



Fluoroscopy Protocols
Cystogram (Non-Voiding)
Patient presents without catheter
Fluoro Time Target Limit 2.5

Scheduling and Prep: *There are no prep instructions for this exam.
*Patient should empty bladder prior to exam.

Supplies:

- *Foley catheter kit
- *Foley catheter
- *Extension tubing
- *5cc syringe
- *Absorbent pad
- *Anatomical marker
- *Cystografin or Cysto-Conray II or equivalent
- *Sterile gloves
- *13mm Tablet- if your machine does not have built-in measuring Capabilities

Room Prep:

- *Position anatomical marker on the Image Intensifier
- *Prepare sterile tray for catheterization
- *Place an absorbent pad on table
- *Hang contrast from IV pole and spike with tubing
- *Flush air from tubing

Procedure:

- *Take a scout KUB X-Ray.
- *Catheterize the patient using sterile technique
- *Allow contrast to flow into bladder until the patient feels **very** full (this will vary from patient to patient) and then clamp the tubing.

Spot Images:

1. AP of filled bladder- document amount of contrast used on this Image-Right or Left lower corner of this image
2. Right oblique bladder
3. Left oblique bladder
4. Left lateral bladder-be sure to flip this image after exam
5. Right kidney
6. Left kidney
7. Document any urinary reflux seen and label it as reflux

Procedure: *Deflate the Foley catheter balloon and remove the catheter
*Ask patient to void completely in restroom.

Overhead Images: *Post void KUB

*After the exam is performed, QC your images. Ensure that an anatomical side marker is present on all images, label your images, flip images as necessary, sufficient collimation is used and that the amount of contrast used is documented on the first full image.

** These are the minimum images needed to demonstrate the proper anatomy for this exam. When deemed necessary, more images may be taken to demonstrate pathology or for other reasons.

**Minimize exposure to the patient and the imaging team.



Reviewed January 23, 2024