

## Defecogram (SMC and PAH)

- I. **Equipment** *(May vary between sites)*
  - a. 2 cups thin barium (1hr prior to exam)
  - b. 2 tubes Varibar pudding
  - c. Toomey syringe connected to enema tip
  - d. Radiolucent potty chair with plastic liner
  - e. KY jelly
  - f. Yard stick with lead numbers
  - g. Tape
  - h. Footstool
  - i. Tray table with towel (adjust height and place under patient's feet for exam)
  - j. Stretcher (for administration of rectal contrast)
  - k. Markers (Rest, Lift, Stress)
  
- II. **Personnel**
  - a. Radiologist/RA
    - i. Responsible for giving patient instructions and capturing images
  - b. Hospital Technologist
    - i. Documents patient history and pregnancy status prior to exam
    - ii. Fills rectum prior to imaging
    - iii. Assists the radiologist or fluoroscopy technologist during procedure
    - iv. Provides patient with aftercare instructions
  
- III. **Procedure**
  - a. Scout KUB 1 hour prior to exam
  - b. Administer 2 cups of thin barium orally after scout
  - c. 45 minute delayed KUB
  - d. Begin defecogram once contrast is filling distal ileum
  - e. Fill rectum with up to 300mL's of Varibar pudding (stop injecting when you feel resistance)
  - f. Patient to sit on radiolucent potty chair (holding in contrast)
  - g. Raise fluoro table for adequate imaging
  - h. Technologist should place tray table under patients feet and stabilize to prevent movement
  
- IV. **Required Images** (fluoro loop store images)
  - a. Scout/ Rest (patient relaxed but gently holding in contrast)
  - b. Lift (have patient squeeze to hold in contrast)
  - c. Stress (have patient push while holding in contrast)
  - d. Go (evacuation)
  
- V. **Special Considerations**
  - a. Radiologist to read: Dr. Hopper, Dr. Payne, Dr. Bartel, Dr. Wheeler

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| <b>Approved by:</b> | Keith Dangleis, MD                                  |
| <b>Role:</b>        | Physician Supervisor, RIA Fluoroscopy Technologists |