

PREPS FOR PEDIATRIC IMAGING STUDIES

revised by Henrietta Kotlus Rosenberg, MD, FACR

2019

US RENAL/BLADDER

Well hydrated.

Infants : give usual feeding 15 minutes before exam
Children : 8-16 oz. water upon arrival (no carbonated beverages)
Adolescents/young adults: 32 oz. water upon arrival (no carbonated beverages)

US PELVIS

Well hydrated.

Infants : give usual feeding 15 minutes before exam
Children : 8-16 oz. water upon arrival (no carbonated beverages)
Adolescents/young adults: 32 oz. water upon arrival (no carbonated beverages)

US ABDOMEN

Newborn to 4 months:	NPO 3 hours prior to exam
5 – 8 months:	NPO 4 hours prior to exam
9 – 12 months:	NPO 5 hours prior to exam
1 - 2 years :	NPO 6 hours prior to exam
.>2 years :	NPO 8 hours prior to exam

US ABDOMEN/PELVIS

Newborn to 4 months:	NPO 3 hours prior to exam
5 – 8 months:	NPO 4 hours prior to exam
9 – 12 months:	NPO 5 hours prior to exam
1 - 2 years :	NPO 6 hours prior to exam
>2 years :	NPO 8 hours prior to exam

For potty trained patients, advise to arrive with full bladder if possible and not to empty bladder until pelvic portion of the examination is completed. If the child cannot cooperate, the abdominal portion of the examination will be completed and following that, the patient will be advised by the sonographer as to how much to drink to fill the bladder as quickly as possible so that pelvic portion of the examination can be performed.

US LIMITED ABDOMEN FOR SMALL BOWEL IN PATIENTS WITH CROHN'S DISEASE

No solid foods for 3 hours prior to exam.
No liquids for 1 hour prior to exam.

US ADRENALS

NPO for 2 hours prior to exam.

US ADRENALS & PELVIS COMBO

NPO for 2 hours prior to exam.

For potty trained patients, advise to arrive with full bladder if possible, and not to empty bladder until pelvic portion of the examination is completed. If the child cannot cooperate, the abdominal portion of the examination will be completed and following that, the patient will be advised by the sonographer as to how much to drink to fill the bladder as quickly as possible so that pelvic portion of the examination can be performed.

US PYLORUS

NPO 3 hours prior to exam.

US INTUSSUSCEPTION

No prep.

US FOR APPENDICITIS

Advise patient not to void if potty trained.

Infants – 10 years : 2-16 oz water as tolerated

10 years – young adult: 32 oz water as tolerated.

US INFANT HIP FOR DEVELOPMENTAL DYSPLASIA (DDH)

NPO 3 hours prior to exam.

Bring along bottle of breast milk or formula to be fed to the baby during the sonogram so that infant is calm during the exam.

US HIP FOR EFFUSION

No prep.

US SPINE

Feed infant 30 minutes prior to examination.

US HERNIA – MISCELLANEOUS (e.g. DR. DIVINO PATIENTS)

No prep.

US/DOPPLER SCROTUM

No prep.

US/DOPPLER THYROID

No prep.

US SUPERFICIAL SOFT TISSUE MASS

No prep.

UGI, SBS, AND UGI WITH SBS

Newborn to 6 months:	NPO 3 hours prior to exam
5 – 8 months:	NPO 4 hours prior to exam
9 – 12 months:	NPO 5 hours prior to exam
1 - 2 years :	NPO 6 hours prior to exam
>2 years :	NPO 8 hours prior to exam

Suggest to parent that they bring something for the child to read or to be entertained by, e.g. video game, movie) as the examination may take 1 – 4 hours.

BE

If diagnosis is for Hirschsprung's or chronic constipation:

No prep.

For 2 days prior to BE:

- no rectal exams
- no rectal stimulation
- no rectal thermometers
- no suppositories
- no enemas

If diagnosis is not Hirschsprung's disease, stricture, pre-op for reanastomosis, intussusception, or constipation:

Speak with pediatric radiologist before scheduling. Prep will be ordered as per pediatric radiologist.

CONTRAST ENEMA FOR INTUSSUSCEPTION

No prep.

VCUG

NPO 1 hour prior to exam.

Fistulogram

Speak with pediatric radiologist before scheduling who will advise re prep depending on anatomical part being examined.

BODY CT: NON-CONTRAST*

No prep.

* **If anesthesia is required**, follow prep guidelines of Department of Anesthesiology.

BODY CT: CONTRAST

NPO 2 hours prior to exam.

* **If anesthesia is required**, follow prep guidelines of Department of Anesthesiology.

BODY MRI

No prep.

***If anesthesia is required**, follow prep guidelines of Department of Anesthesiology.