Guidelines and Tips for Ordering Tests

To schedule an appointment with Radiology at any of our convenient locations, please call Central Scheduling at (860) 358-2600

MAMMOGRAPHY

All exam preps are on reverse side of appointment sheet. Also, please have the patient bring all pertinent prior imaging studies.

• Screening Mammography:

All routine, yearly mammograms for asymptomatic patients greater than 40 years of age. Screening mammograms can also be performed on women under the age of 40 if there is a strong family history of breast or ovarian cancer.

Some common diagnoses that fall under the screening mammogram guidelines are: fibrocystic breast disease, calcifications (stable after two years), hormone replacement therapy, breast implants and breast reduction surgery.

Please note that an ultrasound may be required in conjunction with a screening mammogram if the patient has known dense breast tissue.

Diagnostic Mammography:

Unilateral or bilateral diagnostic mammograms must be performed while a radiologist is on site to monitor exam. One of the following criteria must be met:

- a.) There must be signs or symptoms suggestive of malignancy (e.g. mass, some types of spontaneous nipple discharge, skin changes, unilateral breast pain, or unilateral axillary lymph nodes).
- b.) There is a short interval follow-up requested (at six-month intervals up to two years) necessary for unresolved clinical/radiographic findings.
- c.) Following an established personal history of breast cancer (primary or secondary) up to five years.
- d.) d. Suspected leakage of implant.
- e.) If the patient presents with a lump, mass or pain an ultrasound exam should also be scheduled with the diagnostic mammogram.

Please note that male patients with gynomastia will have a diagnostic mammogram performed.

All patients who have a new, palpable breast lump or nodule require an ultrasound to be ordered as well. If your patient comes in with symptoms requiring a diagnostic unilateral mammogram and it is less than 4 months until their bilateral exam is due, we will perform a bilateral exam. However we will ask for a new exam order for the bilateral study. This ensures that the patient stays up to date with both breasts being examined mammographically. In most instances there will not be an issue with insurance payment if both breasts are done at that time.

It is important to note that the mammography technologist will ask your patients a series of health questions. This ensures an up to date clinical breast history. If the history indicates that a diagnostic study should have been ordered and the radiologist agrees and is on site, a diagnostic mammogram will be performed. If the radiologist is not on site, the patient will be rescheduled when the radiologist is available.

Stereotactic procedures whether done radiographically, under ultrasound or magnetic resonance guidance are scheduled with the mammography lead technologist, Trish Hatin. The phone number is (860) 358-2560. The

script can be faxed to her at (860) 358-2531. The patient will be contacted and screened. Your office will be contacted with the date and time of the appointment. The results will be faxed to your office usually within 48 hours. The radiologist will speak to the patient directly with the results.

Ultrasound cyst aspirations are also scheduled with the mammography lead technologist.

Middlesex Hospital participates with the Early Detection Program (EDP), and is accredited by the National Accreditation Program for Breast Centers, the American College of Radiology and the Food and Drug Administration.

Note: All patients who have a new palpable breast lump or nodule require an ultrasound, to be ordered as well.

BONE DENSITY

- Bone Density exams take about 30 minutes and are usually performed for the following indications:
- Females
 - Post Menopausal
 - Have a strong family history of Osteoporosis
- Male or Female
 - Have a history of prolonged steroid use
 - Have experience a significant loss of height
 - Have a history of skeletal fractures

Preparation:

- Should be scheduled within 10 days of the onset of the patient's period.
- Should have the test performed before any nuclear medicine or radiologic exams requiring oral or IV contrast.
- Avoid ingestion of calcium pills the day of the exam.
- Patient should wear comfortable clothes without zippers or buckles.
- Must be 450 pounds or less.

Note: Insurance companies generally pay for one exam every 2 years unless the patient has a documented history of osteoporosis.

