



UNDERSTAND THE CONDITION - KNOW THE NEXT STEP

Cervical Myelopathy

Cervical myelopathy is spinal cord dysfunction caused by compression in the neck. It can affect hand dexterity, balance, strength, and walking. The course varies, but progressive symptoms need prompt evaluation; surgery may be considered to decompress the cord and reduce the risk of further decline.

Changes patients may notice

- Hand clumsiness and difficulty with fine motor tasks.
- Unsteady gait, balance problems, leg weakness, stiffness, or falls.

How it is evaluated

- No single examination sign establishes the diagnosis by itself.
- MRI is usually the preferred study for evaluating the spinal cord, discs, and surrounding compression.

How treatment typically progresses

1 Observation is selective and structured

- Nonoperative care does not mechanically decompress the spinal cord.
- Observation should include planned reassessment and clear instructions about neurologic change.

2 When surgery enters the discussion

- Moderate or severe myelopathy.
- Documented neurologic or functional decline.

Emergency: go now

- Use emergency services for sudden severe neurologic loss, inability to walk safely, major trauma, or new loss of bladder or bowel control.

Contact the office promptly

- New or worsening deficits should trigger reassessment rather than waiting for a routine visit.

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This handout provides general education and does not diagnose a condition or replace individualized medical advice, examination, imaging review, or emergency care.



greenbergspinemd.com/myelopathy/

FOR THIS VISIT

Your plan today

Your care team has checked the items below that apply to you. Keep this with you and bring it to your next visit.

**Medications
started today**

- ☐ muscle relaxant ☐ anti-inflammatory (ibuprofen/naproxen) ☐ acetaminophen (Tylenol)
☐ gabapentin / pregabalin ☐ steroid taper (Medrol) ☐ duloxetine ☐ other: _____

Imaging ordered

- ☐ MRI ☐ CT ☐ X-ray (flexion/extension) ☐ standing films ☐ CT myelogram

→ scheduling: ☐ you'll schedule ☐ our office / imaging center will call you

Other studies

- ☐ EMG / nerve conduction ☐ DEXA bone density ☐ vascular study (ABI) ☐ labs: _____

**Physical therapy
& activity**

- ☐ PT - convenient location; order sent ahead ☐ home exercise program
☐ activity restrictions: _____ ☐ assistive device (cane/walker) ☐ TENS unit

Bracing

- ☐ none needed ☐ lumbar (LSO) ☐ cervical collar ☐ as directed: _____

Injection

- ☐ Ordered - referral to a pain-management specialist → ☐ they will call you ☐ you will call them

Surgery

- ☐ To be scheduled - our surgical scheduler will call you. If you haven't heard within 5 business days, call (260) 484-1400.

**Before surgery
clearance & prep**

- clearance: ☐ primary care ☐ cardiology ☐ neurology ☐ pre-op labs ☐ smoking cessation
☐ stop blood thinners as directed

Referrals

- ☐ Bone Health Clinic (osteoporosis) ☐ weight / nutrition ☐ pain management (medication)
☐ other: _____

**Work / activity
status**

- ☐ work / school note ☐ off work until _____ ☐ modified duty ☐ FMLA / disability forms

Follow-up

in _____ weeks ☐ after your MRI / injection / EMG ☐ as needed

Notes & questions for your next visit
QUESTIONS OR NEW SYMPTOMS

Call us

Office · (260) 484-1400 · Scheduling · (260) 484-1400 · After hours · (260) 484-1400