[Facility Logo]	Page: 1 of 3
	Effective Date: 01/31/24
No: CLN.07.05.MOD	Corporate Approval Date: 01/16/24
Title : Radiographic/Imaging Contrast Media (CO-3.006)	Previous Versions: 07/30/19; 09/19/16; 10/16/09
	Medical Staff Approval Date: [Include if policy requires Med Staff approval]
	Governing Board Approval Date: [Include if policy requires Governing Board approval]

I. Scope:

[Identify the people/groups/entities covered by the policy. Sample language: This policy applies to John Doe Hospital and its off-campus departments ("Facility").]

II. Purpose:

To provide proper review, storage, and safe administration of Radiographic/Imaging Contrast Media ("Contrast Media").

III. Definitions:

Contrast Media: Is a substance introduced into a part of the body in order to improve the visibility of internal structure during radiography.

IV. Policy:

Contrast Media is considered a medication and must be provided to patients in accordance with all pertinent state and federal regulations, and applicable accreditation standards. Facilities shall adopt policies that provide for ordering, patient screening, and recognition and treatment of patient adverse reactions.

V. **Procedure**:

- A. Physician Orders
 - 1. Facilities shall adopt a medical staff approved guideline/protocol that guides administration.
 - 2. Facilities shall adopt a screening tool, specific to contrast media, and adopt a medical staff approved protocol for premedication for those at risk of adverse events.
 - 3. Guidelines/Protocols shall be readily available for reference within the radiology procedural areas.
 - 4. Radiographic/Imaging contrast must only be administered by a duly licensed or credentialled healthcare professional under the supervision of a physician.
 - a. All personnel who inject intravenous contrast should be prepared to 1) recognize adverse events 2) take appropriate measures to manage the adverse reaction, including: notifying the supervising radiologist (or his/her designee), monitoring the

[Facility Logo]	Page: 2 of 3
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patient, administering certain medications, and/or calling for additional assistance (emergency service providers, "code team", etc.).

- 5. Method of delivery: Intravenous contrast may be injected by hand or power injector as indicated by procedure.
- 6. Prospective pharmacy review is not required when Contrast Media is administered pursuant to the medical staff approved guideline/protocol.
 - a. Physician direct supervision requirements must be met.
 - b. Physician or LIP shall be available for timely intervention in the event of an emergency.
- 7. Administration of contrast must be preceded by a physician's order for imaging exam with contrast.
- 8. Orders for Contrast Media shall conform with the Hospital's policy medication management policies for complete orders.
- 9. The Hospital shall adopt appropriate screening for risk factors and will comply with the Hospital policy on appropriate medication administration.
 - a. The hospital shall adopt a protocol for Contrast Media pre-medication for patients at risk for adverse events.
- B. Storage
 - 1. Contrast Media shall be stored in accordance with manufacturer, and State and Federal regulatory guidelines.

VI. Enforcement:

All employees whose responsibilities are affected by this policy are expected to be familiar with the basic procedures and responsibilities created by this policy. Failure to comply with this policy will be subject to appropriate performance management pursuant to all applicable policies and procedures, up to and including termination. Such performance management may also include modification of compensation, including any merit or discretionary compensation awards, as allowed by applicable law.

VII. References:

American College of Radiology (ACR) Manual on Contrast Media (2023). ACR Committee on Drugs and Contrast Media. <u>https://www.acr.org/-/media/ACR/Files/Clinical-Resources/Contrast_Media.pdf</u>

[Facility Logo]	Page: 3 of 3
	Effective Date: 01/31/24
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Morcos SK. Review article: Acute serious and fatal reactions to contrast media: our current understanding. Br J Radiol. 2005 Aug;78(932):686-93.

Beckett KR, Moriarity AK, Langer JM. Safe Use of Contrast Media: What the Radiologist Needs to Know. Radiographics. 2015 Oct;35(6):1738-1750.