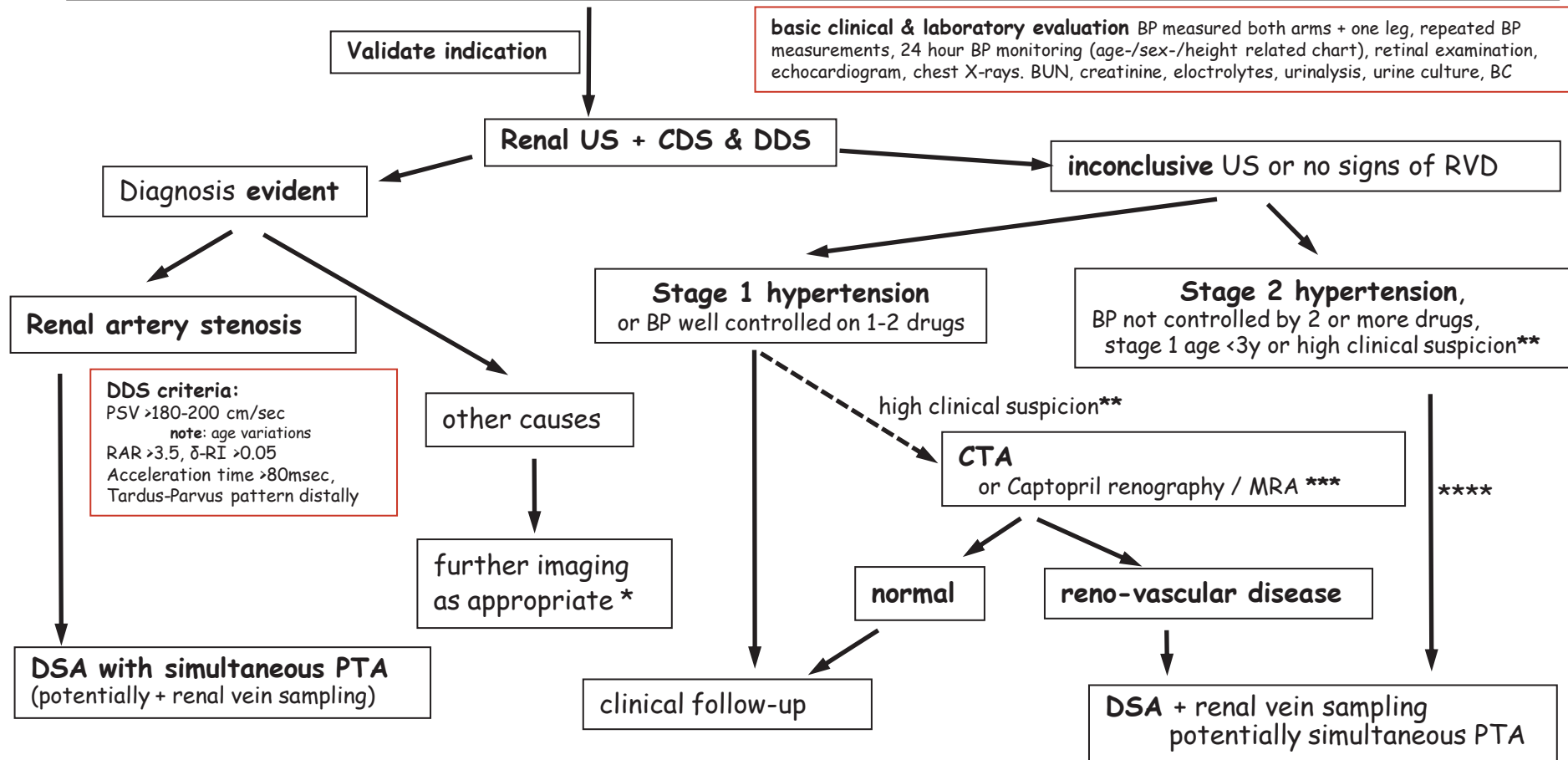


Imaging algorithm for infants & children with potential reno-vascular hypertension



* Further imaging as appropriately indicated (see existing recommendations ...)

** **High clinical suspicion:** history of renal trauma or radiation, umbilical artery catheterization, renal vascular thrombosis, bruit over renal arteries, high renin levels, presence of disease associated with renovascular pathology (e.g., neurofibromatosis, Williams's syndrome, tuberous sclerosis)

*** **MRA:** potentially & increasingly, ce-MRU for large vessels & infarcted areas, non-enhanced MRA techniques for smaller vessels - if available?

**** **Captopril scintigraphy:** potentially prior to PTA for function, particularly in doubtful situations or neonates until old enough for PTA, local variations

Abbreviations: BC = blood count, BP = blood pressure, BUN = blood urea nitrogen, CDS = colour Doppler sonography, cm/sec =centimetres per second, CTA = CT-angiography, DSA = digital subtraction angiography, DDS = spectral duplex Doppler, MRA = MR angiography, PSV = peak, systolic velocity, PTA =percutaneous transluminal angioplasty, RAR =renal aortic ratio, δ-RI = Resistive Index difference, RVD=renovascular disease, US = ultrasound, y = year