

PROTOCOL FOR: Myelography: Care of the Patient Undergoing

DESIRED PATIENT

- OUTCOMES:
1. The patient will receive appropriate medication(s), safely administered during the periprocedural period.
 2. The patient demonstrates and/or reports adequate pain control throughout the periprocedural period.
 3. The patient demonstrates knowledge of the expected responses to a myelogram, Patient verbalizes decreased anxiety; ability to cope; and understanding procedure, sequence of events, and that questions have been answered.
 4. The patient demonstrates knowledge of post-discharge pain management

CLINICAL
ASSESSMENT

- AND CARE:
1. Pre-procedure care per protocol. Reinforce teaching that this X-ray test is performed by a radiologist to detect abnormalities of the spine, spinal cord, or surrounding structures for suspected compression. Explain that myelography is used when MRI or CT imaging do not provide enough information. Emphasize that patients who are unable to lie still or cooperate with positioning may be unable to have this examination. Advise the patient to increase their fluid intake the day before the procedure.
 2. Be aware that patients with a history of chronic or recurrent headache are more likely to develop a headache after a myelogram. Screen for history of seizures and/or of migraine headaches, frequent headaches, sinus headaches or a headache with a past myelogram. If positive, report this to Radiologist and proceed with pre-treatment per orders.
 3. Intra-procedure care per protocol. Explain about site prep, local anesthetic injection, and specific information about myelography, as needed.
 4. a. Post-procedure care per protocol. Emphasize that extra fluids are encouraged, to help eliminate the contrast material and prevent headaches. A regular diet and routine medications may be resumed. Strenuous physical activity, especially any which involve bending over, may be discouraged for one or two days. The doctor should be notified if a fever, excessive nausea and vomiting, severe headache, or stiff neck develops.

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b. Post-procedure headache: Patient should be instructed that headache is a common complication of myelography, beginning several hours to several days after the examination. Clarify that the cause is thought to be changes in cerebrospinal fluid pressure, not a reaction to the dye. Emphasize that the headache may be mild and easily alleviated with rest and increased fluids. Explain that sometimes nonprescription medicine works for some patients, although the headache may be more severe for others and require stronger medication or other measures for relief.

APPROVAL: Nursing Standards Committee

EFFECTIVE DATE: 10/92

REVISION DATES: 10/94, 1/98, 8/00, 10/03