



**Injection of Intravenous Contrast
(Without a Registered Medical Practitioner Present)
Procedure**

Procedure Number

CHC-RAD-001

Version Nos:

3

1. Purpose

This Procedure outlines the steps that must occur when IV contrast (for either an Intravenous Urogram or a CT scan) is administered in the absence of doctor within the West Coast District Health Board (WCDHB) Grey Base Hospital Radiology Department.

2. Application

This Procedure is to be followed by all staff throughout the WCDHB Grey Base Hospital Radiology Department.

3. Definitions

There are no definitions associated with this Procedure:

4. Responsibilities

For the purposes of this Procedure:

All WCDHB Staff Members are required to abide by the requirements of this Procedure

5. Resources Required

This Procedure requires:

- i) IV Contrast
- ii) Consent Form

6. Process

1.00 Introduction

- 1.01 On receiving the referral the MRT undertaking the examination will contact a Radiologist to determine that the examination is justified and that IV contrast is indicated.
- 1.02 The dosage will be determined from existing protocols.
- 1.03 The patient will be counseled about the risk of IV contrast and written informed consent obtained. If any risk factors are identified the situation will be reviewed with the Radiologist.

2.00 Checking The Contrast

- 2.01 Two MRTs will check the contrast for name, volume and expiry date. The MRTs will use the “contrast chant” to minimise errors.

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3.00 During The Scan

- 3.01 Both MRTs will stay in the xray/scanner room until the contrast is fully administered.
- 3.02 The patient will remain in the room under direct observation of one of the MRTs for 10 minutes after contrast administration.
- 3.03 Outpatients may then have their IV cannula removed and can go home 20 minutes post contrast injection if there are no complications.

4.00 If a Reaction Develops

- 4.01 If the patient develops a severe reaction e.g. anaphylaxis, the MRT is to push the cardiac arrest alarm and dial 777. MRT is then to attend to patient.
- 1.06 If the patient develops a moderate reaction the MRT is to push the cardiac arrest alarm and dial 777 if in doubt about patient stability, otherwise seeks help from the A&E Department. (NOTE: As x2 MRTs are present one can go for help while other remains).
- 1.07 If the patient develops a mild reaction (e.g. rash, nausea), the MRT is to monitor the patient and send them to the A&E Department (if required). Otherwise patient can go home once symptoms settle.

7. Precautions And Considerations

- ➔ MRT undertaking the examination will contact a Radiologist to determine that the examination is justified and that IV contrast is indicated.
- ➔ Two MRTs will check the contrast for name, volume and expiry date.
- ➔ If the patient develops a severe reaction e.g. anaphylaxis, the MRT is to push the cardiac arrest alarm and dial 777. MRT is then to attend to patient.

8. References

There are no references associated with this Procedure.

9. Related Documents

Revision History	Version:	3
	Developed By:	Charge MRT
	Authorised By:	CQIT
	Date Authorised:	July 2004
	Date Last Reviewed:	July 2008
	Date Of Next Review:	July 2010