



Pediatric Fluoroscopy Protocol

Barium Enema- Single Contrast (FLPBE)

This Prepped PBE Exam Is Rarely Performed-On Pediatric Patients.

Do Not Schedule on Fridays

- **Preparation:** **Contact CIC for Preparation Instructions Ext. 2500 or 2532**
- **Anatomy Visualized:** Entire large bowel (colon)
- **Contrast:** Cysto- Conray II – 250ml Bottle or thin Barium- Radiologist preference

Procedure:

- Explain the procedure to patient and parent
 - AP scout film of abdomen
- ** Have the Radiologist review the Scout Image.
- Insert lubricated enema tip into the rectum and tape with paper tape
 - Position the patient on their left side.
 - Unclamp tubing to allow the contrast to begin flowing into the colon.
 - Take 1 image of lateral rectum full of contrast
 - (This image may be done as a Right lateral to accommodate patient)
 - Clamp the tubing to stop the flow of contrast.
 - Position the patient Supine
 - Take 1 image - AP rectum
 - Take 1 image – AP (unsuperimposing the sigmoid)
 - Unclamp tubing to allow the contrast to flow through the colon.
 - Take 1 image of splenic flexure - open (unsuperimposed)
 - Take 1 image of hepatic flexure - open (unsuperimposed)
- Follow the contrast until it just reaches the cecum (do not over fill), using gravity to move the contrast.
- Take 1 image of the cecum
 - Take 1 image – full AP abdomen

***Have the images checked by the Radiologist.**

- Patient is now permitted to evacuate the contrast
 - Take 1 image Post - Evacuation – AP abdomen
(If the patient does not evacuate, not necessary to take Post Evacuation image)

***Have the images checked by the Radiologist.**

** If patient does not evacuate adequately, the radiologist may request a 24 hour follow up image.

**The patient and parent should be given specific instructions that no rectal stimulation or suppositories or laxatives are to be used during this 24-hour period.

**Care should be taken to reduce radiation exposure to the patient and the imaging team.



Reviewed January 23, 2024