

Quinte Health – Diagnostic Imaging Department Recommended Adult Prophylaxis Regimen for Iodinated Contrast

Hypersensitivity reactions to IV contrast (i.e. CT scan dye) are allergic-like reactions. Premedication does not prevent all reactions; however, one of the following protocols can be used for at-risk patients in order to mitigate the likelihood of an allergic-like reaction.

Elective Outpatient Medication:

Prednisone 50 mg PO 13 hours, 7 hours, and 1 hour before the study

OR

Methylprednisolone (Medrol) 32 mg PO 12 hours and 2 hours before the study

PLUS

Diphenhydramine (Benadryl) 50 mg PO 1 hour before the study

Emergency Premedication:

In decreasing order of desirability

Option 1. Methylprednisolone sodium succinate (Solu-Medrol) 40 mg <u>OR</u> hydrocortisone sodium succinate (Solu-Cortef®) 200 mg intravenously every 4 hours until contrast study required. <u>PLUS</u> diphenhydramine 50 mg IV 1 hour prior to contrast injection. Protocol duration minimum is 4-5 hours.

Option 2. Dexamethasone sodium sulfate (Decadron) 7.5 mg <u>OR</u> betamethasone 6.0 mg intravenously every 4 hours until contrast study must be done in patent with known allergy to methylpred-nisolone, aspirin, or non-steroidal anti-inflammatory drugs, especially if asthmatic.

<u>PLUS</u> diphenhydramine 50 mg IV 1 hour prior to contrast injection.

Protocol duration minimum is 4-5 hours.

Option 3. Omit steroids entirely and give diphenhydramine 50 mg IV 1 hour prior to contrast injection.

Note: IV steroids have not been shown to be effective when administered less than 4 to 6 hours prior to contrast injection.

From: ACR Manual On Contrast Media Version 10.3, 2018.