VisionHD FOR DOUBLE CONTRAST UPPER GI FLUOROSCOPY

BARIUM FOR SUSPENSION
98% w/v

VisionHD barium sulfate powder suspension 98% w/w

Engineered as a high-density (98% w/w) barium powder for suspension, VisionHD is tailored for double-contrast radiographic examination of the gastrointestinal tract, esophagus, stomach and duodenum. For both adults and children.

Preparation

Shake VisionHD barium sulfate powder bottle upside down to aerate the dry powder.

1 Reconstitution Instructions

a). Measure:

Add 65 mL of water to the bottle of VisionHD powder.

b). Mix:

Secure the cap and shake vigorously for 30 seconds.

Wait 5 minutes, then shake again thoroughly.

Yields ~140 mL of oral suspension (2.38 g/mL barium sulfate).

c). Set aside until after effervescent granules administration. *(See below)*

2 Effervescent Granule Administration

Add one packet of effervescent gas granules to 5 mL of water.

Ask patient to swallow immediately.

Give patient VisionHD to consume and begin procedure.

Post-Exam Instructions for Patient

Hydration: Encourage plenty of fluids for 48 hrs.

Diet: Patient may eat and drink immediately.

Safety Information

For oral administration only. This product should not be used in patients with known or suspected perforation of the GI tract, known obstruction of the GI tract, conditions associated with high risk of GI perforation or aspiration, or known hypersensitivity to barium sulfate or any of the excipients in VisionHD. Intra-abdominal leakage may occur in conditions such as GI fistula, ulcer, inflammatory bowel disease, appendicitis or diverticulitis, severe stenosis or obstructing lesions of the GI tract. Caution is recommended in patients with history of food aspiration and known swallowing disorders. Patients should maintain adequate hydration in days following a barium sulfate procedure to avoid obstruction or impaction. Please consult full Prescribing Information for VisionHD online at: https://voyageurpharmaceuticals.ca/vision-hd

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FROM THE EARTH TO THE BOTTLE®

These guidelines are suggested uses only final discretion always rests with the attending radiologist.

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