

## INJECTION CONSENT FORM

The purpose of this document is to provide written information regarding the risks, benefits and alternatives of joint and soft tissue injections. It is important you fully understand this information so please read this document carefully.

Procedure:		
Procedure.		

Benefits: You might receive the benefit of relief from pain and swelling with this procedure but this cannot be guaranteed. Only you can decide if the benefits are worth the risk.

Risks: Before undergoing one of these procedures, understanding the associated risks is essential. No procedure is risk-free. The following risks are well recognised, but there may also be risks not included in this list that are unforeseen by the doctors.

- There may be allergic reactions to the medicines injected into joints, to tape or the chemicals used to clean the skin for instance.
- You may develop 'post-injection flare' which is joint swelling and pain after the
  corticosteroid injection. This only occurs in approximately 1 in 50 patients and usually
  subsides quickly.
- There may be infection, although this is extremely rare.
- Joint damage may result from frequent corticosteroid injections. Generally, repeated and numerous injections into the same site should be discouraged.
- De-pigmentation (a whitening of the skin).

Lia alkia a awa wa wa wi alaw Ni awa a w

- Local fat atrophy (thinning of the skin) at the injection site.
- Rupture of a tendon located in the path of the injection if inadvertently injected.
- Pain may be associated with this procedure and the healing process.

By signing this consent form, you confirm you have read the patient information leaflet and if you have any questions regarding the procedure, risk, benefits or alternatives, please ask before signing.

HealthCare provider Name	Signature
Role:	
I consent to the joint injection procedure. I have bee complications as detailed above and am happy to p	
Patient name	Date of birth:
Signature	Date:
Witness name:	Witness Signature:

C: ----