

## **Abstract**

Contrast-induced encephalopathy (CIE) is an infrequent but notable complication that can emerge following the administration of contrast media. Distinguishing this condition from other severe neurological complications is imperative due to its distinct clinical characteristics. In this context, we present a case involving a 15-year-old girl who underwent a Contrast-Enhanced Computed Tomography (CECT) scan of the chest, abdomen, and pelvis, employing 60 ml of iopromide as the chosen contrast medium. Remarkably, just 30 minutes after the contrast injection, she exhibited restlessness and agitation. Employing a treatment strategy encompassing supportive care and intravenous dexamethasone, the patient made a complete recovery. This case emphasizes that even a minor quantity of non-ionic, water-soluble triiodinated contrast has the potential to trigger contrast-induced encephalopathy (CIE) mere minutes after administration. Furthermore, it sheds light on the critical importance of vigilance and prompt recognition when administering contrast media, particularly highlighting the potential for neurological reactions such as CIE.