

Myelography

A myelogram is an X-ray examination of the spine after the injection of a dye-like contrast material to outline the spinal canal and nerves. It is commonly performed to evaluate back pain, radiculopathy, spinal stenosis, and disc herniation.

HOW SHOULD I PREPARE FOR THE PROCEDURE?

1. Drink plenty of clear liquids but no solid food for 4 hours before the procedure.
2. Myelography is generally not performed during pregnancy because of the potential risk of embryo/fetal injury. Advise the technologist if you are, or may be, pregnant.
3. Discontinue **Coumadin (Warfarin)**, **Plavix (Clopidogrel)**, **Ticlid (Ticlopidine)**, and **Pletal (Cilostazol)** with permission from the prescribing physician for 5 days prior to the procedure. If you take Coumadin (Warfarin), a Prothrombin time (PT) and INR will be obtained here at the clinic before the myelogram.
4. Discontinue low-molecular weight heparin therapy with **Lovenox (Enoxaparin)**, **Fragmin (Dalteparin)**, **Normiflo (Ardeparin)**, or **Orgaran (Danaparoid)** with permission from the prescribing physician for 24 hours prior to the myelogram.
5. **Arrange for someone to drive you home after the procedure.**

HOW IS THE INJECTION PERFORMED?

Prior to the injection, your skin is cleansed with antiseptic soap and numbed with local anesthetic. The physician uses fluoroscopy to accurately place a needle in the spinal canal. A small amount of fluid may be removed for further study. The contrast material is then injected and the needle removed. Following the injection, several X-ray images will be made. The procedure typically takes 20-30 minutes.

WHAT SHOULD I DO AFTER THE MYELOGRAM?

1. Drink plenty of clear liquids – at least 8 oz. every hour on the day of the procedure.
2. Resume a regular diet and any medications you routinely take (including pain medications).
3. Avoid consumption of alcohol for 24 hours.
4. Lie flat with your head slightly elevated for 8 hours.
5. No driving the day of the procedure.
6. Do not engage in strenuous work, exercise, physical therapy or lifting for 48 hours.

COMMON SIDE EFFECTS:

1. **Headache:** This is the most common complication and occurs in about 20% of patients. These usually resolve within 2-3 days. Lie flat in bed, increase your fluid intake, and take your usual medications as directed by your physician. A blood patch is occasionally needed.
2. **Increased pain:** A temporary increase in pain for a day or two following your procedure is not unusual. Take your usual pain medication prescribed by your physician.

SERIOUS COMPLICATIONS ARE RARE BUT POTENTIALLY INCLUDE:

1. **Infection:** Severe infections, such as meningitis, are rare.
2. **Bleeding:** Bleeding is a rare complication and is more common in patients taking anticoagulants, such as Coumadin/Warfarin, Lovenox, Plavix and Ticlid.
3. **Nerve damage:** Extremely rare but can occur from needle trauma, infection, and bleeding.
4. **Seizures:** Extremely rare.
5. **Allergic reaction:** Allergic drug reactions are uncommon.

CONTACT OUR OFFICE AT 615-356-3999 FOR THE FOLLOWING SYMPTOMS:

1. Fever greater than 100°.
2. Headache that is unresolved with medication, bed rest, and fluids after 2-3 days.
3. Increasing pain, swelling or redness at the injection site.
4. Difficulty walking or profound weakness of the arms or legs.

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