

## **HYSTEROSALPINGOGRAM**

**FLUORO KVP – 80**

**DIGITAL FLUORO WITH PATIENT INFORMATION TYPED IN**

**PATIENT POSITION FOR FLUORO – SUPINE**

**CONTRAST AND OTHER SUPPLIES: OMNIPAQUE, HSG TRAY, STERILE GLOVES, LAMP, STOOL, SHEETS, TOWELS AND WASHCLOTHES, BLUE PADS, BETADINE, SANITARY NAPKINS.**

### **GENERAL DESCRIPTION OF PROCEDURE:**

- The patient is instructed to completely empty their bladder prior to the preliminary radiograph.
- The technologist will take a preliminary AP radiograph of the bladder.
- A blue pad is placed under the patient and the patient is positioned towards the foot end of the table.
- The bucky should be position at the extreme head end of the table.
- The attending doctor will prepare syringes with contrast.
- After the attending doctor cleanses the perineal area, a vaginal speculum with a uterine cannula will be positioned against the external cervix.
- When the attending doctor is ready to inject the contrast, the radiologist should be called into the room.
- With the radiologist present to fluoro, the attending doctor will inject the contrast with the radiologist taking films as necessary.
- Following the completion of fluoroscopy, the radiologist will instruct the technologist to perform overhead radiographs if necessary.

## **HYSTEROSALPINGOGRAM**

**ROUTINE PROJECTIONS: AP BLADDER (PRELIMINARY)**

**AP BLADDER (PRELIMINARY):**

10 x 12  
BUCKY  
44"

LENGTHWISE  
SUSPENDED RESPIRATION

**PATIENT POSITION:** AP supine with the mid-sagittal plane centered to midline of the table.

**CENTRAL RAY:** Perpendicular to the film, 2" above the pubic symphysis.

**COLLIMATION:** Collimate to the skin surface.

**SHIELDING:** None.

