Fluoroscopy Protocols

Cystogram (Non-Voiding)-FLCYST-Post Prostatectomy

Fluoro Time Target Limit- 1.0

Scheduling and Prep
*Patients typically arrive with a Foley catheter in place.
*There are no prep instructions for this exam.

Supplies:
*One bottle of Cystograffin or Cysto-Conray II contrast or equivalent
*Contrast extension tubing *Safety glasses *Two hemostats
*Gloves *Absorbent pad
*Anatomical side marker on Image Intensifier
*13mm Tablet-if your machine does not have measuring capabilities built in

Room Prep:
*Place an absorbent pad on table to go underneath the patient
*Hang contrast from IV pole and spike with tubing.
*Flush air from tubing.
*Position anatomical marker to be visible in the images

Procedure:
*Under Fluoro: Take a scout image of the pelvis to include area below symphysis pubis.
*Clamp the tubing on both sides of the connection between the catheter and the drainage tubing/ collection bag.
*Disconnect the catheter from the drain tubing and connect contrast tubing to the catheter. Take care to keep disconnected tubing sterile. Place tube cap over end of drainage tube
*Remove proximal clamp.
*Instill 250cc of contrast or until patient becomes uncomfortable. Do not attempt to fully fill bladder.

Spot Images: (Include proximal urethra)
1. AP of the bladder- document amount of contrast used on this image in the Right or Left lower corner of this image.
2. Right oblique bladder
3. Left oblique bladder
4. Left lateral bladder
5. **Right kidney-Only if urinary reflux is seen**
6. **Left Kidney-Only if urinary reflux is seen**

   *Document and label any urinary reflux*

7. Unclamp tubing and allow contrast to drain out of the bladder, back into the bottle.

8. Reconnect the catheter to the drainage tubing/connected to the collection bag.

   *Catheter must be securely reconnected to the collection bag and all clamps should be Removed.*

9. Post drainage image— you may have to reconnect catheter to urinary Collection bag and ask the patient to stand up for a few seconds to Ensure complete drainage.

   *After the exam- QC your images to ensure images are labeled, collimated and Flipped correctly.*

**For post prostatectomy patients, the purpose of this exam is**
To demonstrate whether or not they have a leak around the surgery site in the Proximal urethra so that the catheter can safely be removed by their Physician.
**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. Care should be taken to minimize patient exposure.**