


Name of Policy: Agitated Saline Contrast Echo Policy Number: 3364-106-E08 Approving Officer: Chief Executive Officer-UTMC Responsible Agent: Director of Cardiovascular Services Scope: University of Toledo Medical Center		 Effective date: 3/24/2025 Original effective date: 9/2003	
Key words: Echo, Echocardiography, Saline, Protocol, Contrast			
<input type="checkbox"/>	New policy proposal	<input type="checkbox"/>	Minor/technical revision of existing policy
<input type="checkbox"/>	Major revision of existing policy	<input checked="" type="checkbox"/>	Reaffirmation of existing policy

(A) Policy Statement

The Echo Lab provides agitated saline contrast injections for assessment of intra cardiac shunts and to assess right sided pressures.

(B) Purpose of Policy

To provide criteria for using agitated saline on patients requiring this contrast.

(C) Procedure

Criteria for Agitated Saline Contrast Usage:

Basic criteria may include, but not limited to, the following:

1. Echocardiogram – If the right side (right atrium or right ventricle) is moderately enlarged without clinical reason stated in the order.
2. If the patient has the diagnosis of pulmonary hypertension and you are unable to obtain right sided pressures.
3. If a congenital abnormality is suspected.
4. If abnormal Doppler flow is suspected, and agitated saline is needed to document a cardiac shunt.
5. If a Transesophageal Echocardiogram or Echocardiogram is ordered to rule out source of emboli, saline injection is needed to assess for patent foreman ovale.

Protocol

If the criteria for Agitated Saline use is met as mentioned above, the following will be implemented:

1. The sonographer or physician will assess the need for Agitated Saline in compliance with the procedure.
2. The RN, Nuclear Technologist or Sonographer should be contacted to start the IV if needed.
3. Use 10cc agitated saline in a 3-way stopcock with an empty 10cc syringe. The RN, physician, or Sonographer will inject the saline. Multiple injections (usually 2-4) with and without valsalva will be performed.

<p>Approved by:</p> <p>/s/</p> <hr/> <p>Todd Korzec, RN, BSN Director, Cardiovascular Services</p> <p>1/31/2025</p> <hr/> <p>Date</p> <p>/s/</p> <hr/> <p>Samer J. Khouri MD Medical Director, Non-Invasive Cardiac Imaging</p> <p>3/7/2025</p> <hr/> <p>Date</p> <p>/s/</p> <hr/> <p>Christine Stesney-Ridenour, FACHE Chief Operating Officer</p> <p>3/24/2025</p> <hr/> <p>Date</p> <p><i>Review/Revision Completed by: Director, Cardiovascular Services</i></p>	<p>Policies Superseded by This Policy:</p> <ul style="list-style-type: none">• <i>None</i> <p>Initial effective date: 9/2003</p> <p>Review/Revision Date:</p> <p>5/04 5/07 1/09 8/25/2010 6/2013 3/2016 3/2019 3/2022 7/23 3/24/2025</p> <p>Next review date: 3/24/2028</p>
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