

## **Musculoskeletal Imaging and Intervention Section Imaging Procedures**

### **Piriformis Injection**

#### **INDICATIONS**

Pain in buttock and thigh exacerbated by hip flexion (sitting).

#### **RISKS**

- Allergic reaction to contrast
- Hematoma
- Infection
- Pain
- Transient lower extremity numbness or weakness

#### **MATERIALS**

- C-arm
- 4 x 4 gauze
- Alcohol
- Betadine
- 5 cc syringe
- 10 cc syringe
- Short IV hep lock extension tubing
- 1% buffered lidocaine for local anesthesia
- Omnipaque 300
- 22G spinal needle
- 25G 1 ½" needle
- Steri-drape
- Solution of 2 cc 0.5% Bupivacaine mixed with 1 cc Kenalog

#### **TECHNIQUE**

1. Place patient prone (use the same technique as for SI joint injection initially).
2. With tube straight, mark on skin inferior to SI joint.
3. Angle tube (25°-30°). See figure in SI joint protocol.
4. Anesthetize with 25G 3 ½" needle down to the SI joint by putting the needle nearly straight but with slight cephalad angulation in order to touch the SI joint.
5. Insert a 22G 3 ½" needle along the anesthetized path to the inferior SI joint. Then walk off approximately 1 cm caudad to the SI joint at the same depth as the SI joint. Inject contrast to confirm the position within the muscle fibers oriented obliquely from the sacrum to the ipsilateral hip. If the needle is inserted too deep, it may hit the sciatic nerve.
6. Take film.
7. Inject 1 cc Kenalog mixed with 2 cc 0.5% Bupivacaine.