

# Intravenous Urography

**Intravenous Urography** is a specialized X-ray examination to demonstrate the kidneys, ureters, and bladder (urinary system) using an intravenous contrast medium.

#### What to Expect During the Procedure

- Before the examination, you will be asked to empty your bladder.
- The examination will be done with you lying down on the X-ray couch.
- You will then be given an injection of the contrast medium. When the contrast medium is injected, you may feel a warm sensation in the body. Do not worry, this sensation will disappear within a minute, and the contrast medium will be passed out in your urine in 15 to 30 minutes.
- A compression band will be applied over your abdominal region for about 10 to 20 minutes. The compression band is necessary for better visualization of the kidneys.
- A series of X-rays images will be taken at different time intervals during the examination.
- At the later stage of the procedure, you will be asked to visit the toilet to empty your bladder again before taking the X-ray.

You will be expected to spend approximately 1-2 hours at the imaging centre.

#### After the Procedure

You may resume normal activity after the procedure. Your doctor will advise you of the results at your next appointment.

#### What are the Risks

The main risks of the procedure are allergic reactions to the contrast agent and leakage of the contrast outside the vein. These risks are low and we will take all necessary precautions to minimize these risks.

Should you have any queries or require further clarifications, please contact:

National University Hospital Department of Diagnostic Imaging Tel: (65) 6772 2263 Fax: (65) 6779 5219 Email: DDI\_enquiries@nuhs.edu.sg

# Your Intravenous Urography Appointment

# **National University Hospital**

National University Hospital

**Department of Diagnostic Imaging** 

Medical Centre, Level 4

### **Patient Particulars:**

**Appointment Date/Time:** 

**Estimated Fees:** 

Note:

- Please do not bring valuables or excess cash with you. Patients and visitors are responsible for your personal belongings.
- No medical certificate will be issued for this appointment. Time chit will be given upon request.

Please arrive at least 15 mins before your appointment to register and prepare for the procedure.

We appreciate your understanding should an unforeseen delay occur due to medical exigencies.

Kindly inform us if you are unable to keep to the scheduled appointment.

# Preparation Instructions for Patient

- 1. **BOWEL PREPARATION** for emptying your bowel for clearer images.
  - Refrigerate suppository.
  - Be on a low fiber diet 2 days before the appointment.

✓ Foods that may be taken: lean meat, steamed fish, boiled rice and boiled potato.

**x** Foods to **AVOID**: vegetables, brown bread and fruits.

• Take 2 tablets of Dulcolax with plenty of water the night before your appointment.

Date: \_\_\_\_\_ Time: \_\_\_\_\_

• Insert suppository into your rectum at 7am on the day of your appointment.

• Time for the medication to take effect differ between individuals.

### 2. PLEASE FAST <u>6 HOURS before</u> appointment time.

(Staff to  $\square$  the appropriate boxes)

For fasting diabetic patients, please stop all diabetic medications (including insulin injections) on the day of scan. Diabetic on Metformin – to stop Metformin on the day of the exam, and to restart after 48 hours.

Stop medication date/time: \_\_\_\_\_

Restart medication date/time: \_\_\_\_\_

For asthma / multiple drug allergies / previous minor reaction to injection of contrast media.
Please obtain the following prescription from your referring doctor:
30 mg prednisolone on the night before the scan.
Date: Time:
<b>30 mg</b> prednisolone on the morning of the scan.
Date: Time:
IMPORTANT REMINDERS
• Please inform your referring doctor if you have asthma, severe drug allergies, renal problems or are taking a diabetic medication called Metformin (Glucophage).
<ul> <li>Please inform us if you are breastfeeding or if there is a possibility you are pregnant.</li> </ul>
<ul> <li>Please inform us if you have had a recent abdominal surgery or injury.</li> </ul>
Please bring this leaflet on the day of your appointment

# **National University Hospital**

5 Lower Kent Ridge Road, Singapore 119074 OneNUHS Hotline: (65) 6908 2222 OneNUHS General Enquiries: <u>contactus@nuhs.edu.sg</u> OneNUHS Appointments: <u>appointment@nuhs.edu.sg</u> www.nuh.com.sg

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