Patient Guide: SPINAL PUNCTURE

What is a Spinal Puncture?

A spinal puncture, also called a spinal tap, is a procedure in which the fluid surrounding the spinal cord (called the cerebrospinal fluid or CSF) is withdrawn through a needle and examined in a laboratory. The spinal cord runs through most of your spine, and carries messages between your brain and the rest of your body. A lumbar puncture is done near the base of your spine.

Why should I have a Spinal Puncture?

A spinal puncture may be used to look for problems in your brain, spinal cord, and related structures. Testing the CSF can help in the diagnosis of disorders of the central nervous system that may involve the brain, spinal cord or their coverings (meninges). The CSF contains sugar, proteins, and other substances found in the blood. When the CSF is examined in the laboratory, the following are evaluated:

- The number and types of white blood cells.
- The level of sugar (glucose).
- The types and levels of proteins.
- The presence of bacteria, fungi or abnormal cells.

Reference based on 2006 American Radiology Nurses Association guidelines
Is it Safe?

Like all invasive procedures, complications and side effects may occur. These will be explained to you in detail by the radiologist before you give your consent. The most common side effect of a spinal puncture is a spinal headache (one that worsens with sitting or standing). The risk of infection is extremely low.

What will happen during the procedure?

Upon arriving to the imaging department, you will meet the staff that will be with you during your procedure. You will have 1-2 technologists specially trained in the area where your procedure will be done to assist you and the radiologist during the procedure. The radiologist will explain the procedure, including the benefits and the risks, and then obtain a written consent after all your questions have been answered.

You will either lie on your side with your knees drawn into your chest (fetal position) or you may be asked to sit bent forward, with your chin down. Your low back will be wiped with a cleanser and then a local anesthetic (numbing medication) is put into the skin. Once the area is numb, the radiologist will insert a sterile needle into the sac that contains the spinal fluid. You may feel a pressure sensation, but minimal discomfort. After the spinal fluid is withdrawn, a small bandage will then be placed over the puncture site and you may be asked to lie still briefly before you leave.

What will happen after the procedure?

You will need to lie down for the remainder of the day using one pillow. When you are able to leave, be sure to have someone drive you home. Lie down flat in bed or take it easy, as advised by the doctor. Drink plenty of water. If you get a headache, lie down flat. You may also want to take an over-the-counter pain reliever. The day after your lumbar puncture, you can remove your bandage.

How will I learn the results?

Immediately after the procedure, the fluid is sent to the pathologist for analysis if requested by the referring doctor. Some initial results may be available to your doctor within 24 hours, but for the complete analysis results it will usually take 3 days. Your
doctor will get the results as soon as they are available and can relay them to you. You can make your follow-up appointment with your doctor if necessary based on this information.

What if I have other questions?

*If you have any questions, concerns, or need to reschedule your appointment, you may call 310-784-6320 M-F from 8:00 am - 4:30 pm and speak to an Imaging RN.*