

Patient Information

Name of procedure: Imaging Guided Arthrogram

About this Procedure An MRI arthrogram is an imaging study that has 2 parts. The first part is the arthrogram and second part is the magnetic resonance imaging (MRI). This exam shows more details of the inside of the joint than a standard MRI.

Arthrogram – A special X-ray / MRI / CT / Ultrasound exam of a joint. During the exam, a contrast agent (dye) is injected into the joint. Equipment which shows live pictures allows your Radiologist to watch the dye as it is injected into your joint.

Contrast agent – Sometimes called “radiology dye.” Contrast agent helps make areas of the body easier to see during imaging exams. Contrast that is injected into the joint allows your radiologist see what is happening inside the joint.

X-ray - an X-ray is a form of electromagnetic radiation. A heterogeneous beam of X-rays is produced by an X-ray tube and is projected toward the patient. According to the density and composition of the different areas of the patient a proportion of X-rays are absorbed by the patient. The X-rays that pass through are then captured behind the patient by a detector (film sensitive to X-rays or a digital detector).

Magnetic resonance imaging (MRI) uses radio waves and a strong magnetic field instead of X-rays. It makes clear and detailed pictures of the body's organs, joints, ligaments, and other tissues.

CT – computed tomography. CT equipment uses a special scanner to take a series of x-ray pictures. It looks like a large doughnut. The resulting scans show a cross sectional image of the area scanned.

Ultrasound - This is a scan using Ultrasound (sound waves)

Intended Benefits of the Procedure

An MRI arthrogram helps your doctor see small tears or other problems in these tissues. Your doctor believes an MRI arthrogram will provide more information about your joint. What you and your doctor learn from this procedure will help guide future treatment. It will also help your doctor keep track of the known problems in your joint.

Serious or Frequent Risks

X-rays are commonly used and generally safe. However, in order to make an informed decision and give your consent, you need to be aware of the possible side-effects and the risk of complications.

You will be exposed to some X-ray radiation but the amount you receive is low and is not considered to be harmful. The level of exposure will depend on the procedure. Talk to your doctor or radiologist for more information.

Pregnant women are generally advised not to have X-ray tests as there is a risk that the radiation may harm the unborn baby. If you are, or could be pregnant then please tell your doctor or radiographer.

It is also possible to have an allergic reaction to the contrast medium. If you have any known allergy please inform us. If you experience any itching or difficulty in breathing, tell your radiographer immediately. Medicines are available to treat an allergic reaction. Ask your doctor to explain how these risks apply to you. The exact risks will differ for each person.

Infection Risk

There is a tiny risk of introducing an infection into the joint, despite the fact that all procedures are carried out using sterile equipment and aseptic procedure.

On the Day of the Procedure

We will welcome you to the Imaging Department and check your demographic details. We will then take you to the X-ray room where the Consultant Radiologist who will be carrying out your examination will be available to answer any queries you may have.

The test usually takes around 45 minutes but altogether you will be in the Radiology Department for approximately one hour.

Your Normal Medicines

You can continue with your normal medication (except as instructed below).

Clopidogrel, Dipyridamole, Prasugrel, Ticagrelor and Cilostazol

If you are taking any of these regularly please contact us. (contact details are listed below) We will need to know why you are taking this medication and discuss this with you. You will need to stop taking these prior to your procedure, but this should only be done after discussion with the Referring Clinician.

Warfarin, Acenocoumarol and Phenindione

If you are taking any of the above, it may need to be stopped prior to the procedure and alternative medication should be arranged with your referring Clinician. If you are taking any of these please contact us. (contact details are listed below) We will need to know why you are taking this and what your target INR is.

Apixaban, Dabigatran and Rivaroxaban

If you are taking any of the above, it may need to be stopped prior to the procedure and alternative medication should be arranged with your referring Clinician. If you are taking any of these please contact us as we will need to know why you are taking this. (Contact details are listed below)

If you don't feel well and have a cough, a cold or any other illness when you are due to come into hospital for your investigation, we will need to know. Depending on your illness and how urgent your investigation is, your procedure may need to be delayed. You may eat and drink normally on the day of the procedure.

You will need to arrange for a relative or friend to collect you from the department and drive you home.

During the Investigation

Following any relevant questions, you will be positioned on the imaging table. The joint to be injected will be located using radiological equipment, usually X-ray although sometimes an ultrasound machine may be used. Your skin will be cleaned and you will be given an injection of local anaesthetic. A needle will then be introduced into the joint and the contrast medium will be injected. This may cause an unusual sensation of fullness but it should not normally be painful.

