| Intravenous Pyelogram (IVP) | | | | | | | |
|---|--|------------------------|--|---------------|------|----------|--|
| PURPOSE / CLINICAL INDICATION: | | | | | | | |
| To evaluate upper tract collecting system for pathology | | | | | | | |
| SPECIAL CONSIDERATIONS / CONTRAINDICATIONS: | | | | | | | |
| • | | | | | | | |
| | | ABLE NAME: | | TTON NAME: | NOT | ES. | |
| UTSW | 0 | venous Pyelogram (IVP) | | TION NAME. | NUT | LJ. | |
| PHHS | XR IVP | | | | | | |
| EQUIPMENT / SUPPLIES / CONTRAST: | | | | | | | |
| • | Nonionic contrast | | | | | | |
| • | IV start kit | | | | | | |
| • | Angiocath | | | | | | |
| • | IV adaptor/tubing | | | | | | |
| • | Syringes | | | | | | |
| PATIENT PREPARATION: | | | | | | | |
| • | Review for contrast allergy | | | | | | |
| • | Follow intravenous contrast policies and procedures | | | | | | |
| • | • NPO after midnight. For UTSW only, bowel prep to be administered. | | | | | | |
| PROCEDURE IN BRIEF: | | | | | | | |
| • | | | | | | | |
| COMPLETE PROCEDURE TECHNIQUE: | | | | | | | |
| • | AP scout supine. Include kidneys through pubic symphysis. | | | | | | |
| • | Inject IV contrast by hand. | | | | | | |
| • | Obtain images as listed below. | | | | | | |
| • | Review with radiologist after 10 min images acquired. | | | | | | |
| • | Additional imaging at the discretion of the reviewing radiologist. | | | | | | |
| • | Allow patient to void in bathroom. Take post void image. | | | | | | |
| IMAGE DOCUMENTATION: | | | | | | | |
| • | Scout KUB | | | | | | |
| • | Immediate post injection KUB (primarily include entirety of kidneys) | | | | | | |
| • | 5 min post injection KUB | | | | | | |
| • | 10 min post injection KUB and obliques | | | | | | |
| • | Upright, semi-upright, prone, delayed views at the direction of the radiologist Post void KUB | | | | | | |
| ADDITIONAL WORKFLOW STEPS: | | | | | | | |
| • | | | | | | | |
| | | | | | | | |
| REFERENCES: | | | | | | | |
| • | | | | | | | |
| • | Procedure Contrast Grid | | | | | | |
| Bowel Preparation Reference | | | | | | | |
| Last Ed | it Date: | 6/4/2015 | | Last Review D | ate: | 6/4/2015 | |