

CT Urogram Guideline

Indications: Painless hematuria, known or suspected tumor in bladder, ureter or renal collecting systems. Typically in patients over 50 years old. Consider getting Radiologist input if requested on patients under 50, especially if patient is female, and especially if requested by a provider other than a urologist.

Oral Contrast: NONE; *1 hour before the exam:* patient to drink 1 L of water on the way to procedure or at check-in

IV Contrast: Yes (See MRG Contrast Media Administration Policy);

140ml contrast given, in two separate and timed injections

Scan 1: non contrast

Scan 2: Inject 70ml at 3ml/sec, wait 10 MINUTES

Inject 70ml at 3ml/sec

100 SECONDS after beginning of second injection, SCAN

Scan 3: (*Only scan if ureters not opacified in previous scan*)

Immediately place patient in prone position

RESCOUT the patient

Series	1	2	3 (IF NEEDED) Depends on Ureter Opacification
Positioning	Supine	Supine	<i>Prone</i> (RESCOUT patient)
FOV	Patient Size	Patient Size	Patient Size
Axial Reconstruction: Thickness/ Interval/ Algorithm	3mm/1.5mm/Soft	(1) 3mm/1.5mm/Soft (2) 3mm/1.5mm/Sharp	3mm/1.5mm/Soft
Reconstruction Interval	1.5 mm	1.5 mm	1.5 mm
Start Location	2-3cm above top of kidneys	Above highest dome of the diaphragm	2-3cm above top of kidneys
End Location	through the inferior- most bony pelvis	through the inferior- most bony pelvis	through the inferior- most bony pelvis
Gantry Angle	None	None	None
Reformations: Thickness/ Interval/ Algorithm	(1) Coronal 3mm/3mm/Soft (2) Sagittal 3mm/3mm/Soft	(1) Coronal 3mm/3mm/Soft (2) Sagittal 3mm/3mm/Soft	(1) Coronal 3mm/3mm/Soft (2) Sagittal 3mm/3mm/Soft
Phase of Respiration	Inspiration	Inspiration	Inspiration