

Name :- SAAD Ullah

ID :- 14996

Program :- Radiology

Paper :- COP & CP

Semester :- 4th

Submitted :- Mam - Maheen Gull

Date :- 25-06-2020

University :- ~~IBA~~ National University.

①

Qno

01

Ans

"Retrograde Pyeloureterography" procedure is performed if there is non-visualization of ureteral segment on IVP and CTU procedure. The Retrograde Pyeloureterography is also referred to as Retrograde Pyeloureterography. Retrograde pyelogram is an imaging test that uses X-rays to look at your bladder, ureters, and kidneys.

This procedure is performed with cystoscopy by placement of an endoscopic camera via the urethra into the bladder.

This test is performed in the hospital radiology department by a urologist and is typically carried out under general anesthesia.

General Protocol :-

The general protocol for performing retrograde Pyeloureterography is given below :-

→ Your doctor will explain the procedure to you and offer you the opportunity to ask any questions that you might



(2)

- Have <sup>About</sup> ~~About~~ the procedure.
- If you're pregnant or suspect that you may be pregnant, you should be notify your doctor.
  - You'll need to fast for a certain period of time prior to the procedure. Your doctor will notify you how long to fast, ~~whether~~ whether for a few hours or overnight.
  - Notify your doctor if you've ever had a reaction to any contrast dye, or if you're ~~doctor~~ allergic to iodine.
  - Notify your doctor if you're sensitive to or are allergic to any medication.

After the patient has been anesthetized, the procedure begins by ensuring proper positioning of the patient in the dorsal lithotomy position.

QNo  
///

02

Ans  
///

"Intravenous Pyelography" procedure is commonly performed for assessing congenital anomalies or renal system.

An intravenous pyelography (IVP) also called an intravenous urography (IVU) or excretory urography (EU) is a radiological procedure used to visualize



(3)

Abnormalities of the ~~excretory~~ urography (EU) is a radiological procedure used urinary system. Including the kidneys, renal parenchyma, pelvicalyceal system, ureters, and bladder etc.

Detail of IVP :-

Indications :-

- Check for normal function of kidneys.
- Check the course of the ureters
- Detect ~~and~~ ~~and~~ and localize a ureteric obstruction.

Contraindications :-

Contrast allergy  
Hepato-renal syndrome  
Thyrotoxicosis  
Raised serum creatinine.

Contrast Media :-

Infants and small children  
and the elderly.

Those with renal and/or  
cardiac failure

Poorly hydrated patients.

Adult dose 50 ml

Paediatric dose 1m kg . 1.



(4)

## Patient Preparation:

- No good job 5h prior to the examination. Dehydration is not necessary and does not improve image quality.
- Patients should, preferably, be ambulant for 2h prior to the examination to reduce bowel gas.

## Preliminary Film:

Supine full length AP of the abdomen, in the inspiration. The lower border of the cassette is at the level of the symphysis pubis and the x-ray beam is centred in the mid-line at the level of the iliac crests.

## Technique

The median antecubital vein is the preferred injection site because flow is released in the cephalic vein as it pierces the clavipectoral fascia.

- Upper arm or shoulder pain may be due to stasis of contrast medium in the vein. This is relieved by abduction of the arm.



(5)

QNo

03

Ans

Endoscopic Retrograde cholangiopancreatography are procedure are performed for extrahepatic biliary obstruction.

Simply the Endoscopic Retrograde cholangiopancreatography is a technique that combines the use of endoscopy and fluoroscopy to diagnose and treat certain problem of the biliary or pancreatic ductal system.

This tech technique is also used for Post-cholecystectomy Syndrome and the investigation of diffuse biliary disease. example sclerosing cholangitis And the also used for Pancreatic disease.

General Protocol :-

- Stop eating and drinking at the time your doctor tells you before
- The morning of your surgery, you may take medications your doctor told you are allowed. Take them with just a sip of
- You might need to stop



6

taking certain medicines before surgery. These include blood thinners, supplements, and medicines that affect your immune system. Talk to your

- Tell your surgeon if you have a shellfish or iodine allergy.
- You will not be allowed any heavy meal for at least 8 hours before the procedure, light meals or opaque liquids for 6 hours before, or clear liquids for at least 2 hours before.

