What is a joint injection?
Steroid injections are used to help with swelling, stiffness, and pain in your body. They’re usually given to treat: Arthritis (painful swelling and stiffness of your joints) tendonitis, which is inflammation in a tendon (tissue that attaches muscle to bone) and bursitis (inflammation in the area around a joint). You can get the injection in your joint or the area around your joint. The most common sites for steroid injections are the: Shoulder, Hip, Finger, Wrist, and Knee. We perform fluoroscopic or ultrasound guided steroid injections for joints or tendon sheaths for patients who are symptomatic and under the care of a rheumatologist, orthopedist, or sports medicine physician. All procedures are performed or supervised by an attending radiology physician with subspecialty training in pediatric musculoskeletal radiology.

Will my child be awake for the procedure?
Most children remain awake, and we use a local numbing medicine at the site of the injection. In other cases, the child can be given minimal sedation to help them relax during the procedure or be put completely to sleep with general anesthesia. If your child requires anesthesia you will receive a phone call by a nurse the day before the procedure to give specific eating and drinking instructions.

What happens during a steroid injection?
- First, a nurse will greet and escort you and your child from the waiting room to the prep area for vital signs, health history and pregnancy test if your child is female and has started her cycle. If a MRI is ordered, you will be asked to fill out a metal screening sheet. This will ensure that your child can be safely imaged in MRI.
- A physician or physician assistant will discuss the risks and benefits of the procedure with you and give you the opportunity to ask questions. Following this, we ask that you sign a consent form confirming you understand the risks of the test and agree to have it done.
- The Texas Children's Child Life Department, if necessary, will be present to create a friendly environment.
- Your child will be asked to lie down so that a numbing skin cream can be applied to the skin over the joint being examined which will stay on for at least 20 minutes for optimal results.
- Your child will then be escorted into the Radiology suite. Parents and caregivers over the age of 18 can accompany during the exam.
- The patient will lie down on the x-ray table and will be cleaned with an antiseptic solution. More numbing medicine will be injected. After this, the patient may feel pressure but not pain as we perform the steroid injection.
- A pediatric limited dose x-ray machine or ultrasound will be used to ensure the needle is in the right place before we put in the steroid injection.
- After the steroid injection and saline flush the needle is removed and a band-aid is applied.

Will my child feel anything during the steroid injection?
- The injection of the anesthetic may cause your child some discomfort, but it's minimized through the use of a numbing agent and Child life. Your child may have some mild pain, tenderness and swelling in the joint after the exam.
What are the risks associated with this procedure?

- A joint, tendon sheath or bursal steroid joint injection is considered a low-risk. However, potential complications include:
  - Bleeding
  - Infection
  - Skin dimpling or depigmentation

How long will the effects last?

- The steroid injected into your joint will often relieve your pain for several months. If your discomfort does not get relieved by the steroid injection, then inform your ordering physician because your pain may be originating from a different source and this should be further evaluated.

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