

Having an Iodine-123 whole body scan as an outpatient

An Iodine-123 scan is usually done following Iodine-131 treatment for thyroid cancer and thyroidectomy. There may be other reasons for the scan.

Is it safe for me to have the scan?

For this scan it is necessary to inject a small amount of radioactive tracer, called a radiopharmaceutical, in order to take the pictures. The small risk from this radiation dose is outweighed by the information that will be gained by having the scan. There is a table at the end of this leaflet giving radiation risks from various sources. Ask if you want any more information. All investigations are vetted to make sure this is the appropriate test for you. If you don't understand why you need to have this scan please speak to the doctor who referred you.

For female patients

If you know that you are pregnant, or there is any chance that you may be pregnant, then please contact the department where you will be having the scan. **Do this as soon as possible as the scan can be postponed if it is not urgent. Also contact the department if you are breastfeeding**, as we may give you special instructions.

Preparation for your scan

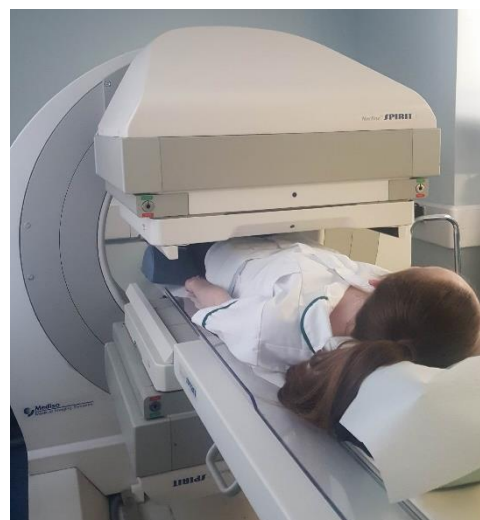
You will not have to stop your thyroid medication, but will need to have an intramuscular injection of Thyrogen on the two days prior to your scan. You can eat, drink and take any other medicines as normal on the day of the scan.

Your injection

A small amount of radioactive tracer will be injected into a vein in your arm or hand. You may have had a blood test in the past. This is much the same. You will feel the 'pinprick' of the needle a bit, but that is all. The scan will be performed at three hours after the injection. You are free to leave the department for the period of time between the two scans if you wish.

Your scan

The scan is taken by a special machine called a gamma camera. This is not a tunnel, but the camera detector will come close to you. There are sensors in the camera which stop it moving if it gets too close so it won't touch you. You will not have to get undressed, but you will be asked to remove any jewellery. You will be asked to lie on your back



on a special couch with your chin up so that the camera can see your neck. The bed will be moved along your body and you must stay as still as possible during this time.

After this, we may take a 3D picture plus a CT scan. This 3D picture with CT will take around 30 minutes more.

You will not be left on your own – there will always be someone immediately available.

After your scan

It is very unlikely that you will feel any side-effects after the scan, but if you think that you have please let the Medical Physics Department know. You may continue all your normal activities unless you have been specifically advised otherwise.

After your scan there will be some radioactivity left in your body but this will not present a significant risk to other people around you. The radioactivity in your body will soon disappear, and if you continue to drink plenty of liquids this will help clear the radioactivity more quickly.

Your results

Your scan will be looked at by a specialist doctor, who will issue a report. The report will be sent to the doctor who requested your scan rather than to your GP. This is because the doctor who requested your scan will have all the results from other tests and will be able to tell you how the result of your scan affects your care.

Contacting us

Medical Physics Department, Level 1 North Block, Monday to Friday, 9.00 am to 5.00pm.

If you have any questions about your treatment, please ask the staff looking after you or telephone 0118 322 7355 or email: rbb-tr.physics@nhs.net

To find out more about our Trust visit www.royalberkshire.nhs.uk

Please ask if you need this information in another language or format.

RBFT Physics & Clinical Engineering Department, May 2023

Next review due: May 2023

The table below is a simple guide to the levels of radiation risks for various examinations. These are measured in millisieverts (mSv).

Source of exposure (using RBFT local diagnostic reference levels (DRLs) for Nuclear Medicine)	Dose
Having a chest x-ray	0.014 mSv
Taking a transatlantic flight	0.08 mSv
I-123 whole body scan	7.2 mSv
UK average annual radiation dose	2.7 mSv
CT scan of the chest – CT scan of whole spine	6.6 mSv – 10 mSv