

Imaging Protocol – CT DCN Pediatric Cystogram

Items needed:

- Blunt tip needle
- 30ml syringe
- Omni 300 or 350
- 500ml saline bag
- Primary set (pre-pierced Y-site, secure lock, 80")
- Christmas tree adapter
- Hemostats

Contrast Max volume: Calculation = (Patient Age + 2) x 30

- Example – patient aged 4 years = $(4+2) \times 30 = 180\text{ml}$
 - Inject 25ml Omni 300 or 350 into 500ml saline bag & gently mix well
 - Clamp line
 - Pierce bag with extension tubing & hang from IV pole
 - Prime the extension tubing line
 - Use hemostats to clamp the drain line
 - Connect the contrast line to the foley catheter connector
 - If no connector, use Christmas tree adapter

Scan steps:

1. Patient should void to have empty bladder
2. Take Topogram
3. Scan empty bladder (3x3's)
4. Unclamp the contrast line & let gravity fill the bladder
 - a. When bladder is filled/patient unable to tolerate any more, re-clamp the line
5. Scan distended bladder (3x3's)
6. Remove the contrast bag from the IV pole & place on the ground. Unclamp the hemostats & allow contrast from the patient bladder to gravity drain to empty (this may take 5 minutes)
7. Clamp tubing to prevent drained contrast from re-entering the patient
8. Scan post void bladder (3x3's)
9. At scan conclusion, contrast bag and extension tubing are to be removed and discarded.
Action regarding indwelling patient foley will depend on patient care nurse / doctor for intent to retain or remove catheter.

Please follow the ARA instructions for DFOV & scan parameters