**Fluoroscopy Protocols**

**Myelogram**

**Follow protocols set by each Neuro Radiologist - see Binder at site or on the Portal page under Operations, Fluoro Icon, Neuro Tray Set Up, Preferences.**

**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) Hebiclens - if the patient is allergic to Betadine soap *Sodium Bicarbonate (optional) *Anatomical Side Marker

**Available Contrast:** *(Per Radiologists’ preference)*

- Omnipaque 240 for most Lumbar and Thoracic patients
- Omnipaque 300 for most Cervical patients and multi-level myelograms

*(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” anatomical side marker on underside of Fluoro tower
*Set up supplies and prep or position patient per the Radiologists Preferences

*Place a pillow or bolster under patient’s feet for comfort

**Procedure:**

*Assist Neuro Radiologist with the exam*

*Do overheads per radiologist’s preferences: X-Table Lateral Lumbar, X-Table Lateral Cervical, X-Table Swimmers, Lateral Thoracic spine, AP Thoracic spine, after CT- upright cervical Flexion and Extension Views, if requested by referring physician or Radiologist

*Log - roll patient 3 times for Lumbers and thoracic exams if schedule Allows, prior to the CT. Do not roll cervical exams.

*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 Cervical myelograms: 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-In “Exam Notes”
*Charge for the Type and amount of contrast used
*Document in Tech notes, the amount of contrast used, name of contrast used and the route of administration (Intrathecal)
*Inform Paramedics of the puncture time (This is the time that the Radiologist actually has the needle placed and is ready to inject the contrast)
*Patient should remain at the office for 2 hours from the puncture time.

**Care should be taken to minimize exposure to the patient and the imaging team.