

Premedication Protocol for Patients with Iodine Sensitivity

In outpatient diagnostic centers, anaphylactic reactions relative to procedures using contrast media are riskier than in institutions set up to handle them (i.e. the hospital setting). Because of this, there are established guidelines for the proper triage of individuals who are at high risk for anaphylaxis with the consensus being that some patients just should not be done in outpatient facilities. This is one of the reasons that MIMA only uses nonionic contrast media.

The following protocol should be used for the identified patients:

1. Those with history of prior sensitivity to iodinated contrast media with minor reactions (i.e. hives, itching).
2. Those with multiple allergies.
3. Those with overt anxiety.

Premedication Protocol:

- 50 mg Prednisone PO (or other steroid of choice) at 8pm the night before the exam and 1 hour prior to the exam;
- 150 mg Ranitidine (Zantac) PO 1 hour prior to the exam;
- 10 mg Claritin PO one (1) hour prior to exam.

****Patients Considered High Risk****

These patients should have contrast studies performed in the hospital setting with possible anesthesia stand-by.

The patient has had a previous reaction to contrast media such as:

- Anaphylaxis
- Respiratory / cardiovascular symptoms (i.e. dyspnea, hypotension, etc.)
- Laryngeal edema
- Prior history of non-contrast related anaphylaxis

In the event that a high risk patient inadvertently presents to MIMA Radiology for a contrast study, the patient will be counseled and the imaging staff will attempt to have the patient scheduled for that same day at a local hospital facility.

If we are unable to obtain an appointment for the same day, an appointment will be made and the patient will be directed back to the referring physician's office for any additional preparatory prescription needs.

The physician's office will also be notified by MIMA Radiology regarding the time/date of the patient's pending appointment.