MRI / MRA

MRI Safety – Who can or cannot be scanned:

- Can be scanned:
- a.) Joint replacements done more than 6 weeks prior
- b.) Rods or plates on bones more than 6 weeks old
- c.) Spinal fusion with metal plates or rods
- d.) Cranial plates from craniotomies
- e.) All dental work (including braces and permanent dentures)
- f.) Operative clips including sternal clips more than six weeks old
- g.) Ports or groshong catheters
- h.) Heart valves done more than 6 weeks prior
- i.) Cerebral aneurysm clips ONLY with documentation of exact type used
 - Cannot be scanned:
- a.) Pacemakers Never!!!
- b.) Neurostimulators or other electrical device
- c.) A history of metal in the eye. The patient may need to have an orbit x-ray before the exam if there is a history

d.) Over 440 lbs

If you have any questions, please call Dennis O'Neil at (860) 358-2582 or (860) 358-2589.

MRI

All exam preps are on reverse side of appointment sheet.

MRI MRCP exams require that the patient fasts for 4 hours prior to the scheduled appointment time.

- Please indicate if your patient has had previous heart, brain, or back surgeries, or if they are claustrophobic.
- For contrast studies on patients 60 and over, please provide BUNt creatinine if done within the last 60 days.

U/S ULTRASOUND

All exam preps are on reverse side of appointment sheet.

- Abdomen U/S Epigastric pain, abdomen pain, RUQ pain, F/U nonspecific CT.
- Limited Abdomen U/S RUQ only pain, gallstones, liver and pancreas, as a follow up from another exam, such as mass or elevated LFTs please be organ specific, F/U to finding on CT or MRI.
- Full Pelvic U/S Left or right quad pain, adrenal mass, post-menopausal bleeding, endometrial stripe, appendix (female).
- Limited Pelvic U/S Known/follow-up of cyst, ovarian cyst, known mass, appendix (male).
- Transvaginal U/S Endometrial stripe, post-menopausal bleeding, ovarian or uterine pathology when the patient is unable to drink. The patient must be 18 or sexually active to have this procedure.
- Aorta U/S ABD pain, palpable mass, abdominal aortic aneurysm.
- Breast U/S Palpable mass, women ages 12 through 30, F/U abnormal mammogram.
- Carotid U/S Bruit, syncope, dizziness, TIA, CVA, weakness on either side of body.
- DVT U/S Pain, swelling, question of clot.
- Kidney / Renals U/S Pain, hematuria, hypertension, high bun, flank pain includes bladder.
- Pregnancy U/S Size and dates, size larger than dates, size smaller than dates, diabetes, bleeding.
- Limited Pregnancy U/S AFI, fetal heartbeat, post dates, placenta location, and position of baby.
- Testicles / Scrotum U/S Pain, swelling, fever, trauma, undescended, torsion.
- Thyroid U/S Goiter, elevated thyroid functions, palpable mass, F/U to nuclear med scan.

NUCLEAR MEDICINE

All exam preps are on reverse side of appointment sheet.

- Bone scan whole body METs, cancer, tumors, bone pain.
- Bone scan 3 phase All extremities, hips and pelvis, osteomyelitis, cellulitis, infections, FXs.
- Brain spect Lyme disease, stroke, brain tumor.
- Enalapril Renal artery stenois, hypertension.
- GI bleed/ GI blood loss Known GI bleed.
- HIDA scan Cholecystitis, bile tear, RUQ pain specify with or without CCK Injection (CCK will allow an
 ejection fraction to be determined).
- MUGA scan Pre- and post-chemo to check wall motion of left ventricle of heart and obtain ejection fraction.
- Octreoscan Tumors.
- *PET Scan Cancer staging and detection, Alzheimer's.

- * PET scans require the "PET" consultation sheet to be filled-out for scheduling.
- Thyroid scan with or without uptake Goiter, hypothyroidism, hyperthyroidism, thyroid mass, Graves's disease (uptake gives percent value to determine hypo vs. hyper).
- VQ Scan Lung Scan SOB, pulmonary embolism, inflammation diseases.

