

Musculoskeletal Imaging and Intervention Section Imaging Procedures

Long Head Bicep Injections

Perform a diagnostic shoulder ultrasound if any of the following

1. No prior diagnostic shoulder MRI or US
2. Interval injury since MRI
3. Interval worsening of symptoms since MRI
4. No MRI in last year

If on diagnostic shoulder US there is a partial articular surface, small full thickness RCT, or a biceps tear, do not inject.

Technique

1. Place patient supine with arm at side.
2. Externally rotate arm.
3. Localize biceps tendon in bicipital groove with ultrasound transducer in transverse
4. Mark from lateral aspect of footprint of transducer.
5. Sterilize, drape, and anesthetize locally.
6. Place 22 gauge, 1.5 inch needle in the lateral aspect of the bicipital groove, just lateral to the biceps tendon and deep to the transverse ligament.
7. Inject 2 ml of solution containing 1 ml dexamethasone 10mg/ml and 1ml of 0.5% preservative-free ropivacaine, visualizing distention of the sheath
8. Give pain sheet.