The list below is not intended to be exhaustive. If you have any queries about other pathologies or procedures, please contact us using the contact us form on our website.

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| **Procedure** | **Indications** | **Work up** |
| Joint injections Including but not limited to:SIJCoccyx1st CMC or STT joint Scapholunate jointWristElbow joint and soft tissueACJ, SCJKneeAnkleTarsal, TMT and MTPs | OsteoarthritisRheumatoid flare upCapsulitis Joint pain | Copy of XRAY report if available |
| Hip JointGlenohumeral Joint | OsteoarthritisRheumatoid flare upCapsulitis Joint pain | For **stiff shoulders and for hip joints its important to have an XRAY** first and confirmation of XRAY report |
| Soft tissue injections Including but not limited to:Sub-acromial bursaTenosynovitis i.e.Long head Biceps, Dequervains, EC1-6Infra-patella, pre-patella bursaMedial and lateral Elbow epicondyalgiaGluteal cuff pain | Soft tissue painInflammation | None The preliminary Ultrasound scan should confirm diagnosis |

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| High Volume injectionPatella or Achilles tendinopathy | Persistent tendon pain resistant to rehab | NoneThe preliminary Ultrasound scan should confirm diagnosis |
| Hydro-dilatation of GHJ | Stiff shoulder secondary to capsulitis | **Important to have an XRAY first and confirmation of XRAY report** |
| Barbotage for calcific tendinitis | Calcific tendinitis(Dependant on size and degree of calcification; This is usually cross referenced with XRAY) | **May be required to proceed to barbotage, therefore it is preferable to organise in advance of appointment** |
| Single peripheral Nerve blocks i.e.Suprascapular nerveCarpal tunnel, Radial, Median, Ulnar nerve at forearm/elbow,Superficial Peroneal, Tibial, Sural nerves | Entrapment neuropathies Persistent neural pain | Full diagnostic scan to confirm condition of the nerve**(if weakness or muscle atrophy present consider Spinal origin or Orthopaedic referral?)** |