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Answer No: 01

⇒ "The process used instead is Retrograde pyelogram".

Protocols :-

- 1) Healthcare should explain the procedure to the patient.
- 2) Sign a consent form from the concerned person.
- 3) The patient should be told in advance to remain in fast for certain period of time.
- 4) ASK about pregnancy.
- 5) ASK about any allergies etc to any kind of contrast or dye.
- 6) Find out about all the OTC drugs the patient is using.
- 7) Laxative should be given to the patient one night before the procedure.

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- 8) Sedative should also be given to the patient for "being relaxation".
- 9) After all these the procedure is started.

Answer NO: 02

Name: →

⇒ "Intravenous Pyelography"

Procedure: →

1) Contrast Media: →

⇒ "HOCM and LOCM 370 both are acceptable"

⇒ "Some at high individuals may receive LOCM"

Dose: →

Adult → 50ml
Paeds → 1ml per kg

Patient preparations:-

- 1) NO food for 5 Hrs before procedure
- 2) Patient should be counseled to get rid of bowel gas 2 Hrs before the process.
- 3) Patient should be asked for previous some allergic reactions to the contrast media or dyes.

Preliminary Films:-

- 1) Supine full length AP of the abdomen, in inspiration - The lower border of the cassette is at symphysis pubis.

Technique:-

- 1) The median ante cubital vein is the preferred vein for injection because flow is retarded in the cephalic vein as it pierces the clavipectoral fascia.

- 2) A 19-G needle is advanced up the vein to reduce the risk of a perivascular injection and the injection is given rapidly as a bolus to maximize the density of the nephrogram.
- 3) Upper arm pain may be due to stasis of contrast medium in the vein.

Films : 7

① Immediate film :-

- "AP of renal Areas"
- "Aims to show the nephrogram"

② 5 min film :-

- AP of renal areas.
- Taken to determine whether the excretion is symmetrical and is invaluable for assessing the need to modify the technique.

→ A compression band is applied around the patient's abdomen and the balloon positioned midway between the Anterior Superior Iliac Spines".

③ 15 min film :→

→ "AP of the renal areas

→ "Compression is released then when satisfactory demonstration of the pelvicalyceal system has been achieved".

→ "

④ Release film :→

→ "Supin AP abdomen".

⑤ After Micturation film :→

→ Based on clinical and radiological findings.

Answer No: 03

Name of procedure :->

=> "ERCP" -> "Endoscopic Retrograde Cholangiopancreatography".

Protocols :->

=> "The pharynx is anesthetised with xylocaine 4% spray and the patient is given diazepam 5mg min⁻¹ until sedated".

=> "The patient is said to lie on the left side".

=> "The endoscope is introduced".

=> "The ampulla of Vater is located and the patient is turned prone".

=> Polyethylene catheter pre-filled with contrast medium is inserted.

=> The over filling of the pancreas should be avoided.

=> "To be ensured that all the air bubbles are excreted or excluded".

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⇒ If it is desirable opacify both the biliary tree and pancreatic duct & when the latter should be concluded first-

⇒ "A sample of bile should be sent for culture and sensitivity if there is evidence of biliary obstruction".

Answer No: 04

Recommended Procedure ⇒

⇒ "Hysterosalpingography"

Procedure ⇒

⇒ "Oily contrast is no more recommended".

⇒ "HOCM or LOCM-300, vol 10-20ml-

⇒ "LOCM has no advantage, with regard to image quality".

Patient Preparation :->

- ⇒ "The patient should abstain from intercourse between booking the appointment and the time of the examination"
- ⇒ "Apprehensive patients may need pre-medication"

Preliminary Film :->

- ⇒ "Coned PA view of the pelvic cavity"

Technique :->

- ⊛ ⇒ "Patient lies supine on the table"
- ⇒ "Knees flexed, legs abducted and heels together"
- ⊛ ⇒ "Using aseptic technique the operator inserts a Speculum and cleans the vagina and cervix with chlorhexidine"

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- ① "The anterior lip of the cervix is steadied with the vulsellum forceps and cannula is inserted into the cervical canal.
- ② "All air bubbles should be expelled from syringe and cannula".
- ③ Spasm of the uterine cornu may be relieved by i.v glucagon".

Film: →

→ "Using the underfouched tube:

- 1- As the tube begins to fill.
- 2- When peritoneal spill has occurred and all the instruments removed.

Aftercare: →

- ① "To be ensure that the patient is in no discomfort.

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- ⊛ Patient should be advised that she may have bleeding the next day or two and pain may persist upto 2 weeks".

Answer No: 05

Arthrography :->

Preliminary film :->

- ⇒ "Routine plain film radiograph."
- ⇒ "AP and true lateral of the joint of interest"
- ⇒ Axial in shoulder and oblique view in ankle"
- ⇒ "Radial and ulnar deviation in wrist joint"

procedure :->

- ⇒ "Patient is lying in a supine position if we have to see for problems in anterior

side of the body".

⊛ "The skin and underlying tissue should be anesthetised gently".

⊛ 21-G needle is used and effusion is aspirated and small dose of contrast is released to ensure the correct position of the needle".

⊛ The full volume of the contrast is injected followed by 40 ml of air for double contrast.

⊛ Needle is removed and that part of the body is exercised for equal and well distribution of the contrast.