

About Your Lumbar Puncture

What is it?

A lumbar puncture (spinal tap) is a procedure done to your low back. During the procedure, a needle is put through through the skin of your back and into your spinal canal (the area around your spinal cord). The doctor uses the needle to take a sample of the fluid that surrounds your brain and spinal cord (called the cerebrospinal fluid or CSF). This is the fluid that protects your brain and spinal cord from harm.

Why is it done?

Lumbar punctures are done to try and help treat you. The information we get from the fluid sample will help us figure out why you've been having the problems you've been having.

How's it done?

At your appointment, this is what you can expect:

- Your neurologist (brain doctor) will be there. Nurses and other members of the healthcare team will also be there to help.
- In the procedure room, we'll first have you sit or lie down in a position that lets us easily reach your back. You'll either be on your side in a fetal position or sitting down while your bend forward.
- We'll clean your back with a special cleansing solution.
- The doctor will put numbing medicine (called anesthetic) into your lower back with a needle. This will help keep you from having pain during the puncture.
- The doctor will then use a hollow needle to take the sample of fluid they need.
- When the doctor has their sample, they'll take the needle out.
- We'll clean your back off, then have you lie down for a short time before you leave.

Your doctor may use x-ray technology to help them do the spinal tap. This type of spinal tap is called "fluoroscopy-guided." Everything else about the procedure would be the same.

Are there risks?

Most people have no problems with a lumbar puncture. But there are some risks, including:

- slight pain or soreness in the lower back
- a headache that starts after the spinal tap and lasts anywhere from a few hours to several days
- bleeding and infection
- nerve damage in the spinal column, especially if you move during the test
- brain herniation and death, which can happen if you have a mass in your brain, like a tumor or abscess.

Will it hurt?

We will put numbing medicine into your back to help keep you from feeling pain. You may still have some slight pain or feel pressure during the puncture.

How to I get ready for it?

- Drink a lot of water before your appointment. This will lower the chance that you'll get a headache after.
- Most of the time, you'll need to stop taking all blood thinners before the puncture.
 - If you take Aspirin, stop taking it at least 48 hours before the puncture.
 - If you take Clopidogrel (Plavix), stop taking it at least 48 hours before the puncture.
 - If you take Warfarin (Coumadin), talk with the doctor who prescribed it for you about when it's safe for you to stop taking it before the puncture.
 - If you take another type of blood thinner, talk with us about whether or not you need to stop taking it before your puncture.
- Unless we tell you something different, you can eat like normal and take all your other medicines (except blood thinners) before your procedure.
- Make sure you tell us about all the medicines you take.