

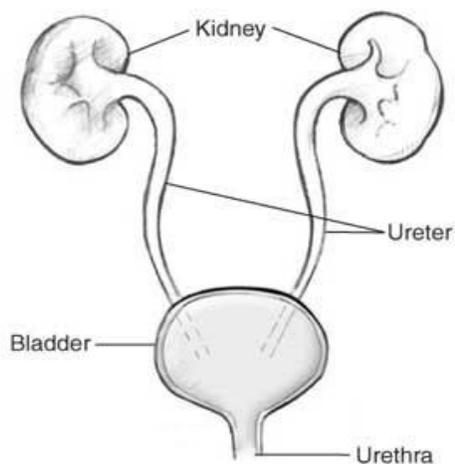
VUCG

(Voiding Cystourethrogram)

What is a VUCG?

Note: child-friendly language in green.

- A study of your child's bladder and the tubes (ureters and urethra) connected to it.
- A VUCG uses a kind of x-ray (fluoroscopy) and a special liquid (contrast) to see inside your child's body.



Why is it done?

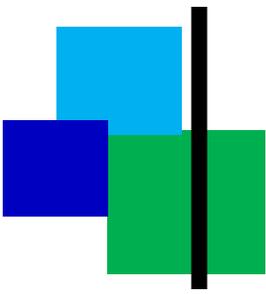
- A VUCG shows the structure of your child's bladder, ureters, and urethra, as well as how they are working.
- A VUCG looks for vesicoureteral reflux (VUR), which is a possible cause of urinary tract infections (UTI).
- Typically, urine (pee) is made in the kidneys, flows down the ureters to the bladder, and empties out of the bladder as your child urinates. VUR occurs when urine instead flows backwards up to the kidneys.



Fluoroscopy Room

What can I do to help my child?

- Child life specialists are available to help your child better understand and cope with the scan.
- Parents/caregivers are also encouraged to be with their child during the scan, though there are some exceptions. Women who may be pregnant cannot be in the fluoroscopy room during the procedure.
- Please ask a staff member for more information about these options for support!



What should I expect during the procedure?

The entire test takes about 30-40 minutes and is done in three stages. Please note that sedation is a potential option for the placement of the catheter. If you are interested in learning more, please contact your referring physician.

Stage 1: Getting ready

- First, the staff will ask you some general questions about your child's health and give him/her a hospital gown (special picture outfit) to change into.
- Next, the technologist (person who helps take the pictures) will help your child lie down on the camera bed and will take the first x-ray picture (warm-up picture) of his/her abdomen (belly).
- The nurse or technologist will then use cotton balls and betadine (brown soap) to wash the area where your child urinates (pees).
 - * Some kids say this part feels cold and wet.
 - * Girls will be asked to make "frog legs" (feet together, knees apart while lying down) to help the nurse or technologist see the area to be cleaned. Practicing "frog legs" at home can help make this part easier.
- The nurse or technologist will then insert a catheter (small, soft tube) into your child's urethra (the opening where pee comes out) and into the bladder.
 - * Your child may feel a sense of pressure and/or experience the urge to urinate.
 - * Encourage your child to take deep breaths to help make this part easier and faster.

Stage 2: Pictures

- The radiologist (picture doctor) will move a large camera above your child and begin taking pictures. Colorless contrast (special water) will flow through the catheter into the bladder so that the radiologist can clearly see the structure and function of the bladder.
 - * Your child will eventually feel a strong urge to urinate.
 - * Encourage him/her to hold his/her urine as long as possible by taking more deep breaths.

Stage 3: Going to the bathroom

- When your child can no longer hold his/her urine, he/she will be asked to urinate while lying down under the camera. The radiologist will take a few last pictures while your child urinates.
 - * A bedpan or urinal (special potty/toilet) will be provided to your child based on age and gender.
- After all of the pictures are taken, the technologist will gently slide out the catheter.



Fluoroscopy Room

Tips for preparing your child for a VCUg



A child life specialist (CLS) can help support your child for his/her procedure by explaining it in developmentally appropriate language and suggesting possible coping strategies. If you would like to speak to a CLS before your appointment, see [back for contact information](#).

Infants (0-12 months old):

- Remember you are the biggest comfort to your child. Your presence will help him/her feel as safe and secure as possible.
- If you are prepared mentally and physically, you will be more relaxed around your child.
- Bring familiar objects that comfort your child, such as a favorite blanket, toy, or pacifier.
- Remember that children use many different ways to cope. Crying is a healthy and normal way for children to cope because it allows them to express their emotions.

Toddlers (1-3 years old):

- Begin preparing your child the day before.
- Use simple words to describe what your child may experience.
- Tell your child that pictures will be taken so that the doctor can learn more about his/her body.
- Tell your child that a nurse or technologist will touch the area where he/she pees and that it is okay.
- Reassure your child that you will be close.
- Bring comfort items with you that help your child feel safe, such as a favorite toy or blanket.
- Toddlers are learning to be independent and make their own choices; offer them realistic choices. For example, “Which stuffed animal should we bring?”

Preschoolers (3-5 years old):

- Begin preparing your child about 1-3 days in advance.
- Talk to your child about why he/she is having pictures taken. For example, “The doctor wants to take special pictures of the part of your body that helps you go to the bathroom.”
- Let your child know that to help him/her get ready for the pictures, a nurse or technologist will gently place a small, soft tube into the opening where his/her pee comes out.
- Talk about ways to make the “tube” part easier, such as pretending to blow out birthday candles.
- Let your child know he/she will be asked to go to the bathroom while lying down under the camera.
- Encourage your child to ask questions.

School Age and Up (6 years old and up):

- Prepare your child at least a few days in advance.
 - Talk to your child about why the doctor wants to take special pictures of inside his/her body. For example, for younger children, “So the doctor can learn more about how your body works.” For older children, “So the doctor can learn whether you have reflux or not.”
 - Explain to your child what he/she might see, hear, and feel in the order things will occur. Use child-friendly and/or real terms depending on your child’s age/preference.
 - Talk to your child about different ways to cope. Some children like to know everything that is happening; others want to direct their attention elsewhere. Remind them that either way is okay.
 - Encourage your child/teen to ask questions.
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Child Life

Children's National Hospital Department of Radiology is staffed with Certified Child Life Specialists. Child life specialists are trained to address the emotional and developmental needs of children and their families during healthcare experiences and can provide procedural preparation and support before and during your child's exam.

Contact Information

If you would like to speak to a child life specialist before your child's radiology appointment, please call **(202) 476-3338** or email **childliferadiology@childrensnational.org**.

Created by Children's National Child Life Services