

(1)

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VIVA Assignment :-> CRP &
CP
Program :-> Bs- Radiology
4-th Semester

Q:->

Ans:

VENOGRAPHY :->

↳ Venogram :->

→ A venogram uses injection of a contrast dye & a special type of x-ray called fluoroscopy to take pictures of the veins.

→ It is sometime used to look for blood clots called deep vein thrombosis (DVT)

Benefits :->

• used for diagnosis to show picture of inside of your veins.
DVT

- (2)
- Can be used to find a suitable vein for some types of surgery.

Risks

- Not recommended for a pregnant women.
- Diabetic PT.
- Kidney problem PT.
- Small amount of Radiation you exposed.
- Extremely small chance you could develop cancer in long term from the radiation.

Preparations

- Bring your referral letter or request form and all x-rays taken in the last 2 years with you.
- wear comfortable, loose clothing.
- Leave all jewellery and valuables at home.

Referral

(3)

• You may be asked not to eat or drink for a few hrs before the venogram.

→ Important to tell Doctor before the venogram:-

→ If you are or may be pregnant.

→ About any clinical condition eg- kidney disease, bleeding, allergies & asthma.

→ If you're taking blood thinning medications, such as aspirin.

→ What happens during venogram.

possible side effect of dye.

→ You may feel a slight coolness and a flushing for a few seconds.

11-1-20

(4)

- Part of your body may feel warm, if this bothers you, tell the staff.

A tight band may be put on the part of the body they are looking at to control blood flow.

→ After the Venogram:

→ After the venogram the staff check your breathing and heart rate, and Bp a few times.

- Staff will need to take out the needle if it is still in your arm.
- Staff will give you any special instructions.

D-I-C

Q: 4
 Ans:

→ Example of tasks Radiological Technologists perform include: →

- Explaining procedure to pt and answering question.
- preparing equipment for use as needed.
- preparing examination rooms for pt exams.
- positioning pt for imaging exams.
- Monitoring patients during Exams.
- Documenting information with computers.
- Reporting important information to the physician.
- Ensuring safety to pt during exams.

(b)

- Using sound waves to obtain images of organs and tissue in the body.
- Administering targeted doses of radiation to the patient's body to treat cancer or other disease.

Q-3 →

Ans: →

Lopogram →

→ It is a diagnostic test that is performed on the section of bowel that function in place of the urinary bladder.

→ It is also called urogram antegrade.

→ What is Lopogram →

A Lopogram is a

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diagnostic test performed on the section of bowel that junctions in place of the urinary bladder.

→ pt who do not have a bladder may undergo a surgical procedure called urinary diversion to reroute the flow of urine through an is called a stoma.

→ The stoma has no muscle and cannot control urine flow, so that urine flows continuously through it.

→ Sometimes a section of bowel, usually the small intestine, is removed & repositioned to enable urine to flow from the ureters to the stoma.

→ why should someone need a stoma?

In cases of surgical

P-T-A

8)

Intervention to treat bladder cancer or laproscopic Radical cystectomy or a cystoprostatectomy can be performed

- > During these procedures the bladder is removed.
- > To restore urinary flow to pt, surgeons have number of options to divert the flow of urine.
- > A lapogram test the ileal conduit to see if it is functioning as it should.

Test Details:->

- > Get useful health, wellness information. Health Essential logo.

-> ENEWS

Get useful, health and

(9)

relevant health + wellness
information .
Enter or Email
SIGN UP .

Q:->

Ans:->

Guidewires:->

Guidewires (solid wire navigated within the vascular system/ extravascular tract) act as a lead point for catheters.

-> Allowing operators to traverse along a given vessel / track.

• General types of Guidewires:->

-> Starting guidewires:->
used for catheters introduction and some procedures.

-> Selective guidewires:->
used to cannulate side branches or cross critical.

-> Exchange guidewires:->
are stiffer & used to secure position as device are passed over the wire.

(10)

Length:->

must be long enough to cover the distance both inside & outside to the pt.

Diameter:->

vascular catheters are designed with a guidewire port of specific diameter.

Stiffness & Coating:->

most of guidewire have a tightly wound steel core that contribute to body stiffness.

Tip shape:->

The shape of guidewire tip often reveals the function of the guidewire.

-> Basic Construction of Guidewires:->

- (ii) Curved and guidewire with straight soft central spring wrap, welded stiffening mandril at back end only.
- (3) Movable - core guidewire in which mandril can be slid back and forth and even removed completely to change wire stiffness.
- (4) Mandril guidewire in which soft spring wrap is limited to one end of guidewire.
- (5) Mandril guidewire coated with hydrophilic substance.

Catheters: →

Angiographic catheters: →

- Used for diagnostic and therapeutic invasive intra-vascular procedures.

(D) Drainage catheters

- Used for percutaneous drainage of fluid collection.
- Usual shape is straight tip or "pigtail" or a ~~rod~~ mushroom (Malecot).

Angiographic catheters

- Usually made of plastic (Teflon or nylon).
- Exact catheter material, construction, coatings, inner diameter, outer diameter, length, tip shape, side-hole pattern.
- Diameter is outer size described in French gauge (3F=1mm).
- Length described in centimeters (65 & 100cm)

P-T-C

Common Vascular Catheter Shapes:

Microcatheters:

- Small catheters that are specially designed to fit coaxially within the lumen of a standard angiographic catheters.
- 2F to 3F in diameter.
- Soft & flexible.
- Specially designed 0.01 to 0.25 inches.

Guide catheters:

- class of catheters designed to make selective catheterization and intervention easier.
- used in some situations to help position and stabilize standard catheters.

Drainage catheters

Direct trocar punctures

- Can be used in large superficial lesions.
- Require blunt dissection and direct placement by "push".
- Trocar may advance farther than intended.

Seldinger technique

universal

- 18g needle puncture.
- An 0.035 in. wire placed in collection.
- Tract dilated over the stiff wire (dilate equal to or 1 Fr size larger than intended drain).

Q. - 1.

Ans: ->

IODINATED CONTRAST AGENTS ->

- > The non-ionic dimers are the most ideal contrast agent used for intravenous administration.
- > As they are very less toxic and delivers more iodine with the least effect on osmolality.
- > All most all radiological procedure are performed with the injected contrast agents which involves the administration of iodine-containing compounds.
- > Using those compound that are iodine containing are related with low toxicity and have great radiopacity.

10.
Iodinated contrast
media are
differentiated into

→ **Ionic contrast agents**

1. Ionic dimer.
(high-osmolar contrast media)
2. Ionic monomer.
(high-osmolar contrast media)

→ **Non-ionic contrast agents**

1. Nonionic dimer.
(low- or iso-osmolar contrast media)
2. Non-ionic monomer.
(low-osmolar contrast media).

