

Nuclear Medicine IP/OP Preparation

Diagnostic Radiology

Test Length	Procedures	Instructions
Injection: 15min Scan: 30- 90min	Bone Scan	 15 mins. for Injection. 3 hr wait between injection and scan. Imaging takes 30-90 min. Patient should have empty bladder when returning for scan.
20 mins.	Bone Density	 No Calcium morning prior to scan No Nuc Med Procedures within the last 7 days No GI Contrast within the last 2 wks.
Patient return for additional scanning up to 3 days	Cisternogram Radionuclide (CSF)	 Injection is performed via Lumbar Puncture. Please consult General Radiology Fluoroscopy for preparation. Imaging at 2 hrs, 6 hrs, 24 hrs, 48 hrs
1 hr.	Cystogram	1. Will require catheter insertion for the procedure.
Injection: 15min 48 hrs. (Usually Infection Gallium – 30-60 mins.) 72 hr. Gallium (Oncology) – 2 hrs.	Gallium - Infection - Oncology	 Should not have had CT Scan with Contrast prior to Oncology Gallium. Images are acquired at 72 hrs post injection If scan is done for bone infection, Bone Scan must be completed first. Images are acquired at 24 or 48 hrs post injection (physician determined)
2 hrs.	Gastric Emptying	 Patient must be NPO for 4 hrs. Patient will be required to eat a fried egg sandwich If Patient is an Insulin Dependent Diabetic, check with Nuclear Medicine Department.



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Initial –90 mins. 4 hrs. later—1 hr. Day 2—3 hrs.	Gastroesophageal	 NPO after Midnight Sedation may be required Bring patient's liquid food to department
2-3 hrs.	HIDA Scan (Hepatobiliary)	 Patient must be NPO for 6 hrs. Inpatient should have a saline lock Avoid Demerol or Morphine prior to scan. Complete prep sheet available from Department. If being done for Biliary Atresia, consult Nuclear Medicine Physician.
2 hrs.	Hypertensive Renal	 Patient must be hydrated with a working IV If not ambulatory, must know correct height and weight of patient Patient should be off ACE Inhibitors for at least 72 hrs prior to scan if medically feasible List of current medications should accompany the patient
2 hrs.	Meckels	 NPO after midnight Patient will be given Rantadine before procedure
Injection: 15 mins. Image at 24hr, 48hr, 72hr for 2 hrs each day	MIBG	1. Drugs to be avoided prior to study: Labetalol, Reserpene, Tricyclic Antidepressants, Calcium Channel Blockers, Sympathomemetics including nasal decongestants
1 hr.	MUGA Scan	 Inpatient must have saline lock that we can take blood from



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6 hrs.	Myocardial Perfusion	1. NPO 4 hrs prior to appointment
	(MIBI or Thallium)	2. No Caffeine 24 hrs prior
		 No smoking day of test Must be able to walk on a treadmill if coming for a
		Stress Test
		5. Persantine MIBI contraindications: Asthma, unstable
		Angina, Migraine headaches
		6. Inpatient should have a working saline lock
		7. Full prep available from Nuclear Medicine Department
Injection: 15	Octreotide Scan	1. Patient should be well hydrated with at least 4 cups of
min		water prior to the injection and 4 cups after the
Imaging at 1		injection. Patient may void as needed.
Imaging at 4 hrs, 24 hrs		 Discontinue Somato-Statin therapy if medically feasible
and possibly		
48 hrs		
30 min. – 1	Renal Scan	1. If not ambulatory must know correct height and weight
hr.	Lasix Renal Scan	of patient
		 Inpatient should have a saline lock Patients scheduled for Lasix should drink 16 oz. of
		water 20 min prior to their appointment. The patient
		may void as needed
1 st Day – 15	Thyroid Uptake/Scan	1 Dationts should be off all thursid modication pending
min.		 Patients should be off all thyroid medication pending physician approval for 6 weeks prior to the
2 nd Day – 1 hr.		appointment
		 The patient should not have had any iodine contrast (eg CT) for 2 months prior to the appointment
		3. Complete prep available from the Nuclear Medicine
		Department
45 min.	VQ Scan	1. Patient must be able to lie flat
		 CXR required within 24hrs prior to study
		3. Patient must be cooperative as they will be required to
		breathe through a closed system following specific instruction