



Questions and Answers for Health Care Professionals

How do I refer a patient for consideration of vertebroplasty at UW?

Please call our radiology scheduling system at 608-263-XRAY (263-9729) and select option 4, musculoskeletal injections. A scheduler will obtain the relevant information and deliver it to the Vertebroplasty service personnel. We will return your call as soon as possible for further discussion.

What if I just want some information?

You can still call scheduling as above. Alternatively, you can call our Program Coordinator, Brian Yaucher, at 608-263-6871. He is available Tuesdays, Wednesdays, and Fridays. You may also contact one of the four radiologists who perform vertebroplasty:

Donna Blankenbaker	608-265-8601
James Choi	608-265-2762
Kirkland Davis	608-265-4482
Michael Tuite	608-263-8343

Who is a candidate for this procedure?

- Patients with painful, non-healing vertebral fractures due to osteoporosis
- Patients with painful vertebral infiltration by tumors, whether fractured or not

Who is not a candidate for this procedure?

- Patients with acute fractures from recent severe trauma, such as a motor vehicle collision
- Patients with other causes for their back pain, such as disc herniations or spinal stenosis

What are the contraindications?

- Absolute contraindications are uncorrected coagulopathy, including mandatory medications and infection.
- Relative contraindications include the inability to lie prone, severe emphysema, and retropulsion of fracture fragments into the spinal canal.

Who performs these procedures at the University of Wisconsin Hospital and Clinics?

Four of the musculoskeletal radiologists at UW perform vertebroplasty. These include Donna Blankenbaker, James Choi, Kirkland Davis, and Michael Tuite. Two of these physicians are also trained in Kyphoplasty, a similar procedure.

What information, besides history, is necessary before a decision can be made about whether a patient is a candidate for vertebroplasty?

- AP and lateral x-rays of the involved spine
- MRI of the spine (lumbar or thoracic). This can be obtained locally or we can arrange to have this done at the UW. We request that the **MRI include a sagittal STIR sequence** for complete evaluation. If the patient has contraindications to MRI scanning, a CT scan and bone scan together will substitute for an MRI.
- INR and platelet count

If you or your patients have additional questions, please call the Program Coordinator or visit our web site at:

www.radiology.wisc.edu/divisions/msk/vertebroplasty.html