PEDIATRIC RENAL ULTRASOUND

Patient Preparation: None

III. Equipment: Performed with real-time scanner using a sector or curved linear transducer with frequencies ranging from 4.0 MHz to 10 MHz, higher frequencies often necessary for young children and infants.

IV. Procedure Protocol:

Note: Begin scan with urinary bladder, if bladder is not distended, give fluids, and rescan bladder at end of exam.

A. Urinary Bladder

Sagittal Views:

- 1. distended urinary bladder when possible
- 2. longitudinal and AP measurements while bladder is distended
- 3. maximum longitudinal and AP measurements immediately post void documenting any post void residual fluid

Transverse Views:

- 1. distended urinary bladder
- 2. transverse measurement while bladder is distended
- 3. AP measurement of bladder wall thickness (normal wall thickness = 3mm with distended urinary bladder, 5mm with empty bladder)
- 4. document ureteral jets using Power Doppler
- 5. transverse measurement immediately post void documenting any post void residual fluid
- 6. *COMMENT survey bladder wall for any focal lesions, image any record any adjacent abnormalities. Assess for debris within the urinary bladder, dilated distal ureter, posterior ureterocele, pelvic fluid.
- 7. Urinary bladder volume may be calculated using the following modified volume formula: L x W x H x 0.9 = cc

B Kidneys

Long Axis Views:

- 1. Longitudinal view to include liver/right kidney or spleen/left kidney interface; compare renal echogenicity to adjacent hepatic or splenic echogenicity
- 2. Longitudinal views include maximum renal length at the level of the hilum
- 3. Longitudinal medial view include medial portion of kidney
- 4. Longitudinal lateral view include lateral portion of kidney

[&]quot;Property of Radiologic Associates of Fredericksburg. Any distribution, publishing or exploitation of any content in this document is strictly prohibited. You may not otherwise download, display, copy, reproduce, distribute, modify, perform, transfer, create derivative works from, sell or otherwise exploit any content, code, data or materials from this document."

5. Longitudinal color/power Doppler view to assess for pyelonephritis (hypovascular). Can perform 3D color flow map.

Transverse Views:

- 1. superior pole
- 2. mid pole to include renal pelvis
- 3. inferior pole
- 4. If hydronephrosis (pelvicaliectasis) is seen, then must image with an EMPTY bladder to see if it persists.
- 5. *COMMENT PW and/or Color Doppler may be used to document renal artery and vein patency, to evaluate for medical renal disease, when clinically indicated, or to differentiate a dilated collecting system from vascular structures; assess kidney and perirenal areas for any abnormalities during routine imaging; assess for horshoe kidney or cross-fused ectopia; assess for renal parenchymal scarring, masses, pyelonephritis

C. Adrenal Glands

- 1. longitudinal view
- 2. transverse view

D. Pancreas

Transverse Views:

- 1. head/uncinate process assess distal common bile duct for dilatation
- 2. body/tail assess for pancreatic duct dilatation with measurement when indicated

Sagittal Views:

1. head - assess for common bile duct dilatation

"COMMENT - assess peripancreatic region for any evidence of adenopathy, inflammation, pseudocyst and/or fluid

E. Abdominal Aorta Sagittal

Views:

- 1 proximal / mid abdominal aorta posterior to left lobe of liver, include celiac axis and SMA when possible; include maximum AP diameter measurement
- mid / distal abdominal aorta distal to SMA; include maximum AP diameter measurement

"COMMENT - document and image any aortic dilatation in long axis (include maximum length and AP diameter measurements) and transverse views (include maximum transverse and AP diameter measurements);

PW and/or Color Doppler may be used when clinically indicated to evaluate flow in the abdominal aorta

F. Inferior Vena Cava

"Property of Radiologic Associates of Fredericksburg. Any distribution, publishing or exploitation of any content in this document is strictly prohibited. You may not otherwise download, display, copy, reproduce, distribute, modify, perform, transfer, create derivative works from, sell or otherwise exploit any content, code, data or materials from this document."

1. image in long axis documenting position of inferior vena cava as it passes through liver

PEDIATRIC RENAL JULTRASOUND IMAGE SUMMARY

Image:

- 1. bladder long
- 2. bladder trans
- 3. bladder wall thickness
- 4. ureteral jet documentation
- 5. bladder (post void) long
- 6. bladder (post void) trans
- 7. right kidney/liver long
- 8. right kidney long
- 9. right kidney long
- 10. right kidney long medial
- 11. right kidney long lateral
- 12. right kidney trans superior
- 13. right kidney trans mid
- 14. right kidney trans mid
- 15. right kidney trans inferior
- 16. right adrenal long
- 17. right adrenal transverse
- 18. left kidney/spleen long
- 19. left kidney long
- 20. left kidney long
- 21. left kidney long medial
- 22. left kidney long lateral
- 23. left kidney trans superior
- 24. left kidney trans mid
- 25. left kidney trans mid
- 26. left kidney trans inferior
- 27. left adrenal long
- 28. left adrenal transverse
- 29. pancreas (head/uncinate) transverse
- 30. pancreas (body/tail) transverse
- 31. aorta (proximal) long

"Property of Radiologic Associates of Fredericksburg. Any distribution, publishing or exploitation of any content in this document is strictly prohibited. You may not otherwise download, display, copy, reproduce, distribute, modify, perform, transfer, create derivative works from, sell or otherwise exploit any content, code, data or materials from this document."

- 32. aorta (mid) long
- 33. aorta (distal)- long
- 34. IVC long

Measurement:

- 1. AP + Length
- 2. AP + transverse
- 3. AP
- 5. AP + length
- 6. AP and transverse
- 7. AP + length
- 8. Length
- 13. AP + transverse
- 19. Length
 - 24. AP + transverse
- 31. AP
- 32. AP

[&]quot;Property of Radiologic Associates of Fredericksburg. Any distribution, publishing or exploitation of any content in this document is strictly prohibited. You may not otherwise download, display, copy, reproduce, distribute, modify, perform, transfer, create derivative works from, sell or otherwise exploit any content, code, data or materials from this document."