Shoulder Joint

Effective and safe injections technique for management of upper limb tendinopathy and fasciopathy: Recovertendo



Figure 1. Inraarticular Recovertendo injection of the shoulder.



Figure 2. Recovertendo injection of the supraspinatus tendon.



Figure 3. Recovertendo injection into the subscapularis and pectoralis major tendos.







Figure 4. Recovertendo injection of the caracoid process. Many important structures attach here including: coracoacromial, coraco-clavicular ligaments, and the long head of the biceps, coraco-brachialis and pectoralis minor tendons



Figure 5. Recovertendo injection technique for the posterior shoulder. Injections of the posterior shoulder treat injuries to the infraspinatus and teres minor tendons.



Figure 6. Recovertendo injection into and around the acromioclavicular joint.





Elbow Joint

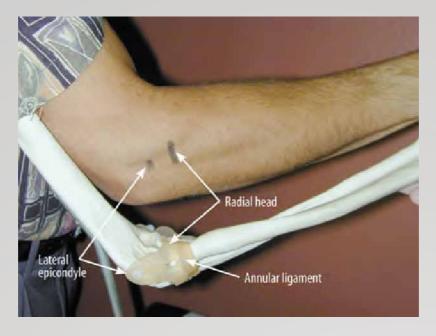


Figure 1a. Lateral view of elbow.

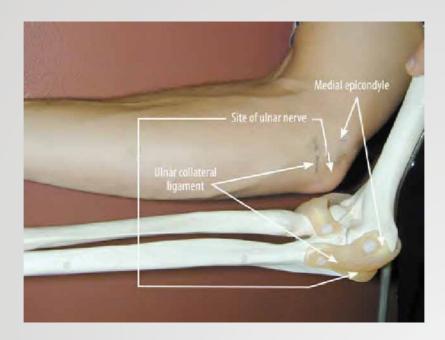


Figure 1b. Medial view of elbow.









Figure 2. Injection to supra-condylar ridge.



Figure 3. Injection of the medial epicondyle.





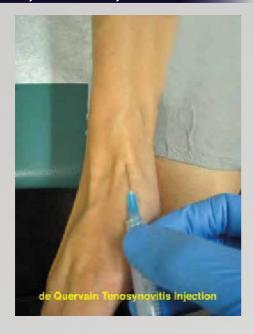
Hand Region









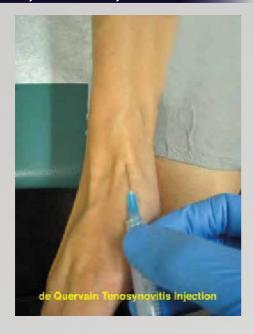


Put needle between the abductor pollicis longus and extensory pollicis brevis tendon









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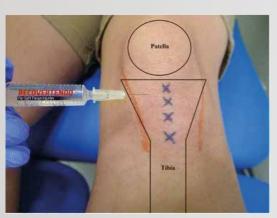
Effective and safe injections technique for management of lower limb tendinopathy and fasciopathy: Recovertendo



Posterior photograph of right lower leg showing injection points most commonly used. For management of Achilles tendinopathy. The 'X' markings represent the anteromedial, posterior midline and anterolateral margins of the tendon, with orange lines demarking the Achilles tendon. Red point are safe for peritendinous and intratendinous injection.



Plantar photograph of left foot illustrating the injection sites used. For management of plantar faciopathy. The 'X' markings represents the medial heel site and plantar fascia used for the injections, with the orange lines demarking the medial band of the plantar fascia



Anteroposterior photograph of knee illustrating injection points marked 'X' starting over the most distal area of pain on the tibial tuberosity and moving proximally in 1-cm increments. The orange lines represent the attachment of the patellar tendon from the patella to the tuberosity or its fragments. 'X' marks are safe for peritendinous and intratendinous injection.