PET SCANS

The PET imaging system, located at the Outpatient Center on Saybrook Road in Middletown, performs whole body PET imaging using radioactive sugar. The CT portion of the scanner generates a non-diagnostic CT used for image calibration only. If a diagnostic CT is required in addition to the PET study, a separate exam request must be completed with all necessary pre-certification numbers obtained for both exams.

The PET consultation sheet must be completed for all PET exam requests.

- Patient Preparation:
- a.) The patient cannot be pregnant or breast-feeding any children.
- b.) The patient should refrain from strenuous exercise the day before and the day of the exam.
- c.) The patient must be well hydrated. Please have the patient drink 3 to 5, 8-ounce cups of water before arriving for their exam.
- d.) Nothing else to eat or drink for 6 hours prior to the exam.
- e.) No gum chewing or sucking on any candy prior to the exam.
- f.) Except for diabetic medications, it is okay for the patient to take other medication with water only.
- g.) For diabetics: Instruct the patient to take one-half of their normal insulin treatment at least two hours before the exam. The patient's glucose levels must be under 200 at the time of the exam. Please call (860) 358-6207 with any questions relating to your diabetic patient's exam preparation.

Exam Description:

The patient will be receiving an intravenous injection of radioactive sugar, FDG. The patient will then rest quietly in a reclining chair in a darkened room for one hour. This is called uptake period and allows for the metabolism of the radio-isotope by the patient's body. The patient will then be asked to empty his or her bladder and then be placed on the scanner for imaging. This imaging will take between 30 and 45 minutes unless the patient is being evaluated for melanoma, which then will take an additional 15 minutes. There are no restrictions placed on the patient when they leave the PET facility.

Please ask the patient to bring any prior PET or related exams.

Please call (860) 358-6207 with any questions.

FLUOROSCOPY/IVP

UGI, Small Bowel Series, Barium Swallow

Nothing to eat or drink after midnight the night before the exam.

Barium Enema

THINGS TO PURCHASE:

- Four (4) Dulcolax tablets and One (1) 238 gram bottle of Miralax at the pharmacy.
- 64 oz of Sugar free Gatorade or Powerade

FIVE DAYS PRIOR TO PROCEDURE:

- Restricted residue diet-DO NOT eat nuts, seeds, popcorn or corn.
- Call radiology scheduling if you have chronic constipation, kidney disease or heart problems.

DAY BEFORE YOUR PROCEDURE:

- 1. Starting with breakfast, consume only clear liquids (NO SOLID FOOD).
- 2. Mix the entire 238 gram bottle of Miralax with 64 oz. of Gatorade or Powerade. Thorough shake the 64 oz. Miralax solution and refrigerate.
- 3. 3 PM: Take 2 of the Dulcolax tablets with 8 oz. of water
- 4. 5 PM: Begin to drink the Miralax Solution. Try to drink 8 oz. every 15-30 minutes until you have finished the solution.
- 5. Loose, watery bowel movements should start after 1-1 ½ hours.
- 6. 1 hour after finishing the Miralax Solution: Take the remaining 2 Dulcolax tabs.
- 7. Drink clear liquids until bedtime. The more fluids you drink, the better your prep will be.

DAY OF THE PROCEDURE:

Nothing by mouth AFTER MIDNIGHT.

If you take essential medications, take them the morning of the procedure with a small amount of water. If the medication is not essential wait until after the procedure to take them.

ALLOWED CLEAR LIQUIDS: Water, Gatorade or Powerade, broth, tea, coffee without milk or cream and clear soda. Drink as much as possible to avoid dehydration.

FOR QUESTIONS PLEASE CALL 860-358-2500

IVP Exams

From either your physician or pharmacy, obtain a Ducolax Bowel Cleansing Lit and (1) 10 oz. bottle of Magnesium Citrate 3 days before your scheduled exam. Follow the instructions for the "24 hour" preparation.

Patients over 60 years of age must have a creatinine test within 60 days of the exam and ideally performed the day before the exam.

For patients who are Diabetics and are on Glucophage or Glucovance should not take these medications until 48 hours after the injection of the IVP contrast material.

It is recommended that a creatinine be performed before resuming these medications.