General Reference:
Hepatobiliary_Scintigraphy_V4.0

Common Indications:
Evaluation of persisting abdominal pain in patients with prior (non-acute) cholecystectomy.

Pre-scan Clinical History:
Determine history related to stated clinical history. Locate any pertinent imaging results which describe related findings.

Patient Preparation:
NPO for 4 hours prior to exam. No narcotic analgesics for 8 hours prior to exam.

Relative Contraindications (if present, consult with nuclear medicine physician prior to scan):
1. Recent nuclear medicine studies
2. Recent barium contrast studies
3. Pregnancy

Radiopharmaceutical and Route of Administration:
4 to 6 mCi Tc99m Choletec injected intravenously.

CCK Preparation:
1. Inject 5mL sterile water into a 5mg kinevac vial and agitate. This will create a concentration of 1mg per 1mL (for 3mg vials, adjust the sterile water to 3ml to create a 1mg/1ml concentration).
2. Calculate the amount of CCK to be infused according to the following formula:

    (weight in pounds/2.2)(0.02). This will give the amount in ml to be withdrawn from the CCK vial.

3. Withdraw the calculated amount from the CCK vial and inject into a 50mL 0.9% normal saline bag.

Procedure:
1. Prepare CCK using the protocol described in the protocol “HIDA with CCK” protocol.
2. Infuse the CCK over 3 minutes. This can be done either by hand or via IV pump.
3. When the CCK infusion has finished, wait 15 minutes.
4. With the patient under the camera, inject Choletec and acquire flow and dynamic images.
    a. Flow: Anterior 60 frames at 2 seconds/frame (2 minutes)
    b. Anterior dynamic, 60 frames at 60 seconds per frame (60 minutes)
    c. Right lateral static, 128x128 matrix, 300 seconds

Review:
Prepare images and documents for clinical review as per **Nuclear Imaging Acquisition and Presentation Guidelines**.

Dr. Barr | Date Implemented: 2009 | Date Revised: 11/2018 | Date Reviewed: 8/2025