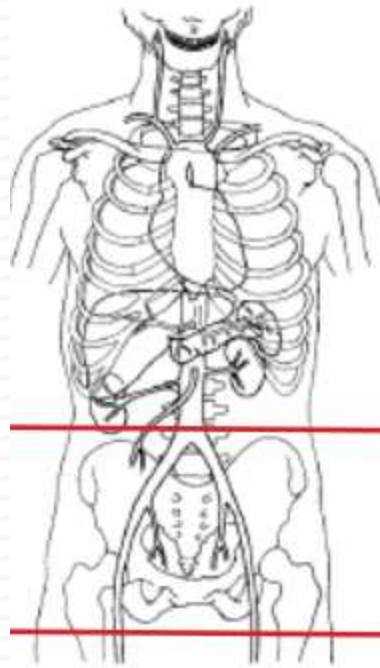


CT CYSTOGRAM



Indications	recurrent UTI, bladder diverticula, post-op anastomosis, hematuria, neoplasia, incontinence, vesciouretero reflux, suspect fistula, evaluate post-void residual volume
Contraindications	Pregnancy is a relative contraindication
Patient Position	Supine
Contrast	Retrograde dilute contrast solution
Injection rate	Bladder distended/ filled via foley catheter * see procedural notes below
Respiration	Breath- hold
Scan Parameters	dome of diaphragm through ischial tuberosity
Special instructions	After exam, send images to Radiologist to receive instructions BEFORE draining contrast from bladder. If complete by Rad, disconnect contrast tubing & reconnect foley bag. Drain bladder by gravity.
	CT Cystography should be performed after A/P CT and renal images so the dense extravasated contrast does not obscure other significant pathology.

PLANE	ALGORITHM	THICKNESS	DFOV	
Axial	Abdomen	5.0 mm	pt largest + 4 cm	No contrast in bladder
Coronal	Abdomen	5.0 mm		No contrast in bladder
Sagittal	Abdomen	5.0 mm		No contrast in bladder
FILL BLADDER	WITH DILUTE	CONTRAST	SOLUTION	Continue filling until 350-400 cc used or patient feels discomfort. DO NOT use pressure or squeeze bag for bladder filling!
Axial + C	Abdomen	3.0 mm		bladder filled via foley
Axial + C	Abdomen	3.0 mm		bladder filled via foley
Sagittal + C	Abdomen	3.0 mm		bladder filled via foley

NOTES: See page 2 for list of supplies and procedure

CT CYSTOGRAM

Supplies:

- Foley catheter kit
- 500 cc normal saline
- Cystogram connector tubing (high flow)
- 50 cc syringe
- 18 g needle
- 30 cc IV contrast

PROCEDURE:

- Remove and discard 30cc normal saline from 500cc bag
- Place 30cc of 60% contrast into 500cc bad normal saline
- *Example: use 30cc omnipaque 300 or 350, makes overall solution 5% dilution
- Shake bag to mix
- Insert cystogram connector tubing into IV bag port. Be sure tubing is occluded first with flow control device to control leakage
- Fill connection tubing with contrast mixture to expel air
- Insert cystogram connector tubing tip into foley catheter securely
- Be sure foley has been to gravity drainage prior so the bladder is empty before beginning the exam
- Disconnect the foley bag from the catheter and insert the contrast bag connector into the same large lumen that the foley was connected to. The smaller catheter lumen is for the balloon - Do **NOT** connect here
- Open flow control device on connector tubing to begin instillation