

PATIENT SAFETY QUESTIONNAIRE – ULTRASOUND MSK INJECTIONS

Please ensure that this is completed for all patients requiring injection prior to booking an appointment.

Patient Name:

Date of Birth:

Examination Details:

Please ask the patient the following:

Any allergies (please circle)

YES (Please list below) NO

.....
.....
.....

Is the patient on Warfarin? (please circle)

YES NO

- If the patient answers YES to either of these questions – DO NOT BOOK – refer the patient to Radiology

Radiology Staff – please carry out the protocol below:

- Refer patient back to the Warfarin Clinic who will advise them if they can or cannot stop taking Warfarin. They will also advise them how long to discontinue Warfarin before the injection if appropriate
- Ask patient to ring and advise you of the outcome
- Patient must bring their INR Card on the day of the examination – INR must be under 1.5 for the injection to be carried out