

Contrast and Premedication Information

What are the IV contrast agents that are used at Central Oregon Radiology (CORA)?

Contrast materials, also called contrast agents or contrast media, are used to improve the accuracy of medical images produced by x-rays, computed tomography (CT), and magnetic resonance (MR) imaging.

At CORA, we use two basic types of IV contrast agents:

- Iodinated contrast for x-ray and CT studies
- Gadolinium-based contrast for MRI

Does your patient need premedication if they are receiving IV contrast?

Patients who have only had vasovagal reactions, nausea, vomiting, or contrast-induced renal dysfunction do NOT need steroid/antihistamine premedication. These drugs will not prevent or alleviate these symptoms.

MILD REACTIONS – hives, nasal congestion, itching, mild shortness of breath require the premedication as described below.

SEVERE REACTIONS – laryngeal edema, severe shortness of breath, or anaphylactoid response need to be discussed with a radiologist prior to scheduling to determine if an alternative test can answer the clinical question. Call (541) 382-6633, option 3 to speak to a radiologist.

What about patients with history of anaphylaxis?

Patients with prior severe life-threatening reaction to ANY substance, other than iodinated contrast, that required hospitalization are recommended to have our standard premedication protocol prior to iodinated IV contrast injection.

Patients with prior anaphylactic reactions to imaging contrast agents (ex: iodinated contrast for CT, gadolinium for MRI) need to be discussed with a radiologist prior to scheduling to determine if an alternative test could be performed. This includes any reaction that required urgent medical care. Call (541) 382-6633 to speak to a radiologist.

What is the suggested premedication protocol and why do I need to prescribe it?

Prednisone: 50 mg by mouth at 13 hours, 7 hours, and 1 hour before contrast media injection. *(The emergency 1-hour premedication protocol is not indicated in the outpatient setting).*

The referring provider should prescribe the premedication protocol for his or her patient. The referring provider is more familiar with the patient's medical history and current condition.