

PREMEDICATION PROTOCOLS FOR CONTRAST ADMINISTRATION

ROUTINE STUDY PREMEDICATION

Prednisone-based: 50 mg prednisone by mouth at 13 hours, 7 hours, and 1 hour before contrast medium administration, plus 50 mg diphenhydramine intravenously, intramuscularly, or by mouth 1 hour before contrast medium administration

or

Methylprednisolone-based: 32 mg methylprednisolone by mouth 12 hours and 2 hours before contrast medium administration. In addition, 50 mg diphenhydramine intravenously, intramuscularly, or by mouth 1 hour before contrast medium administration

EMERGENT STUDY PREMEDICATION (in decreasing order of desirability)

Methylprednisolone sodium succinate (e.g., Solu-Medrol[®]) 40 mg IV or hydrocortisone sodium succinate (e.g., Solu-Cortef[®]) 200 mg intravenously immediately, and then every 4 hours until contrast medium administration, plus diphenhydramine 50 mg IV 1 hour before contrast medium administration. This regimen usually is 4-5 hours in duration.

or

Dexamethasone sodium sulfate (e.g., Decadron[®]) 7.5 mg IV immediately, and then every 4 hours until contrast medium administration, plus diphenhydramine 50 mg IV 1 hour before contrast medium administration. This regimen may be useful in patients with an allergy to methylprednisolone and is also usually 4-5 hours in duration.

or

Methylprednisolone sodium succinate (e.g., Solu-Medrol[®]) 40 mg IV or hydrocortisone sodium succinate (e.g., Solu-Cortef[®]) 200 mg IV, plus diphenhydramine 50 mg IV, each 1 hour before contrast medium administration. This regimen, and all other regimens with a duration less than 4-5 hours, has no evidence of efficacy. It may be considered in emergent situations when there are no alternatives.

NOTE: Premedication regimens less than 4-5 hours in duration (oral or IV) have not been shown to be effective

Information taken from The American College of Radiology Manual on Contrast Media (v 10.3)