

Important aftercare

You should rest for the rest of the day after the procedure and avoid strenuous activity for 2 days. Normal pain medication can be taken as usual.

The scans will be analysed by the radiologist and the results will be available in 2 weeks. The results will be available for the outpatient appointment with your consultant after the procedure. If you do not have a follow up please contact the consultant's secretary using the main hospital switchboard on **020 8954 2300**.

Medical help via your GP / local minor injuries unit should be sought if there are any signs of the following:

- **Excessive bleeding from the site**
- **Increased pain, swelling, redness or warmth**
- **Swelling in the neck, armpit or groin**
- **Fever / chills**

If you are unable to attend this appointment please let the department know ASAP, the appointment can be used by another patient.

Useful contact numbers

X-Ray / Ultrasound **020 8909 5443**
MRI / CT / Nuclear Medicine **020 8909 5801**
DXA **020 8909 5476**
Pre operative assessment **020 8909 5630**

NHS

**Royal National
Orthopaedic Hospital**
NHS Trust



A patient's guide to

CT Arthrogram MRI Arthrogram

If you would like this leaflet translated into another language/large print, please contact the Quality Team on 020 8909 5439.

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An arthrogram is a procedure that uses low radiation dose x-rays to guide a needle into a joint. Contrast (a dye that shows up on x-ray and MRI) is then injected into the joint through the needle. For an MRI-arthrogram, the injection is followed by an MRI scan, and for a CT-arthrogram, the injection is followed by a CT scan. MRI uses a large magnet to produce images, and CT uses additional radiation to produce images.

Before the procedure

We require you to contact the department if any of the following apply to you, if the department is not contacted before the appointment and any are applicable to you the appointment may be cancelled:

- You are taking anti-coagulants (blood thinning medication) such as **Warfarin, Aspirin, Clopidogrel, Rivaroxaban** or **Apixaban**
- If you have recently been diagnosed with a DVT or a suspected DVT and your medication is still ongoing.
- You are on or have recently been taken off **Antibiotics**
- You have a concern you may have an infection
- Any allergies to medications
- You have a severe needle phobia
- You are claustrophobic
- You are or might be pregnant, or if you are breastfeeding.

Contact number: **020 8909 5801**

On the day of your appointment, we advise you bring someone with you as you must not drive home following the procedure. Please come to the X-ray department and book in at reception. You will be asked to take a seat. Please be aware we run a busy service with multiple procedures, so patients will be taken into separate rooms at different times.

In the room

You will be shown into the room where a radiographer and helper will help you change if required. They are there to assist with the procedure and ensure you are at ease throughout. The radiologist will carry out the procedure. If you have a latex or plaster allergy please inform the staff in the room before the procedure starts.

The procedure starts with a brief fluoroscopy (moving x-ray) scan to locate the exact part of the joint that will be injected. A blunt 'marker' is gently placed on the skin to confirm the site for injection, which is then marked with a permanent marker pen. The radiologist will inject local anaesthetic to numb the skin at the site of the skin marker, and once the skin is numb, they will insert the needle into the joint, using fluoroscopy to guide the needle. The radiologist will then inject contrast into the joint. This is a completely aseptic (clean) procedure.

After the injection has been performed, the needle is removed and the skin is cleaned. A dressing will be applied, which needs to be kept clean and dry for 3 days.

After the injection has been performed in the x-ray department, you will be taken to the scanning department for a CT scan if you are having a CT-arthrogram or an MRI scan if you are having an MRI-arthrogram. You will be taken into a scanning room and lie down in the CT scanner or MRI scanner. It is important that you keep still, for your scan, as any movement can severely affect the quality of the images that are produced. A CT scan will take a few minutes, and an MRI scan may take about 20 minutes, depending on the joint being scanned. The MRI scanner can be claustrophobic for some patients, which is why you are provided with an alarm button that you can press if you feel you cannot continue. The department can also provide you with prism glasses that allow you to see out of the scanner.