Cholecystostomy

WHY IS THIS TEST DONE:
The gallbladder is a small sac-like structure under the liver. It stores bile that is secreted into the intestines to help digest fats. The gallbladder can become obstructed or infected. Treatment usually includes antibiotics and, if necessary, surgical removal. However, sometimes surgery is not an option because the patient is too sick or for other reasons. In these cases, an interventional radiologist will perform a cholecystostomy, a procedure in which a drainage catheter is placed in the gallbladder. This catheter keeps the gallbladder from getting too swollen, until the child is well enough for surgery. For questions specific to the diagnosis, please contact your primary physician.

WHAT TO EXPECT:
The patient will arrive at the hospital and enter at the main entrance. The patient will report in to register and review insurance. The patient should have a copy of the orders as a precaution. The patient will be brought back to the department where we will confirm the patient’s identity, explain the procedure, and review their history.

Using ultrasound and live X-ray (fluoroscopy) for guidance, the radiologist will insert a small needle through the skin and into the gallbladder, and then place a tiny catheter into the gallbladder. The catheter will be connected to a drainage bag or bulb, which will be located outside of the body in the right upper abdomen.

Your child will be protected by an X-ray shield during the procedure

HOW LONG WILL IT TAKE?
The actual exam can take between one to three hours. In most cases you child will be admitted into the hospital. If the patient was given an order (prescription) for the exam, they must have that with them at the time of the exam. Patients should expect to receive instructions from radiology nurse 1 or 2 days prior to procedure. Please follow instructions exactly.
PREPARATION:
If your child was given a copy of the exam order or a prescription for the exam, you must present it at time of registration. Your child should expect to receive instructions from a radiology nurse 2 to 3 days prior to scheduled procedure. Please make sure to follow instructions as given.

PRECAUTIONS:
The precautions of the actual procedure will be discussed with the Pediatric Radiologist. The procedure is considered low-risk. However, potential complications include:

- Bleeding
- Infection
- Injury to the gallbladder
- Bile leak (biloma)
- Puncture of the lung (very rare)
- Allergic reaction to X-ray dye (contrast reaction)
- Right shoulder pain (radiating from the liver)

Contact us immediately if your child experiences any of the following:

- Bleeding from the bandage site
- Fever higher than 101° Fahrenheit
- Leakage such as pus or bile (yellow-green liquid) around the drainage bag
- Severe abdominal pain; right shoulder pain
- Yellowing of the skin or eyes (jaundice)

Monday through Friday, call EPCH radiology department at (915) 242-8510. After hours, you may call EPCH emergency department at (915) 298-5443.

CONTRAINDICATIONS:
Please notify your physician and the Imaging staff if you have any allergies, especially to local anesthetics such as lidocaine.

MEDICATION ISSUES:
Patient should avoid taking anti-inflammatory medication 24-48 hours prior to procedure (ex:
Advil, Motrin, ibuprofen, Aleve, naproxyn, etc.), aspirin, plavix, coumadin, or any other blood thinners should be stopped prior to exam. Please be sure to discuss discontinuation or prescribed medications with your physician, they will tell you how many days prior to the procedure to discontinue you medications. Do not discontinue medications without consulting with your physician first.