually 0.5% ropivacaine). Its effects usually last for a few hours. Depo-medrol (cortisone) is injected as well; it usually takes a couple of days before it takes effect, but could take up to a week or so. The injection is quite safe, but there are a few small **risks, (see back side)**. The radiologist will discuss these with you at the time of your injection. Please notify the radiologist if you have any allergies before your injection. Note that a vasovagal or fainting episode from the injection is quite rare, however you should ensure you eat breakfast/lunch prior to the injection to minimize this risk.

Prior to your injection you should try to irritate your hip so that your hip is aching when you go in for your injection (if you are not having any pain in your hip at the time of your injection then it will be difficult to determine if the injection helped). Then, within the first couple of hours (while your hip is still frozen), try to do activities that would normally irritate your hip (ex. go for a run, do squats, twist hip, etc.). They may tell you at the hospital to take it easy after the

injection, but your surgeon wants you to try to irritate your hip to see if the injection has helped your symptoms. Note: it is normal that your hip will ache for a day or so after the injection, once the freezing wears off but before the cortisone takes effect. You may take acetaminophen and/or ibuprofen if needed.

Risks of Diagnostic/Cortisone Injections

The injection is quite safe, but there are a few small risks, including (but not limited to):

- **Pain, Swelling, Stiffness.** It is normal to have a bit of pain, swelling, or stiffness within the first 1-2 days after an injection, due to the injection itself. You may take ibuprofen and/or acetaminophen if needed.
- **Inflammatory Response.** A small proportion of patients will develop an acute inflammatory reaction to the injection. This usually presents within the first 24 hours of the injection. It is characterized by pain, swelling, redness, and warmth. It may look similar to an infection. The difference is that it will generally begin to develop within the first 24 hours after the injection (whereas an infection often takes a few days or so to develop) and generally there will not be fevers (temperature > 37.8°C) or chills. This inflammatory reaction generally lasts for 2-3 days. Taking an anti-inflammatory, such as ibuprofen or naproxen, as well as an analgesic, such as acetaminophen, will help. Icing the area 20-30 minutes at a time, several times/day may also help. Please notify our office if you develop this reaction and it lasts longer than 3-4 days, or present to your nearest emergency department for assessment if you are concerned.
- **Infection.** This is a concern with any injection into a joint. It is characterized by swelling/redness/warmth of the injection site, fevers (temperature > 37.8°C) and/or chills, and generally feeling unwell. This is very serious and could require an operation to wash out the infection in your joint, as well as a period of intravenous antibiotics. It could also permanently damage the joint. Fortunately, it is rare, only occurring in (roughly) 1 in 10,000 injections. Please notify our office or present to the nearest hospital urgently for assessment if you think you have developed an infection. Note that an infection will generally (although not always) present 3-10 days after the injection, while an inflammatory response or pain/stiffness/swelling due to the injection itself will occur within the first 24-48 hours.
- **Weakening or rupture of tendons.** Cortisone can weaken tendons if it is injected directly into or in close proximity to tendons. This could lead to tendon rupture. Repetitive cortisone injections increase this risk. Avoid heavy lifting or intense activities within 1-2 weeks of an injection, when the risk of tendon rupture is greatest.
- **Weakening or death of bone.** Cortisone injections can weaken or soften the bone. There is also a risk of osteonecrosis, where the blood supply to the bone is disrupted and the bone dies and collapses. These risks are increased with repetitive injections, but could occur with a single injection.
- **Other Risks:** allergic reaction, injury to nerves/arteries/veins, temporary increase in blood sugars, skin atrophy or color changes, vasovagal/fainting episode.

Pain Diary

Please keep track of your symptoms before and after your diagnostic injection below.
Please bring this form with you to your follow-up appointment with your surgeon.

Pre-injection

Pain: ___/10

Location of pain: _____

Immediately after injection (within 20-30 minutes)

Pain: ___/10

Location of pain: _____

First 2-3 hours – try to irritate hip

Pain: ___/10

Location of pain: _____

Irritating activities attempted: _____

Next day

Pain: ___/10

Location of pain: _____

One month after

Pain: ___/10

Location of pain: _____