

## Small Bowel Follow-Thru

The small bowel is obtained using a barium-based contrast dye and a real-time x-ray every fifteen minutes. It can be used to diagnose a blockage, polyps, cancer, and other symptoms. It is a safe and noninvasive procedure that can take up to one hour. The patient will be asked to drink 120 mL of gastrografin before the procedure. However, if the patient has an NG tube in place. The contrast will be administered through the NG tube. We will ask the patient to lie on their right side between each x-ray to ensure the fluid passes from the stomach into the small intestine.

There are a few questions that must be asked before beginning the procedure such as; “what are your allergies, when was your last bowel movement, where is your pain coming from, and have you had any recent surgery?” If the patient is not allergic then we will proceed with using gastrografin. The first question is the most important because we could have created another problem that could have been prevented. We also need to confirm when the patient's last bowel movement was so we know whether the patient is passing liquids or solids. Knowing when their last surgery was could also bring up any further questions on whether the surgery was pertaining to their intestine.

During a small bowel follow-thru, it is important to send a scout x-ray to the Radiologist so they can determine if they would like to proceed with the procedure. It is also important to be thorough when providing information to the Radiologist about the patient's history. Being thorough will allow the Radiologist to dictate the exam with minimum errors. The Radiologist will be able to advocate further diagnosis and treatment when they are provided with detailed information about the patient. Not providing detailed patient history to the Radiologist could have allowed the Radiologist to misinterpret a diagnosis.

Being said, I rate my patient history technique an 8 out of 10. I could have improved my skills by using plain language. Instead of asking the patient “when was your last bowel movement?” I could have simply asked, “when was the last time you used the bathroom?” Some patients may not know the definition behind bowel movement. Therefore, using plain language could have allowed the patient to give a more accurate response to the question being asked.