

## **STANDARD HIP ARTHROGRAM**

FLUORO KVP – 70

PATIENT POSITION FOR FLUORO – SUPINE

CONTRAST AND OTHER SUPPLIES: 50mL OMNIPAQUE 300,  
ARTHROGRAM TRAY, STERILE GLOVES, 1% LIDOCAINE, ALCOHOL  
PREPS, MASKS, LEAD GLOVES AND APRONS.

### **GENERAL DESCRIPTION OF PROCEDURE AFTER SET-UP IS COMPLETE:**

- NO routine preliminary films are required.
- If preliminary films are required, the procedure for a routine hip should be followed.
- The radiologist will scrub the injection site with Betadine scrub.
- The technologist should assist the radiologist in drawing up the lidocaine and Omnipaque.
- The radiologist will drape the area and make all injections.
- Following the injection of the contrast, the radiologist will exercise the patient's knee for several minutes to disperse the contrast.
- The radiologist will then fluoroscope the patient's knee.
- Following the completion of fluoroscopy, the radiologist will instruct the technologist to perform overhead radiographs if needed.

## **HIP ARTHROGRAM**

HIP (UNILATERAL)

ROUTINE PROJECTIONS: AP PELVIS, FROG LATERAL or OR LATERAL  
(IF FX IS SUSPECTED).

**AP PELVIS:**

14 x 17  
BUCKY  
44"

CROSSWISE  
SUSPENDED RESPIRATION

PATIENT POSITION: Supine with mid-sagittal plane centered to the midline of the table. Invert the feet 15 degrees. Place top of film 1" above the crest.

CENTRAL RAY: Perpendicular to the midpoint of the film.

COLLIMATION: Collimate to the skin surface.

SHIELDING: None.

**FROG LATERAL:**

10 x 12  
BUCKY  
44"

CROSSWISE  
SUSPENDED RESPIRATION  
\*DO OR LATERAL IF FX SUSPECTED\*

PATIENT POSITION: From the AP position, draw the feet up towards the pelvis as much as possible. Then abduct the thigh and have the patient place the soles of their feet together.

CENTRAL RAY: Direct the central ray parallel to the femoral shaft, at the level of the symphysis pubis.

COLLIMATION: None.

SHIELDING: None.

**OR LATERAL:**

10 x 12  
GRID CASSETTE  
44"

LENGTHWISE  
SUSPENDED RESPIRATION

PATIENT POSITION: Flex the knee and hip of the unaffected side and position them outside of the central ray. Place the cassette just above the crest and parallel to the femoral neck.

CENTRAL RAY: Perpendicular to the film.

COLLIMATION: Collimate to the skin surface.

SHIELDING: None.

## **CT HIP ARTHROGRAM**

FLUORO KVP – 70

PATIENT POSITION FOR FLUORO – SUPINE

CONTRAST AND OTHER SUPPLIES: 50mL OMNIPAQUE 300,  
ARTHROGRAM TRAY, STERILE GLOVES, 1% LIDOCAINE, ALCOHOL  
PREPS, MASKS, LEAD GLOVES AND APRONS.

**GENERAL DESCRIPTION OF PROCEDURE AFTER SET-UP IS  
COMPLETE:**

- NO routine preliminary films are required.
- If preliminary films are required, the procedure for a routine hip should be followed.
- The radiologist will scrub the injection site with Betadine scrub.
- The technologist should assist the radiologist in drawing up the lidocaine and Omnipaque. (10mL omnipaque and 10mL lidocaine)
- The radiologist will drape the area and make all injections.
- Following the injection of the contrast, the radiologist will exercise the patient's knee for several minutes to disperse the contrast.
- The radiologist will then fluoroscope and image the patient's knee.
- Following the completion of fluoroscopy, the radiologist will instruct the technologist to perform overhead radiographs if needed.
- The patient will be immediately escorted to the CT department.

## **MRI HIP ARTHROGRAM**

FLUORO KVP – 70

PATIENT POSITION FOR FLUORO – SUPINE

CONTRAST AND OTHER SUPPLIES: 50mL OMNIPAQUE 300, ARTHROGRAM TRAY, STERILE GLOVES, 250 mL 0.9% SODIUM CHLORIDE, 2 mL GADOLINIUM, 1% LIDOCAINE, ALCOHOL PREPS, MASKS, LEAD GLOVES AND APRONS.

### **GENERAL DESCRIPTION OF PROCEDURE AFTER SET-UP IS COMPLETE:**

- NO routine preliminary films are required.
- If preliminary films are required, the procedure for a routine hip should be followed.
- The radiologist will scrub the injection site with Betadine scrub.
- The technologist will inject 2 mL of gadolinium into the 250 mL 0.9% sodium chloride
- The technologist should assist the radiologist in drawing up the lidocaine and Omnipaque and the gadolinium mixture
- The radiologist will drape the area and make all injections.
- Following the injection of the contrast, the radiologist will exercise the patient's knee for several minutes to disperse the contrast.
- The radiologist will then fluoroscope and image the patient's knee.
- Following the completion of fluoroscopy, the radiologist will instruct the technologist to perform overhead radiographs if needed.
- The patient will be immediately escorted to the MRI department.

