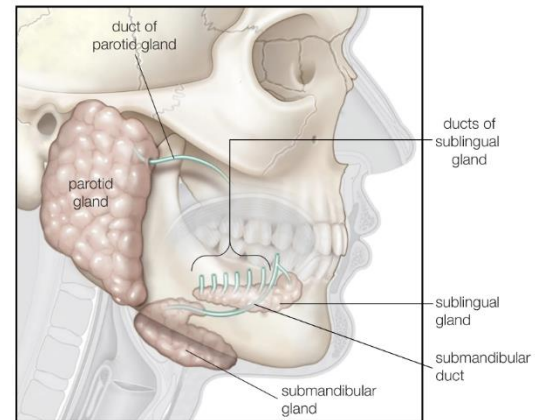


**Equipment** *(May vary between sites)*

- a. Isovue 300 or Omnipaque 240
- b. Sialography catheter (25-side hole) or (27-endhole)
- c. Bowl of lemons from (hospital dietary)
- d. Long Q tips or cotton balls
- e. HSG light, jewelers mask or headlamp

**II. Personnel**

- a. Radiologist/RA
  - i. Places salivary catheter
  - ii. Injects contrast under fluoro guidance
- b. Hospital Technologist
  - i. Prints order for radiologist/RA review
  - ii. Documents patient history and pregnancy status prior to exam
  - iii. Assists the radiologist/RA during procedure
  - iv. Provides patient with aftercare instructions



© 2010 Encyclopædia Britannica, Inc.

**III. Procedure**

- a. Obtain scout fluoroscopic spot image of affected side
- b. Have patient suck on a lemon wedge to open duct
- c. Place Q tip or cotton ball over the opening to the duct
- d. Cannulate the duct (advise patient – contrast injection may feel like a dull toothache)
- e. Gently inject contrast under fluoroscopic guidance (cine record if available)
- f. Capture images of contrast filled duct in different projections
- g. After exam have patient suck on a lemon wedge to evacuate contrast
- h. Obtain post procedure image

**IV. Required Images**

- a. Scout
- b. AP, lateral, and oblique contrast filled duct
- c. Post evacuation

**V. Special Considerations**

- a. Follow contrast allergy protocol
- b. Link to Sialography article with images
  - i. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1512577/pdf/califmed00188-0068.pdf>
- c. Diagram
  - i. <https://www.britannica.com/science/human-digestive-system/Salivary-glands>

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