

## MR Arthrography

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## Dear Patient,

Your doctor has referred you to us for a specialized MRI scan of one of your joints. The conclusive evidence this examination provides is much better after injection of a contrast agent into the joint than without this injection. Contrast agent in the joint facilitates visualization of any pathologies that might often remain hidden otherwise. For example, micro-tears in tendons and cartilage can be detected.

## What happens during the examination

Before the MRI scan, the contrast agent injection takes place in a different room. The reason for this is that the injection is performed by the radiologist in a targeted manner (using an X-ray/fluoroscopy device).

After disinfection of the injection site and sterile draping, the radiologist makes the injection. The needles used are mostly thinner than those used for conventional blood draws. After skin penetration, a local anesthetic is usually administered for local anesthesia. Next, the needle is advanced increment by increment towards the joint. As soon as it reaches the joint, a small amount of X-ray contrast agent is injected. This is done to ensure that the MRI contrast agent can enter the joint with certainty. During the injection of the MRI contrast agent, you may experience a feeling of pressure in the joint.

After the needle is removed, you will be accompanied to the MRI device by the X-ray technician. The MRI scan takes approximately 25 to 30 minutes; it is best if you keep as still as you possible throughout.

## What complications can occur?

- Several hours after the examination, pain might occur in the scanned joint and persist for one day at the most.
- Allergies to intravenous contrast agents occur with a much rarer frequency.
- Rarely, a bruise may form.
- Infections are very rare (probability of less than 1:10,000).

Last name:

First name:

Date of birth:

## Please answer the following questions

Yes

No

■ Do you take blood thinners?

☐☐

■ Are you currently suffering from an infection?

☐☐

I have understood the information given, have answered all questions conscientiously and hereby consent to having the procedure performed. **Naturally, you may ask us questions at any time before and during the procedure.**

Date:

Patient's signature:

Radiologist: