

Interventional Radiology

What is Interventional Radiology (IR)?

Interventional Radiology, also called **IR**, is a section within Radiology that uses X-ray, fluoroscopy or ultrasound imaging to assist in performing minimally invasive procedures.

X-ray is the most common form of radiology testing. It can be used to look at many parts of the body, including the lungs, abdomen and bones.

Fluoroscopy is much like an X-ray movie. Fluoroscopy uses **continuous X-rays** to watch the movement of the body displayed on a monitor in real time during the exam.

Ultrasound uses sound waves to make pictures of the inside of the body.

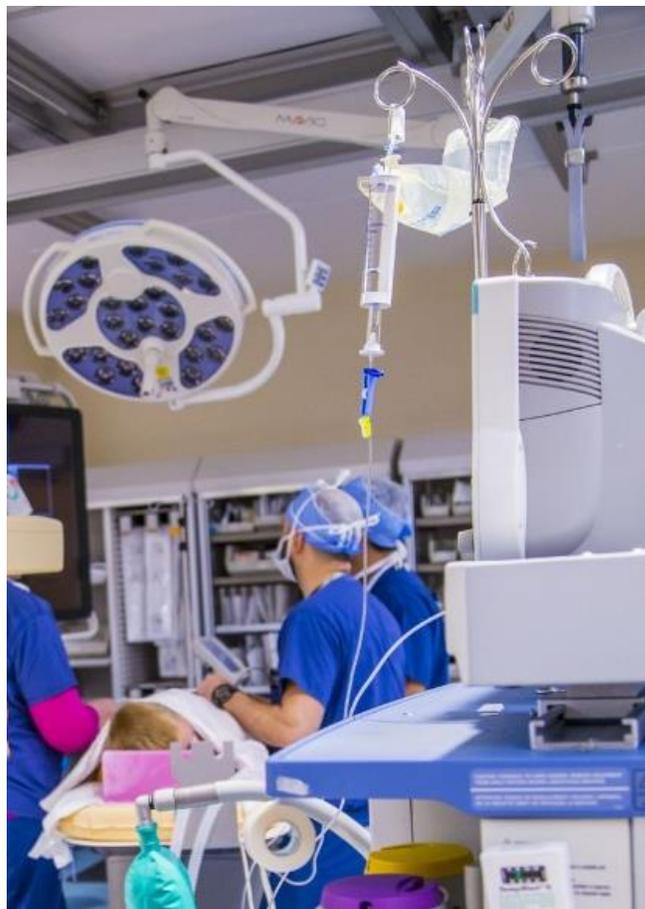
Many of the minimally invasive procedures done in IR may reduce the need for surgery.

The team of skilled and trained professionals on the IR team include interventional radiologists (pediatric radiology physicians trained to perform procedures), radiology technologists and registered nurses.

When undergoing any IR procedure, sedation and/or general anesthesia is sometimes necessary. If your child will require sedation or general anesthesia, this will be discussed prior to your child's appointment.

Common procedures in Interventional Radiology:

- Abscess drainage – removal of infected fluid found inside the body
- Arteriogram/Venogram – pictures of the veins and arteries
- Biopsies – including the liver, kidney, lung and abnormal tissues
- Primary gastrostomy tube placement – feeding tube placed on the abdomen that ends in the stomach
- Gastrojejunostomy tube placement and exchanges – feeding tube that ends in the small



intestines

- Nasojejunal (NJ) tube placement – feeding tube that goes from the nose to the small intestines
- Nephrostomy tube placement – tube that drains urine from the kidneys
- Peripherally inserted central catheters (PICC) – special intravenous catheter that can be used for an extended time
- Port-a-cath placement – long-term catheter placed in a large blood vessel with a reservoir that rests under the skin on the chest
- Sclerotherapy – treatment for lymphatic or venous malformations (abnormal blood vessel formations)

Eating and drinking before the procedure:

Many of the procedures done in IR require your child to fast prior to arrival at the hospital. If sedation or general anesthesia is scheduled for your child's exam, eating instructions will be provided by the radiology schedulers prior to arrival for this exam.

If your child will be given anesthesia, your child cannot eat or drink before the procedure.

Follow these instructions:

Heavy meal:

- Last feeding **8 hours** before your child's IR procedure.
- Stop giving your child heavy foods, such as meat, fried foods, ice cream, gum, mints and candy. Instead, your child can have light foods, such as toast, oatmeal, crackers, or a granola or protein bar.

Light meal:

- Last feeding **6 hours** before your child's IR procedure.
- Stop giving your child any type of food, orange juice and milk.

Infant formula or milk:

- Last feeding **6 hours** before your child's IR procedure.
- Stop giving your child infant formula or milk.

Breastmilk:

- Last feeding **4 hours** before your child's IR procedure.
- Stop giving your child breastmilk.

Clear liquids:

- Last drink will be **2 hours** before your child's IR procedure.
- Clear liquids are liquids you can see through, such as water, apple juice, Gatorade[®] (do not give your child red, orange or purple Gatorade[®]), Pedialyte[®] or other clear juices. No orange juice.

What to expect the day of the IR procedure:

- **Your child should take his or her usual medicines before the procedure, unless given additional instructions by your doctor or nurse.**
- Sometimes the doctor will ask you to stop certain medications before the day of the procedure, like aspirin or other medications that would affect how the blood clots.
- Your child will need to have a bath the night before and will be asked to change into a patient gown before the procedure. This will be provided by the IR staff.
- If your child has ever had a **kidney problem** or **kidney disease**, please tell your child's nurse, doctor and the technologist before the procedure. It is important to notify staff prior to your child receiving any contrast.
- If your child has ever had a **reaction** or **allergy to a contrast agent** used for an IR procedure, MRI or CT scan, please tell your child's nurse, doctor and the technologist before the procedure.

After the IR procedure:

- The interventional radiologist will discuss findings and details of the procedure before the family leaves the hospital.
- Most children who received general anesthesia for their IR procedure will be transported from the IR room to the recovery room. Parents can be present in the recovery room as directed by the staff.