IODINATED IV CONTRAST USE IN PATIENTS TAKING METFORMIN

- Metformin use is only a consideration in patients receiving <u>iodinated</u> IV or intra-arterial contrast.
- Metformin use is not a concern in patients receiving gadolinium IV contrast for MRI.
- Metformin itself is not nephrotoxic (toxic to the kidneys). The concern is if a patient taking metformin were to suffer acute kidney injury after receiving iodinated IV contrast administration, a byproduct of metformin (lactic acid) could build up in the patient and result in harm.
- All <u>outpatients</u> who take a metformin-containing medication require a GFR level within 30 days prior to receiving iodinated IV contrast.
- All <u>inpatients</u> and <u>ER patients</u> who take a metformin-containing medication require a GFR level within 24 hours prior to receiving iodinated IV contrast.
- Only patients with a GFR <30 mL/min receiving iodinated IV contrast and all patients receiving iodinated intra-arterial contrast will be instructed to discontinue metformin-containing medication for 48 hours after receiving contrast. The patient will be given an instruction handout stating the same.
- Medications containing metformin include: metformin, Glucophage, Glumetza, Riomet, Fortamet, Glucovance, Metaglip, Synjardy, Xigduo, Invokamet, Janumet, Kanzano, Jentadueto, Kombiglyze, ACTOplus Met, Avandamet.