- Plan to take the day off from work.

↳ The ampulla of Vater is located and the patient is turned prone.

↳ The patient then lies on the left and the endoscope is introduced.

↳ A small test injection of contrast under fluoroscopic control is made to determine the position of the cannula.

↳ The Pharynx is anaesthetized with 4% Xylocaine spray and the patient is given Diazepam 5mg min-1-ir until sedated.



②

↳ It is important to avoid over-gilling of the pancreas. It is desirable to opacify both the biliary tree and pancreatic duct, than the latter should be cannulated first. A sample of bile should be sent for culture and sensitivity if there is evidence of biliary obstruction.

QNo

04

Ans

Hysterosalpingography is the procedure is recommended for evaluating the cause of female infertility.

- ↳ Hystero means uterus
- ↳ Salpingo means Fallopian tubes
- ↳ Graphy means to draw

They also know as uterosalpingography, is a fluoroscopic examination of the uterus and the fallopian tubes. They are also performed to investigate the shape of the uterine cavity and the shape and patency of the fallopian tubes.



(8)

This procedure is also used for recurrent miscarriage, following tubes surgery and for assessment of the Antegravity.

### Detail of Hysterosalpingography

#### Contrast Medium:-

Only Contrast medium is no longer recommended. And HOCM or LOCM 300. Volume 10-20 ml.

#### Equipment &

- Vaginal Speculum
- Vulsellum forceps
- Fluoroscopy unit with spot film device
- Uterine cannula, leech-wilkinson Cannula, olive or BF paediatric ~~or~~ Foley catheter.

#### Patient Preparation

Patient should ~~obtain~~ abstain from intercourse between booking the appointment and the time of the examination unless she uses a reliable method of contraception, or the examination.

Apprehensive (fearful) patients may need premedication.



9

Technique :-

Using aseptic technique the operator inserts a speculum and cleans the vagina and cervix with chlorhexidine.

The patient lies supine on the table with knees flexed, legs abducted and heels together.

Spasm of the uterine cornu may be relieved by i.v. glucagon.

Films :-

Using the interscough tube.

- ① As the tubes begin
- ② When peritoneal spill has occurred and with the instruments removed.

Aftercare :-

The patient must be advised that she may have bleeding per vagina for 1-2 days and pain may persist for up to 2 weeks.

Complications :-

Due to technique

- ① Pain may occur at the following times:  
a Pain

- ② Using the vulsellum forceps
- ③ During ~~inst~~ insertion of the cannula
- ④ with tubal distension proximal to a block.



- (1) With distension of the uterus if there is tubal spasm.
- (2) Bleeding from trauma to the uterus of cervix.
- (3) Transient nausea, vomiting and headache.

### Detectable Pathology:

#### Uterine Pathologies

- Uterine congenital anomalies
- Submucosal Uterine fibroids
- Uterine malignancy
- Adenomyosis
- Intrauterine adhesions
- Uterine (endometrial) polyps.

#### Tubal Pathologies:

- Tubal polyps
- Tubal malignancy
- Hydrosalpinx.
- Salpingectomy.

Q No

05

Ans

Arthrography is the conventional radiological procedure used for diagnosing the disorders of joints, ligaments and tendons.



(11)

## Detail of Arthrography

They are Single Contrast (contrast)  
and Double contrast (air)

### Indication r

Joint Cavity  
Joint Capsule torn  
Ligaments  
Tendons

### Contraindication

Joint arthritis  
Bleeding problems  
Previous Sensitivity

Equipment Fluoroscopy with spot  
film devices.

Preliminary film.

AP and true lateral of the  
joint of interest

Routine plain film radiograph

Case Avoid driving for two days  
Joint pain may occur

### Complication r

Allergic reaction  
Pain capsule  
Trauma adjacent.  
e.g nerves and vessels.