



Contraindication Medications for Intrathecal Contrast Agents

Drugs that lower the seizure threshold, especially phenothiazine derivatives, including those used for antihistamine properties are not recommended for use with intrathecal contrast agents. Others include MAO inhibitors, tricyclic antidepressants, CNS depressants, CNS stimulants, psychoactive drugs prescribed as analeptics, major tranquilizers, or antipsychotic drugs.

Advise the patient to discontinue use of these drugs 72 hours prior to radiological procedures involving the use of intrathecal contrast (myelography, cisternography, ventriculography). If the drugs cannot be discontinued, please call the site where the exam is to be performed for special instructions. **The medications below are examples. There may be other medications for each category that are not listed.**

Tranquilizers/Anti-Psychotics

Compazine- Prochlorperazine
 Dartal- Thiopropazate
 Haldol- Haloperidol
 Inapsine- Droperidol
 Largon- Propiomazine
 Levoprome- Methotrimeprazine
 Loxitane- Loxapine
 Mellaril- Thioridazine
 Moban- Molidone
 Navane- Thiothixene
 Orap- Pimozide
 Parsidol- Ethopropazine
 Phenergan- Promethazine
 Prokazine- Carphenazine
 Prolixin, Permitil- Fluphenazine
 Quidé- Piperacetazine
 Repoise- Butaperazine
 Serentil- Mesoridazine
 Sparine- Promazine
 Stelazine- Trifluoperazine
 Tacaryl- Methdilazine
 Taractan- Chlorprothixene
 Temaril- Trimeprazine
 Thorazine- Chlorpromazine
 Tigan- Trimethobenzamide
 Tindal- Acetophenazine
 Torecan- Thiethylperazine
 Trilafon- Perphenazine
 Vesprin- Trifluopromazine

Antidepressants/Anti-Anxiety

Adapin, Sinequan- Doxepin
 Anafranil, Clomipramine
 Asendin- Amoxapine
 Atarax, Vistral- Hydroxyzine
 Buspar- Buspirone
 Deprol- Meprobamate
 Desyrel- Trazodone
 Elavil, Endep- Amitriptyline
 Ludiomil- Maprotiline
 Miltown- Meprobamate
 Norpramin, Pertofane- Desipramine
 Pamelor, Aventyl- Nortriptyline
 Surmontil- Trimipramine

Tofranil- Imipramine
 Trancopyl- Chlormezanone
 Vivactil- Protriptyline

MAO Inhibitors

Furoxone- Furazolidone
 Marplan- Isocarboxazid
 Matulane- Procarbazine
 Eutonyl-Pargyline
 Nardil-Phenelzine
 Parnate-Tranycypromine

CNS Stimulants

Aminophylline- Aminophylline
 Aromatic Ammonia- Ammonia
 Benzedrine- Amphetamine
 Coramine- Nikethamide
 Dexedrine- Dextroamphetamine
 Didrex- Benzphetamine
 Dopram- Doxapram
 Lonamin- Phentermine
 Methedrine- Methamphetamine
 Metrazol- Pentylentetrazol
 Plegine- Phendimetrazine
 Pondimin- Fenfluramine
 Preludin- Phenmetrazine
 Pre-Sate- Phentermine
 Ritalin- Methylphenidate
 Sanorex- Mazindol
 Tenuate, Tepanil- Diethylpropion
 Voranil- Clortermine

Muscle Relaxers

Flexeril- Cyclobenzaprine Hydrochloride
 Zanaflex- Tizanidine

Anticoagulants

Aggrenox (discontinue 3 days prior to exam)
 Aspirin (discontinue 3 days prior to exam)
 *Coumadin- Warfarin (discontinue 5 days prior to exam)
 Effient, (Prasugrel) (discontinue 7 days prior to exam)

Heparin (*consult with Radiologist*)
 Lovenox, (Enoxaparin) (*consult with Radiologist*)
 Plavix, Clopidogrel (discontinue 5 days prior to exam)
 Pradaxa, Dabigatran (discontinue 5 days prior to exam)
 Xarelto (Rivaroxaban) (*consult with Radiologist*)
 Brilinta (*contact Referring and consult with Radiologist*)
 (Discontinue 5 days prior to exam)

****Pt's on Coumadin must have PT/INR labs drawn and STAT faxed to site of exam.***
• AM exams - labs must be drawn the evening prior to exam.
• PM exams - labs must be drawn the morning of exam.
• Lab---PT / INR range 1.2 max.
• If questions regarding any anticoagulants, consult with Radiologist

Reviewed and Revised March 15, 2018
Reviewed March 11, 2019 Reviewed
March 13, 2020 Reviewed March 18,
2022