MEDICINE

EXAMPLE PREMEDICATION REGIMENS

Prednisone 50 mg PO 13, 7 and 1 hour prior to contrast

and

Benadryl 50 mg PO/IV 1 hour prior to contrast

OR

40 mg solumedrol IV 4 hours prior to contrast

and

Benadryl 50 mg PO/IV 1 hr prior to contrast

CONTRAST EXTRAVASATION

Elevate arm (heart level), apply cool compress, remove rings. Observe. Consider surgical consultation for decreased perfusion, sensation, strength, active range of motion, or increasing pain.

Document reaction & monitor for return of symptoms post-treatment

HIVES/DIFFUSE ERYTHEMA

- 1. Observation; monitor vitals q 15 min. Preserve IV access.
- 2. If associated with hypotension or respiratory distress then considered **Anaphylaxis**:
 - ◆ O₂ 6-10 L/min by face mask
 - IVF 0.9% NS wide open; elevate legs > 60°
 - Epinephrine 0.3 mL of 1mg/mL IM (or autoinjector) OR Epinephrine 1 mL of 1mg/10mL (0.1 mg/mL) IV with slow flush or IV fluids
 - Call 911 or CODE BLUE
- 3. If ONLY skin findings but severe or progressive may consider Benadryl 50 mg PO, IM, IV but may cause or worsen hypotension.

HYPOTENSION WITH TACHYCARDIA (ANAPHYLAXIS)

- 1. Preserve IV access, monitor vitals q 15m
- 2. O₂ 6-10 L/min by face mask
- 3. Elevate legs $> 60^{\circ}$
- 4. IVF 0.9% NS wide open
- 5. Epinephrine 0.3 mL of 1mg/mL IM (or auto-injector) OR Epinephrine 1 mL of 1mg/10mL (0.1 mg/mL) IV with slow flush or IV fluids
- 6. Call 911 or CODE BLUE

HYPOTENSION WITH BRADYCARDIA

- 1. Preserve IV access; monitor vitals
- **2.** O_2 6-10 L/min by face mask
- 3. Elevate legs $> 60^{\circ}$
- 4. IVF 0.9% NS wide open
- **5.** Atropine 0.6-1.0 mg IV if refractory
- 6. Consider calling 911 or CODE BLUE

LARYNGEAL EDEMA (INSPIRATORY STRIDOR)

- 1. Preserve IV access, monitor vitals
- 2. O_2 6-10 L/ min by face mask
- 3. Epinephrine 0.3 mL of 1mg/ mL IM (or auto-injector) OR Epinephrine 1 mL of 1mg/10mL (0.1 mg/mL) IV with slow flush or IV fluids
- 4. Call 911 or CODE BLUE

BRONCHOSPASM (EXPIRATORY WHEEZE)

- 1. Preserve IV access, monitor vitals
- 2. O_2 6-10 L/min by face mask
- 3. Beta-2 agonist inhaler 2 puffs; repeat x 3
- 4. If not responding or severe, then use Epinephrine 0.3 mL of 1mg/ mL IM (or auto-injector) OR Epinephrine 1 mL of 1mg/10mL (0.1 mg/mL) IV with slow flush or IV fluids
- 5. Call 911 or CODE BLUE

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