

Radiology Hydration Protocol for CT Intravenous contrast

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Intravenous contrast can lead to contrast induced nephropathy.

If a patient gives an answer of yes to any items below then serum creatinine with calculated eGFR within 6 weeks is required (unless life-threatening condition and extremely urgent imaging is required)

1. Age >60
2. Known renal disease, renal failure, transplant or single kidney
3. Diabetes
4. Hypertension currently being treated
5. Heart disease
6. On immunosuppression for transplant
7. Chemotherapy in the last two weeks
8. Pregnant
9. Myasthenia gravis

Hydration protocol:

- A. GFR > 60 – Post-procedure 2500 ml water over next 24 hours
- B. GFR 60-45 and not fluid restricted – Oral hydration
 1. Pre-procedure: 500 ml water up to 2hr prior to exam OR water-soluble oral contrast
 2. Post-procedure: 2500 ml water over the next 24 hours after exam
- C. GFR <45 or fluid restricted with GFR 60-45 – IV hydration
 1. Pre-procedure: IV saline 3ml/kg/hr for 1hr for maximum of 300ml
 2. Post-procedure: IV saline 2ml/kg/hr for 3hr maximum of 600ml
- D. GFR <45 and fluid restricted or poorly compensated CHF - IV hydration
 1. Pre-procedure: 1ml/kg/hr for 1hr for maximum of 300ml
 2. Post-procedure: 1ml/kg/hr for 3hr for maximum of 500ml