

## February 2008

# Bureau of Radiation Control RADIOACTIVE MATERIALS SECTION Information Notice 2008-1

# **Nuclear Medicine Procedure Verification**

The Florida Bureau of Radiation Control is issuing this information notice to encourage licensees to provide documentation to patients who receive nuclear medicine diagnostic studies or therapeutic treatment. Although the amount of radioactive material used for these procedures is small and not harmful to the patient, it may take several days before a patient stops emitting detectable levels of radiation.

In today's security environment more law enforcement and emergency response personnel have radiation detection equipment that may alarm around patients that have residual radiation from these procedures. Occasionally, a patient who has had a nuclear medicine procedure may be detained by security personnel because they have triggered an alarm. These alarms can be found at airports, rail stations, navigational ports, international border crossings, federal buildings, tunnels and at entrances to large public gatherings (sporting events). A patient's travel or access to health care could be delayed while security officers evaluate the situation.

The bureau recommends that medical licensees provide documentation to all patients to reduce the likelihood of searches or denial of health care. Attached are examples of a patient information form and wallet card that may be used by licensees to assist in preventing these concerns. The patient should be instructed to keep the documentation with them for the duration of time that radiation may be detected.

If you have any questions or need additional information please contact us at (850) 245-4545. This document is available on our Web site at <a href="https://www.myfloridaeh.com/radiation/">www.myfloridaeh.com/radiation/</a>.

#### **Example Document**

(to be printed on the radioactive materials licensee's letterhead)

### Verification of Nuclear Medicine Procedure/Treatment

Type of Nuclear Medicine Procedure/Treatmen	t:
Date Administered:	
Patient Name:	
DOB:	
<del></del>	
During a routine nuclear medicine study or treatment, the above named individual received	
mCi of (radioactive	e material), which is expected to remain
detectable to radiation survey instruments for _	(total time until clearance from
the body). If you have any questions regarding	the nuclear medicine procedure or this
individual, please contact:	
Tracting Dhysician (outhorized upor)	
<u>Treating Physician</u> (authorized user):	
Telephone number(s):	
Nuclear Medicine Department:	
Telephone number(s):	
Radiation Safety Officer:	
Telephone number(s):	
(Signature)	_
Printed Name of Physician	_

Information may also be provided on a physician's or institution's business/contact card, which provides a convenient size document for most individuals to carry.

Patient's Name:

Type of nuclear medicine procedure:

Date administered:

Radionuclide & Half Life:

Administered activity:

Physician's Name:

Questions? Please call:

PhysicianMedical Institutionxxx / xxx-xxxxxxx / xxx-xxxx