

PURPOSE:

Patients should be prepared psychologically, emotionally and physically and financially for diagnostic procedures. Patient preparation is key to improving the diagnosis of the various disease processes. Patient safety is also improved since patients are bound to be more relaxed preprocedure, during and even post procedure.

The risk of accidents from panic is also reduced. Hospital stay is shortened for inpatients, recoveries and *TATs* also improved.

ROLES AND RESPONSIBILITIES.

Scope: Reffering physician, clinician, nurses, radiographers and any other responsible individual.

On receiving request forms from the reffering clinicians, patient is assured to the nurse/officer incharge of patient preparation and clear details of the procedure outlined to the patient, where need be the radiographer incharge is involved.

PROCEDURE

Medical Imaging Nurse / Technologist Attending Nurse Medical Imaging Nurse / Technologist Introduction; Identify yourself and role to the patient and attending nurse .Communicate to the patient and nurse what examination has been requested.

If applicable ensure preparation requirements have been fulfilled. Communicate patient information on Presenting problem or Current status on Medications reviewed on Mobility or Cognitive status. Communicate to nurse what examination has been performed.

1. <u>PATIENT PREPARATION FOR ULTRASOUND PROCEDURES</u>. Kindly indicate the patient's details and clinical summary on the request form.

OBSTETRIC USG.

1st & 2nd trimester- full bladder/Atleast take 6(Six) glasses of water

to aid achieve the same.

-After taking fluids the patient's bladder may

be full within 30-45minutes.

<u>3rd trimester</u>,-The patient should have distended bladder prior to the procedure.



Abdominal USG - 6-8Hrs fasting/NPO.

Have the patient take atleast three glasses of water before starting the procedure.

<u>PELVIC USG-</u> Full bladder /take atleast (six)-6 Glasses of water.

-Waiting time is 30-45mins.

2. <u>PATIENT PREPARATION X-RAY " special" PROCEDURES.</u> Kindly indicate the patient's details & clinical history on the request form.

Barium meal- 8hours fasting/NPO preferably morning

hours. Patient advised to take plenty of fluids post the procedure.

Barium swallow- atleast 8hrs NPO before the

Procedure. Patient advised to take

Plenty of fluids post the procedure

HSG-For patients with regular period's the procedure should be done on 9th or 10th day after menstrual cycle.

- -For Patients with irregular periods-, pregnancy test should be -ve.
- No sexual contact, from onset of menses until the procedure is done before or on the tenth day.
- Clean shaved pubic region.

NB: The above requirement together with the appointment date and briefing of the procedure are commuted to the patient on the day of visit to the department.

MCU, MICTURATING CYSTOURETHROGRAM.

-Atleast 8hrs of fasting .



- -Clean shaved pubic region.
- -Any other relevant radiological reports done already.

3. PATIENT PREPARATION CT SCAN. ABDOMEN & PELVIS/PYELOGRAM

Requirements.

- -Clearly indicated clinical history.
- -Relevant previous reports.
- -8hrs fasting/NPO.
- -Normal range UECs- valid for only 2weeks.
- conscent forms shall be availed to the patient before the procedure.

CT KUB.

Requirements.

Full bladder or

- -30minutes of rehydration with plain water.
- -Any relevant previous radiological reports.

CT BRAIN/paranasal sinuses.

Preparations,

- -Kindly fill patient's details and outline the clinical history as needed.
- -Remove earrings, hair bands and necklaces/remove any metallic objects from the head.

CT ANGIOGRAM.

Requirements:

Atleast one hour fasting/ NPO before the procedure.

Normal range UECs-Valid for two weeks.

Where contrast media, (*OMNIPAQUE*) will be used, a conscent form is required on the appointed day/time of the procedure.

