Fluoroscopy Protocols

Enteroclysis / Small Bowel Follow Through

FLENTO

Scheduling and Prep:
*The patient should be NPO from midnight before their exam until after their exam is
Completed or 8 hours. (Patient is allowed to brush their teeth) (No water, food,
Chewing gum, smoking, etc...)
*2 tablespoons of Milk of Magnesia should be taken at 9pm, the night before the exam.
**This barium is greatly diluted and much thinner than the L-196 Barium.

Fluoro Time Limit Target: 2.5 Minutes

Supplies:
EnteroVu-Powder form- cat # 754 (must be mixed)

Mixing Instructions: In a heat safe container; mix packet of powder with
400cc very hot water-Mix very well to eliminate lumps. Let mixture stand for 10
minutes, then shake well. Add 200cc ice to cool the mixture and shake again very
well to melt ice and cool solution. Pour into a container for the patient to drink.

*After reconstitution with water, product must be
refrigerated and used within 48hours. Discard any unused
portion.

Or
Liquid Entero Vu- L-140 600ml (already mixed) (keep in refrigerator for chilling)
Pour into a container for the patient to drink. Containers are 600cc of barium.
Patient should drink entire contents.

Procedure: *Supine KUB scout image.
*Then encourage the patient to drink the entire 600ml of Entero Vu quickly.
*Images are taken at timed intervals until the barium has reached the cecum.
*Send images in order.

Overhead Images:
*After drinking approximately 60 oz. of Entero Vu barium,
*Take a PA prone overhead to include the entire stomach
*Also, label the first barium image with “Entero Vu” since this is
Different from our regular barium.
*PA KUB 20 minutes from start of drinking
*PA KUB every 20 minutes up to 1 hour, after 1 hour take
*PA KUB every 30 minutes until barium reaches cecum
**When barium sufficiently fills the cecum, obtain spot images of the filled Loops of small bowel

*Using your trained judgment, the patient may need to drink additional Barium to ensure even distribution, at some point during their exam, to Ensure upper bowel loops are still filled when it is time to take the spot Images with Fluoro.

*With compression paddle, take 2-3 magnified images of the terminal ileum Unsuperimposed by other loops of the small bowel, obliques are usually Best to unsuperimposed the TI.
*Take approximately one image per quarter of the whole small bowel while Compressing.
*Take note of any dysmotility, polyps, dilatation, strictures, or any other Abnormalities.
*Then, open to largest field of view and take an AP of entire filled loops of Bowel.
*Label images with the proper times and Scout, RT or LT markers

*The transit time from the beginning of drinking to the time that the Barium reaches the cecum should be communicated to the radiologist.
*When informing the Radiologist about your findings; be sure they know to Dictate that Entero Vu barium was used.

** These are the minimum images needed to demonstrate the proper Anatomy for this exam. More images may be taken when deemed Necessary.
** Care should be taken to minimize patient and technologist exposure.
**Following the procedure, the patient should be instructed to drink extra Fluids for 2-3 days to help prevent constipation from the barium.

Reviewed and Revised- March 1, 2018