

# Hand & Wrist for Joint Injection User Guide



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# Hand & Wrist for Joint Injection

Part No: **30031**

An articulated right hand and wrist used for practising soft tissue joint injection for the treatment of injuries and arthritis.

## Skills

- Patient posture and management
- Identifying anatomical landmarks
- Relevance of digital movement for presentation of injection sites
- Injection in 4 specific areas: carpal tunnel, trigger finger/tendon sheath injection, de Quervains sheath, and first metacarpal joint
- Precise placement of needle to avoid median nerve

## Features

- Articulated joints
- Simulates normal anatomical reference points for: carpal tunnel, palmaris longus tendon, distal wrist crease, and tendon to the flexor carpi radialis
- Easy-to-use Feedback Console illuminates:
  - ● when needle is correctly placed in the injection sites
  - ● when metacarpal joint is entered
  - ● if the median nerve is hit
- Supplied with 'No Trace' marker (non-permanent rapidly fading ink) for illustrating underlying anatomical landmarks

## Package supplied

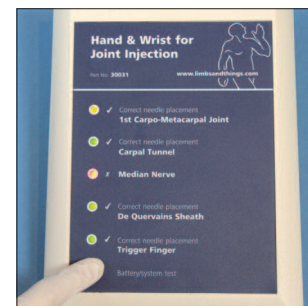
- 1 **'No-Trace' Marker** Part No: **30023**
- 1 **Hand & Wrist Needle Set** Part No: **30092**
- 1 Hand & Wrist for Joint Injection
- 1 Feedback Console with batteries
- 1 *Joint and Soft Tissue Injection* by Dr. Trevor Silver

## Care of products made from latex foam rubber

- Latex foam is a natural product; store away from strong light, preferably in the case provided, to reduce exposure to ozone. Ozone is generated by some electrical equipment including telephones and computers.
- Wash your hands before touching the foam. If the foam is handled after contact with certain metals, eg copper coins, it becomes yellow and discoloured.
- The foam may be washed effectively using any mild soap and rinsed afterwards. 'Vanish'™ soap is very effective. Do not immerse the model in water or allow water to run freely over the surface
- Do not ingest the product and practice normal hygiene after handling the product.

## Battery test procedure

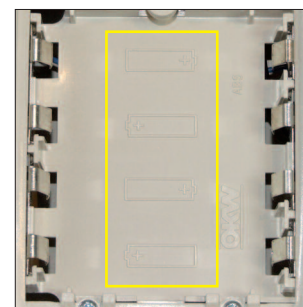
1



Before connecting any electrical leads, firmly press the 'Battery/system test' button on the front panel of the Feedback Console. All the lights should illuminate.

If they do not: check that there are batteries inserted (4x 1.5v AA/ LR6/ AM3/ MN1500). Alkaline batteries are recommended. Observe any safety information printed on the batteries.

2



If batteries are inserted make sure they are the correct way round.

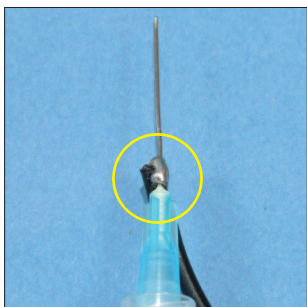
A polarity diagram is moulded into the plastic underneath the batteries. If the batteries are inserted correctly and the lights still do not illuminate, remove them and insert batteries that are known to be working.

If the Console fails to work after carrying out this recommended procedure, it has probably developed a fault and should be returned.

**NOTE**  
**Batteries should be removed from the Feedback Console if the product is not being used for an extended period of time.**

## Connecting the leads

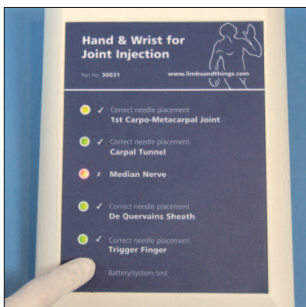
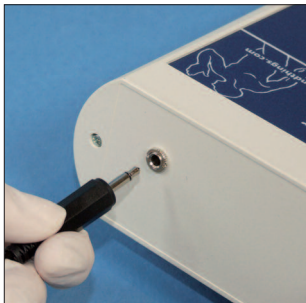
1



Having satisfied out the Battery Test Procedure, ensure that the lead running from the model is plugged into the black socket at the back of the Feedback Console.

