

UW Medicine

脊髓造影检查

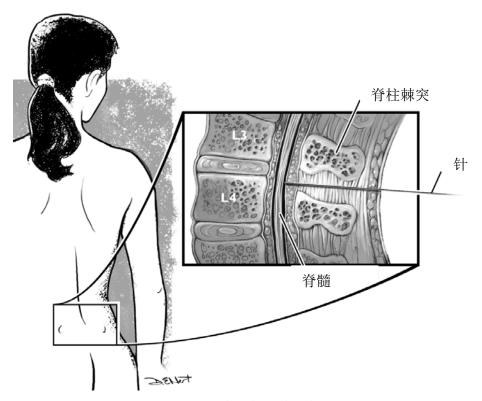
准备和预期

脊髓造影检查是用来检查脊髓,椎管和脊神经根的问题。本指南解释该如何 为该检查做准备,它是如何进行的,它是如何完成的,检查时能预期些什 么,和如何获得你的结果。

什么是脊髓造影?

脊髓造影是检查脊椎和其周围的空间(蛛网膜下空间)的 X 光检查。其提供清晰的脊髓,椎管和脊神经根成像。这些成像显示这些组织是否因疾病或创伤而造成损伤。

脊髓造影通常在其他检查—比如电脑断层扫描(CT)或核磁共振(MRI) 无法完全解释我们对你的健康问题的疑问时进行的。脊髓造影后你将接受 电脑断层扫描(CT)。



针刺入脊椎管的脊椎横切图

我该如何准备此检查?

- 如果你在服用稀血药,如 Coumadin (warfarin), Plavix,或 Lovenox,请跟你的家庭医生商讨在检查前停服和检查后恢复服用。
- 如果你在服用糖尿病药或胰岛素,咨询你的家庭医生商讨在你不能饮食期间的药量更改。请在抵达前测量你的血糖指数。
- 你过你在服用肌肉放松剂或抗抑郁,呕吐,ADHA药物,请跟你的家庭医生商讨在检查前48小时和检查后24小时停服该药物。
- 请安排检查后有一位负责的成年人带你回家。为了你的安全,你需等到 脊髓造影检查第二天后才能开车。如果你乘坐公车或出租车回家,你必 须要有一位负责的成年人陪伴你。

检查当天

- 确保检查后有一位负责的成年人带你回家。
- **检查前2小时**: 不要吃或喝任何东西。如果你需要服用药物,请用一小口水送服。
- 来检查时请携带你的药物清单。
- 检查当天你可能需要抽血。

检查是如何进行的?

蛛网膜下腔是椎管,脊髓,和神经根周围充满液体的区域。在这个区域的 液体叫脑脊液。此液体缓冲和保护脊髓。

脊髓造影检查,是一种叫做造影剂的物质通过针注射进你的蛛网膜下腔。造影剂含有碘。它能显示在正常 **X** 光检查时无法显示的脊椎部分。然后,在造影剂流入蛛网膜下腔时拍摄 **X** 光。

脊髓造影检查时你将会躺在床上。这张床可以倾斜来帮助造影剂在脊髓和 椎管神经根周围上下流动。

我能期望些什么?

- 脊髓造影可能在放射科完成。
- 你将俯卧在X光枱上。一种叫透视的X光线会将你的脊椎成像投射在屏幕上。
- 放射科医生会清洁你的皮肤,并在针头插入的地方注射局部麻醉剂。
- 大多数情况下, 你会被要求俯卧, 腹部垫一个枕头。你需要保持这个姿势大约45分钟。

- 如果需要,少量的脑脊液将被提取用于实验室研究。
- 造影剂将被注入,x光枱也将慢慢倾斜。当桌子倾斜时,你将被要求尽可能躺着不动。脚踏板和皮带或支架可以防止你在桌子上滑动。
- 在透视检查中将显示出造影剂的流动。当你面朝下躺着的时候会拍x光 片。
- 检查将集中在你感觉有症状的背部或颈部区域。
- 如果需要的话,在造影剂仍在你的椎管内时立即在脊髓造影后进行CT扫描。这种混合成像研究被称为CT脊髓造影。
- 骨髓造影检查通常需要30到60分钟。CT扫描将再增加5到10分钟的检查时间。
- 在做了骨髓造影后,你将在医院的暂留区停留4到6个小时。护士会在这段时间监视你的情况。之后,你就可以回家了。

检查时我会有什么感觉?

