Fluoroscopy Protocols

Voiding Cystourethrogram-Male

Fluoro Time Target Limit 2.5

**Scheduling and Prep:**
*There is no prep for this exam *Patient must fill out a contrast Questionnaire.
*Patient should empty bladder before exam.

**Supplies:**
*Foley catheter kit  *Foley catheter- Appropriate size for the patient
*5cc syringe  *Extension tubing
*Cystografin or Cysto-Conray II  *Absorbent pads or towels
*Urinal  *Sterile gloves

**Room Prep:**
*Prepare sterile tray
*Hang contrast from IV pole and spike with extension tubing.
*Flush air from the tubing.  *Place absorbent pads on table

**Procedure:**
*Scout KUB.
*Catheterize the patient using sterile technique. (When possible, have a Male nurse or paramedic catheterize the male patient.)
*Allow contrast to flow into bladder until the patient feels **very** full.
*Once the bladder is full, clamp tubing to stop the flow of contrast.

**Spot Images:**

1. AP- full bladder- document amount of contrast used on this image.
2. Right oblique bladder
3. Left oblique bladder
4. Left lateral bladder
5. Right kidney
6. Left kidney

*Document any urinary reflux seen and label it as reflux.
*Have patient position penis over thigh and oblique them slightly to one side.

7. Avoid using the rapid imaging option from now on. Take or image hold, 1-2 full urethra images while the patient is urinating into the urinal.

8. Post void KUB - after patient feels empty. You may need to allow Patient to finish emptying their bladder in the restroom first.

**Be sure to label “scout”, “rights” and “lefts”, amount of contrast on full the bladder image and “post void” 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.

** Care should be taken to minimize patient and technologist exposure.