Ensure that the electrical contact is securely attached to the needle on the syringe.

2



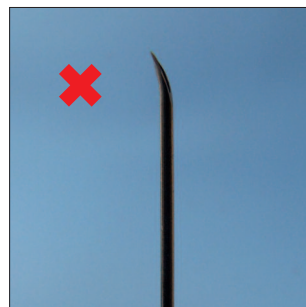
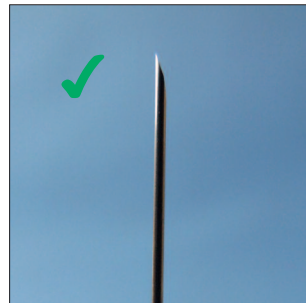
Ensure the lead running from the syringe is plugged into the circular socket at the back of the Feedback Console.

Press the 'Battery/system test' button at the bottom of the front panel of the Feedback Console. All the lights should illuminate.

2

## Injection of the tendon and synovial sheath

1

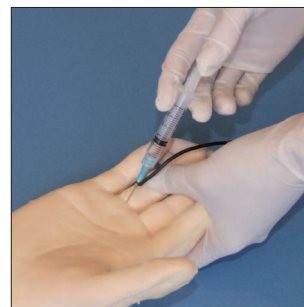


**Before use, check that the needle is not blocked and that the tip of the needle is sharp and straight.**

**Blunt or hooked needles may tear the skin or prevent correct electrical contact.**

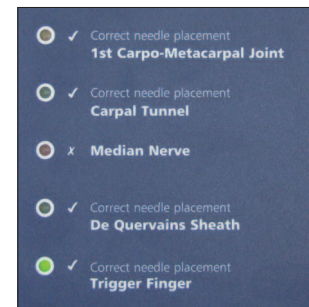
3

2



First draw 1-2 mls of air into the syringe. This will mimic injection fluid.

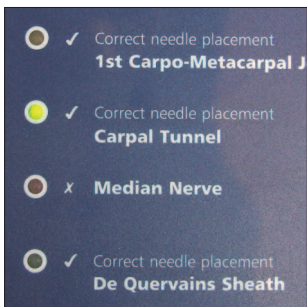
Insert the needle tip into the substance of the tendon; resistance to injection is noted on putting slight pressure on the plunger.



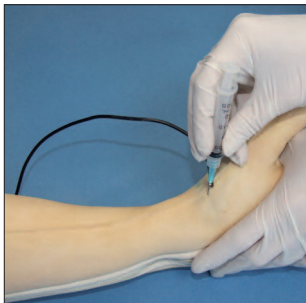
Maintain pressure on the plunger whilst at the same time slowly withdrawing the needle from the tendon.

When resistance to the injection disappears and the green light on the Feedback Console remains illuminated, the needle point is in the synovial sheath. The air in the syringe may now be easily injected, simulating the technique of injecting steroid/local anaesthetic solutions into the tendon sheath. On this model, this technique can be applied to the 'Trigger Finger'.

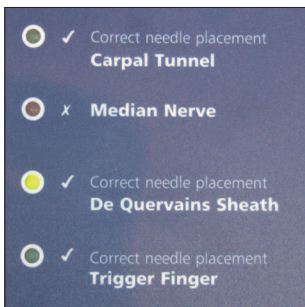
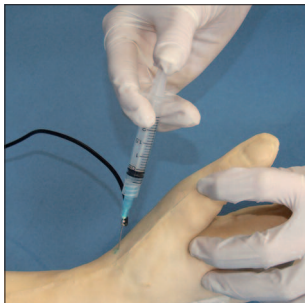
## Other injections



**Carpal Tunnel**



**1st Carpo-Metacarpal Joint**



**De Quervains Sheath**

## Other models available in the range



**Elbow for Joint Injection**

Part No: **30080**



**Shoulder for Joint Injection**

Part No: **30010**



**Knee for Aspiration**

Part No: **70013**