- 当局部麻醉注射时, 你会感到短暂的刺痛。
- 当脊椎针插入时,你会感到轻微的压力。针扎进去的时候,你可能会不时地感到一阵剧痛。
- 当造影剂注入时,你可能会感到一些压力或热流。注射后可能会头痛、 脸红或恶心。

检查后会怎样?

- 8个小时:
 - 在家静养。
 - 不能弯腰。
 - 可以在椅子上坐一会儿和去厕所。
 - 如果你躺在床上,床头需要垫高至少30度角。
 - 你可能会有些头痛。你可以吃 acetaminophen (Tylenol) 止痛。
- **24个小时**:喝至少8杯(每杯8安士)的液体,比如果汁,水或运动饮料。
- **2天**:不可以泡澡,蹲热浴或游泳。身体浸水将增加感染的风险。可以淋浴。
- 3天:
 - 不可以搬超过10磅的东西。(1加仑牛奶重8磅以上)

- 避免做任何让你呼吸困难或心跳加速的事情。
- 只要你不需要做任何繁重的工作,你可以在检查后的第二天复工。

谁来解释结果和我如何得到结果

接受过解释骨髓造影训练的放射科医生会检查你的检查结果,并向你的医生提交一份报告。你的医生会告知你检查结果。你也可以在 eCare 上的检查结果页面上阅读你的结果。你和你的医生将根据需要决定下一步,例如对某个问题的治疗。

疑问?

你的问题很重要。如果你有任 何问题或疑虑,请联系你的医 生。

- □ UWMC 成像检查部门: 206.598.6200
- □ Harborview 成像检查部 门: 206.744.3105

UW Medicine

Myelogram

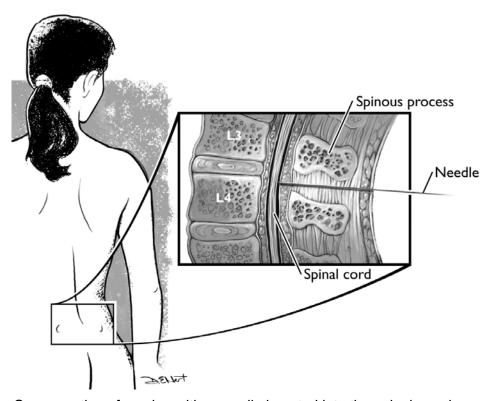
How to prepare and what to expect

A myelogram is an exam used to find problems of the spinal cord, the spinal canal, and the spinal nerve roots. This handout explains how to prepare for the exam, how it works, how it is done, what to expect during the exam, and how to get your results.

What is a myelogram?

A myelogram is an X-ray exam of the spinal cord and the space around it (the subarachnoid space). It provides detailed pictures of the spinal cord, spinal canal, and spinal nerve roots. The pictures show if there is damage in these tissues caused by disease or trauma.

A myelogram is often done when other tests – such as *computed* tomography (CT) scans or magnetic resonance imaging (MRI) – have not answered all our questions about your health issue. Your myelogram will be followed by a CT scan.



Cross-section of a spine with a needle inserted into the spinal canal.

How should I prepare for the exam?

- If you take blood-thinning medicine such as Coumadin (warfarin), Plavix, or Lovenox, talk with your primary care provider (PCP) about stopping it before your exam and restarting it after the exam.
- If you take insulin or pills for diabetes, check with your PCP about changing your dose during the time you are not allowed to eat. Please check your glucose level before you arrive for your exam.
- If you take muscle relaxants or medicines for depression, nausea, or ADHD, talk with your PCP about not taking the medicine for 48 hours before and 24 hours after your exam.
- Plan to have a responsible adult drive you home after your exam. For your safety, you may not drive until the day after your myelogram. If you take a bus or taxi home, you must have a responsible adult ride with you.

