## Hampton Roads Radiology Associates

## **Patient Information**

## **Diagnostic Cervical Discogram**

Your referring physician has requested that you have a diagnostic cervical discogram. The following is a description of the procedure and potential complications, to better enable you to give informed consent prior to the procedure.

A cervical discogram is an invasive procedure with some uncommon risks, so you will need to give informed consent. After local anesthesia, fluoroscopic (x-ray) guidance will be used to place needle(s) into the cervical spine disc(s) to be studied. These needles are placed from the front of your neck with you lying on your back. The discs will be individually studied by injecting contrast (x-ray dye), putting the discs under pressure individually. The appearance of the discs on the x-ray (fluoroscopic) image and your response to the injection will be monitored.

A discogram is the ONLY known way to study an individual disc. We will be trying to decide whether one or two of your discs are potential sources of the pain for which you went to your spine surgeon and because of which you are considering surgery. We are looking for the pain that you present with and will discuss your presenting pain extensively with you prior to the procedure. Because we are looking for your pain, we can not give any pain medication or sedative prior to the procedure. If you do not have oral pain medication available after discharge, a prescription for a 1 day supply of oral medication may be written for you by the performing physician at your discharge. Typically, 3 discs are studied but more may be studied. A CT may be done after the procedure and as long as no IM or IV pain meds are given, you can be discharged home immediately after the CT.

Most complications of cervical discograms are uncommon and the procedure is very safe. You need to know the potential complications which include:

- 1. BLEEDING. As with all needle procedures, bleeding can occur. As long as you have no bleeding tendency and are not on any blood thinners such as Coumadin, bleeding complications are extremely rare. However, patients have had to undergo emergency surgery to relieve pressure on the nerve roots and spinal cord because of bleeding after needle procedures like discograms.
- 2. INFECTION. Any needle passing through the skin can introduce an infection which in discogram would be a discitis. This is an extremely painful condition and may occur in up to 1% of disc spaces studied. In general, you will receive IV antibiotics prior to the procedure and sterile technique will be used. If it does occur, it may take months after the procedure to present. It is treatable by IV antibiotics but typically leads to fusion of the disc and may even require surgery.
- 3. INJURY TO ADJACENT STRUCTURES. The carotid artery, jugular vein, thyroid gland, pharynx and esophagus are all adjacent to the spine and may be punctured by the needle that is placed into the disc spaces. These structures are pushed aside by the radiologist but could possibly be injured. The needle is small and the risk of injury is very low.

If you have any questions, please feel free to ask the physician performing the procedure prior to signing the consent form.