

CONTRAST ALLERGY POLICY

Patients who have documented mild to moderate reaction (see below) to iodinated contrast must be premedicated before obtaining intravenous iodinated contrast or gadolinium. Patients with a history of severe reactions will not be administered intravenous or intrathecal contrast without prior consultation with the radiologist.

Mild reaction: nausea and vomiting, cough, hives, rash, flushing or warmth, headache, dizziness, anxiety, pallor, chills, sweats, nasal stuffiness, swelling of eyes or face, altered sense of taste.

Moderate reaction: wheezing / bronchospasm, hypertension, laryngeal edema, dyspnea, tachycardia/bradycardia, pronounced cutaneous reaction.

Severe reaction: unresponsiveness, convulsions, arrhythmia, profound hypotension, cardiopulmonary arrest.

Our protocol for premedication of outpatients is as follows:

- Prednisone 50 mg PO 13 hrs, 7 hrs, and 1 hr prior to scan.
- Benadryl 50 mg PO 1 hour prior to scan

Alternate regimens are available for patients with allergy to prednisone or Benadryl.