

T-Tube Cholangiogram

PURPOSE / CLINICAL INDICATION:

- Evaluate biliary patency for postoperative patients
- Evaluate possible biliary obstruction, leak or stones

SPECIAL CONSIDERATIONS / CONTRAINDICATIONS:

- Referring clinician may decide to administer prophylactic antibiotic (especially for post liver transplant patients).

	ORDERABLE NAME:	EPIC BUTTON NAME:	NOTES:
UTSW	XR Cholangiogram		
PHHS	XR Cholangiogram T-tube		

EQUIPMENT / SUPPLIES / CONTRAST:

- Water soluble contrast (nonionic)

PATIENT PREPARATION:

- Review for contrast allergy

PROCEDURE IN BRIEF:

- Evaluation of biliary ducts after water soluble contrast injection using fluoroscopy.

COMPLETE PROCEDURE TECHNIQUE:

- Obtain scout images (overhead and digital images)
- Always try to minimize the air bubbles when performing contrast injection.
- Using intermittent fluoroscopy to monitor for possible leak or obstruction – obtain digital image after initial 2 to 5 cc of contrast injection.
- Obtain AP and both oblique views of the duct.
- Document the contrast enters the duodenum.

IMAGE DOCUMENTATION:

- Scout over t-tube
- Immediate instillation (AP, obliques)
- A 5 minute delayed image may help to document adequate draining of the contrast into duodenum.

ADDITIONAL WORKFLOW STEPS:

- If the introduced contrast does not drain well into the duodenum, try to withdraw the contrast as much as possible.

REFERENCES:

- [General Fluoroscopy Considerations](#)
- [Procedure Contrast Grid](#)

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