Fluoroscopy Protocols

**Therapeutic Hip Injections**

**Fluoro Time Target Limit-1.0**

**Scheduling and Prep:**
*There is no prep for this exam. *Patient must fill out a contrast questionnaire.

**Supplies:**
*Arthrogram Tray (add a 20ga spinal needle) *Depo-Medrol or Kenalog-per referral  *.25% Bupivacaine *Omni 300 contrast

**Per Dr. Dale 7-12-2018:** It is OK to inject 80 mg/ml of Depo-Medrol in bilateral joints (Hip or Knee) at the same time. If a smaller joint is requested for bilateral steroid injections of 80mg/ml; consult an MSK Radiologist prior to exam. It is also OK to inject 40 mg/ml of Kenalog in bilateral joints at the same time. If referral is for 2cc-Depo-Medrol for a hip-consult MSK Radiologist for dosage clearance. 160mg/ml is usually too much for one hip.

**Room Prep:**
* Prepare sterile tray *Remove tower drapes *Place an anatomical marker on the I mage Intensifier

**Spot Scout Images:**
*AP Hip

**Procedure:**
* Patient in supine position with toes pointed medial- use an immobilization Device (sand bag)
* Localize injection site: superior 1/3 of proximal femoral neck
*Using standard sterile technique; clean, prepare and anesthetize the skin
*Place 20ga 3-1/2” needle in vertical approach until the needle reaches the bone
*Inject enough Omnipaque 300 to verify needle placement, take an image
*Inject ordered type and amount of steroid plus 5cc- .25% Bupivacaine (Marcaine), and 3cc xylocaine not to exceed 12 cc total joint volume.
*Remove needle / clean off Betadine and place a band-aide over the Injection site
*Have the patient gently exercise the hip joint

**Spot Images:**
*AP needle / contrast placement *AP and Lateral hip – post injection.

*These are the minimum images needed to demonstrate the proper anatomy for this Exam. When deemed necessary, more images may be taken to demonstrate pathology or For other reasons. *Care should be taken to minimize patient and technologist exposure.

Reviewed April 12, 2019