On the Day of Your Exam

- Make sure a responsible adult is available to drive you home after your exam.
- **Starting 6 hours before your exam:** Do **not** eat anything. You may have clear fluids such as water or tea; grape, apple, or cranberry juice; and Jell-O and popsicles.
- **Starting 2 hours before your exam:** Do **not** drink anything. If you need to take medicines, take them with only a small sip of water.
- Bring a list of your medicines with you when you come for your exam.
- You may need to have blood work done on the day of your exam.

How does the exam work?

The subarachnoid space is a fluid-filled area around the spinal canal, the spinal cord and nerve roots. The fluid in this space is called *cerebrospinal fluid*. This fluid cushions and protects the spinal cord.

For a myelogram, a substance called *contrast* is injected through a needle that is placed in your subarachnoid space. The contrast contains iodine. It outlines parts of the spine that usually cannot be seen on normal X-rays. X-rays are then taken as the contrast flows into the space.

You will be lying on a table for your myelogram. This table can be tilted to make the contrast run up and down your spine and around the nerve roots in the spinal cord.

What can I expect?

- A myelogram may be done in the Radiology department.
- You will lie face down on the X-ray table. A type of X-ray called *fluoroscopy* will project pictures of your spine onto a screen.
- The radiologist will clean your skin and inject a *local anesthetic* (numbing medicine) where a needle will be inserted.
- Most times, you will be asked to lie on your stomach with a pillow under your abdomen. You will need to stay in this position for about 45 minutes.
- If needed, a small amount of cerebrospinal fluid will be withdrawn for lab studies.
- Contrast material will be injected and the X-ray table will be slowly tilted. You will be asked to lie as still as you can while the table is tilted. A footrest and straps or supports will keep you from sliding on the table.
- The flow of contrast will show on the fluoroscopy. X-rays are taken while you are lying face down.
- The exam will focus on the area of your back or neck where you are feeling symptoms.
- If needed, a CT scan may be done right after your myelogram, while the contrast is still in your spinal canal. This blend of imaging studies is known as a *CT myelogram*.
- A myelogram usually takes 30 to 60 minutes. The CT scan adds another 5 to 10 minutes to the total exam time.
- After the myelogram, you will go to a short-stay area in the hospital for about 4 to 6 hours. Nurses will monitor you during this time. After that, you may go home.

What will I feel during the exam?

- You will feel a brief sting when local anesthetic is injected.
- You will feel slight pressure as the spinal needle is inserted. You may feel a sharp pain from time to time as the needle is placed.
- When the contrast is injected, you may feel some pressure or warmth. You may have a headache, flushing, or nausea after the injection.

What can I expect after the exam?

For 8 hours:

- Rest quietly at home.
- You can sit in a chair for short periods and get up to use the bathroom during this time.
- If you lie in bed, have the head of the bed raised at least 30 degrees.
- Do **not** bend over during this time.
- You may have a headache. You may take acetaminophen (Tylenol) for pain.
- **For 24 hours:** Drink at least 8 glasses (8 ounces each) of fluid such as juice, water, or a sports drink.
- **For 2 days:** Do **not** take a bath, sit in a hot tub, or go swimming. Soaking your body in water increases the risk of infection. It is OK to shower.

For 3 days:

- Do **not** lift anything that weighs more than 10 pounds. (A gallon of milk weighs more than 8 pounds.)
- Avoid doing anything that makes you breathe harder or makes your heart beat faster.
- You may return to work the day after your exam, as long as you do not need to do any heavy lifting.

Who interprets the results and how do I get them?

A radiologist trained to interpret myelograms will review your exam results and send a report to your provider who referred you for this exam. Your own provider will talk with you about the results of your scan. You may also read your results on your eCare Results page.

You and your provider will decide the next step, such as treatment for a problem, as needed.

Questions?

Your questions are important. Call your doctor or healthcare provider if you have questions or concerns.

- UWMC Imaging Services: 206.598.6200
- ☐ Harborview Imaging Services: 206.744.3105