After your Investigation

You may also notice that your joint feels 'spongy'. This is caused by the extra fluid injected into the joint space and will disappear as the fluid disperses in your body. After a local anaesthetic it may take several hours before the feeling comes back into the treated joint. Take special care not to bump or knock the area.

Do not do any strenuous activity for 12 hours after your arthrogram. You should check the injection site for redness, swelling, discharge, heat or worsening pain. If it's sore, irritated or swollen then apply ice or a cold pack wrapped in a towel. Do not apply ice directly to your skin as it can damage it. You should only apply ice or a cold pack for 15 minutes at a time, but you can repeat it every four to six hours. It is normal to have mild discomfort in the affected joint for the first 24 hours after your arthrogram.

If you need pain relief you can take an over-the counter painkiller such as paracetamol. (Always read the patient information leaflet that comes with your medicine and if you have any questions, ask your pharmacist for advice. These symptoms should not last more than 24 hours after your procedure.)

If any of your symptoms last for more than a few days, it is important that you contact your doctor or the nearest Accident and Emergency department. Your symptoms are not expected to be made much worse than prior to the examination.

A report will be sent to the doctor who requested your procedure; this can take up to 10 working days.

If everything is satisfactory you will be allowed home. It is advisable for someone else to take you home. If you do need to drive then please ensure that your shoulder movements are back to normal before leaving the hospital or please ask for advice.

The following internet websites contain information that you may find useful.

- www.worcsacute.nhs.uk Worcestershire Acute Hospitals NHS Trust
- www.patient.co.uk
- Information fact sheets on health and disease
- www.rcoa.ac.uk
- Information leaflets by the Royal College of Anaesthetists about 'Having an anaesthetic'
- www.nhsdirect.nhs.uk
- On-line health encyclopaedia

Contact details

If you have any specific concerns that you feel have not been answered and need explaining, please contact the following.

- Department Alexandra Imaging Department 01527 512099
- Department Worcester Royal Hospital 01905 760614
- Kidderminster Treatment Centre 01562 513088

Other information

The following internet websites contain information that you may find useful.

- www.worcsacute.nhs.uk
Worcestershire Acute Hospitals NHS Trust
- www.patient.co.uk
Information fact sheets on health and disease
- www.rcoa.ac.uk
Information leaflets by the Royal College of Anaesthetists about 'Having an anaesthetic'
- www.nhsdirect.nhs.uk
On-line health encyclopaedia

Patient Services Department

It is important that you speak to the department you have been referred to (see the contacts section) if you have any questions (for example, about medication) before your investigation or procedure.

If you have any concerns about your treatment, you can contact the Patient Services Department on 0300 123 1733. The Patient Services staff will be happy to discuss your concerns and give any help or advice.

If you have a complaint and you want it to be investigated, you should write direct to the Chief Executive at Worcestershire Acute Hospitals NHS Trust, Charles Hastings Way, Worcester WR5 1DD or contact the Patient Services Department for advice.

Please contact Patient Services on 0300 123 1733 if you would like this leaflet in another language or format (such as Braille or easy read).

Bengali

“আপনি যদি এই লিফলেটটি বিকল্প কোনো ভাষায় বা ফরমেটে (যেমন ব্রেইল বা সহজ পাঠ) চান, তাহলে এই নম্বরে 0300 123 1733 প্যাসেন্ট সার্ভিসের সাথে যোগাযোগ করুন।”

Urdu

“اگر آپ کو یہ دستی اشتہار کسی متبادل زبان یا ساخت میں چاہیے (جیسے کہ بریل / ایڑی ریڈ) تو پیشنت سروسز سے 0300 123 1733 پر رابطہ کریں۔”

Portuguese

“Por favor, contacte os Serviços de Apoio ao Paciente através do número 0300 123 1733, caso precise deste folheto numa língua alternativa ou formato (como Braille / fácil de ler).”

Polish

"Jeżeli pragniecie Państwo otrzymać tę broszurę w innym języku lub formacie (Braille / duży druk) proszę skontaktować się z Obsługą Pacjentów pod numerem 0300 123 1733."

Chinese

"如果您需要此份傳單的其他語言選擇或其他版本

(如盲人點字版/易讀版容易的閱讀),請致電 0300 123 1733與病患服務處聯繫。"

Comments

We would value your opinion on this leaflet, based on your experience of having this procedure done. Please put any comments in the box below and return them to the Clinical Governance Department, Finance Department, Worcestershire Royal Hospital, Charles Hastings Way, Worcester, WR5 1DD.

Name of leaflet:_____ Date:_____

Comments:

Thank you for your help.