**MR**

**1. Indications for Steroid Premedication**

•     Patients with history of mild\*(see list below) allergic-like reaction to gadolinium-based contrast media.

\* hives, rash, itching, limited swelling (i.e. one extremity, not face), "itchy"/"scratchy" throat

-Note 1: In cases where prompt imaging diagnosis and treatment should not be delayed, patients with history of prior MILD allergic reaction to gadolinium-based contrast media may be injected without premedication in ER or inpatient settings, or in outpatient settings where transfer to ER or inpatient care is immediately available.

 -Note 2: At times, the potential risks of premedication may outweigh the benefits. Therefore, it is not necessary to be absolutely rigid in patients with a history of a prior MILD allergic-like reaction to gadolinium-based contrast media. Please see individual facility guidelines.

In a patient with a previous allergic-like reaction to a specific gadolinium-based contrast agent, it may be prudent to use a different gadolinium-based contrast agent and premedicate for subsequent MR examinations, although there are no published studies to confirm that this approach is efficacious in reducing the likelihood of a repeat contrast reaction.

**2.  No Premedication Required**

•     Reactions to allergens (including seafood and “Iodine allergies”) or medications (regardless of number or severity)

•     Asthma

•     Physiologic reaction to gadolinium-based contrast media

such as a vasovagal reactions, warmth, nausea, vomiting

•  Prior reaction of any severity to iodinated CT contrast material

**3. No** **contrast** should be administered if any of the following reaction(s) occurred to gadolinium-based contrast unless, in the opinion of the responsible health care professional and supervising radiologist, the potential benefits outweigh the risks (i.e. emergency situations):

Anaphylactic shock or cardiopulmonary arrest

Throat Closing/ Difficulty Breathing

Facial or diffuse body swelling

Any other reaction that required the administration of epinephrine or an Emergency Department evaluation