Fluoroscopy Protocols

**Myelogram**

**Follow protocols set by each Neuro Radiologist see Binder at site.**
**Assist the Neuro Radiologist with the exam.**

**Scheduling and Prep:**
*Patient should be screened ahead of time by the paramedics*

**Supplies:**
*Myelogram tray*  *Sterile gloves*  *Betadine solution (warmed)*
*Sodium Bicarbonate (optional)*

**Contrast:** *(Per Radiologists’ preference)* or:
- Omnipaque 180 for small Lumbar patients
- Omnipaque 240 for most Lumbar and Thoracic patients
- Omnipaque 300 for Cervical patients
*Contrast should be kept in a warmer*

**Room Set Up:**
*Open sterile tray*  *Remove tower drapes*
*Have gloves opened and supplies available*
*Patient should be prone*  *Expose lower back and shave is necessary*
*Have shoulder supports attached for cervical exams*
*Place an “L” or “R” marker on underside of fluoro tower*

**Procedure:**
*Assist Neuro Radiologist with the exam*
*Do overheads per radiologist-Post CT upright Cervical Flexion and Extensions if requested by referring physician or Radiologist*
*Patient should be taken by stretcher for a Post Myelogram CT*

**Spot Images:**
*Needle placement image*
*Do not allow the patient to stand up between myelogram and CT unless otherwise instructed by the radiologist*
*After the myelogram: Keep patient flat to keep the contrast in place for the CT.*
*The head of the stretcher may be slightly elevated for lumbar myelograms.*
*Document contrast type, lot number, expiration date, and amount used, puncture time, needle size used, and location of injection on the contrast form*
*Patient should remain at the office for 2 hours from puncture time.*

Reviewed and Revised February 13, 2018