

Computed tomography (CT) is one of the biggest breakthroughs in diagnostic imaging [1]. Extrarenal acute adverse reactions associated with intravenous contrast administration are categorized as mild (mild edema, urticaria, and nasal leakage), moderate (pruritus, bronchospasm, and facial edema) and severe (anaphylactic shock, facial and laryngeal edema, and bronchospasm with hypoxia) [5]. In Poland, the nurse working in the CT scan unit is responsible for identifying the patient and checking their preparedness for the examination, reviewing their medical history with special attention to aspects that may constitute a contraindication to the examination and the administration of the contrast agent, such as, for example, abnormal renal indices, hyperthyroidism, previous contrast hypersensitivity reactions, or pregnancy. The aim of this study was to explore the experiences of patients who have contrast-enhanced CT scans, focusing primarily on anxiety and feelings. A study among patients undergoing a magnetic resonance imaging (MRI) scan, found that examination-related anxiety occurs in 30%. Reasons for MRI examination anxiety include uncertainty and lack of knowledge about the situation (vigilance), fear of the MRI machine itself, anxiety about the test results, uncertainty due to lack of information, or agitation due to the circumstances of undergoing an MRI (e.g., the narrow space and lack of mobility) [11]. In contrast, there are few studies that focus on the anxiety and feelings of patients who undergo CT scans with intravenous contrast agent injection. CT scanning can be performed in the hospital setting, and in an emergency, as well as in an outpatient procedure, in order to make a diagnosis, narrowing down the differential diagnosis. Despite the unquestionable benefits that CT examination brings, it is associated with several direct risks that challenge radiology staff to ensure patient safety [5,6]. In the radiology department, a team including radiologists, nurses and electroradiology technicians is responsible for patient care before, during, and after the examination, and for ensuring safety [6,8]. Although the patient remains alone in the examination room for the duration of the scan, the nurse constantly monitors their condition, ensures their safety and monitors the possibility of signaling the occurrence of worrying symptoms. These include overexposure to radiation, contrast-induced allergic reactions, and post-contrast nephropathy. A basic legal and ethical requirement is to obtain informed consent from the patient before proceeding with an examination or treatment. Outpatients remain in the office area for observation.