



Queensland Government

# Iodine- 131 Therapy for Hyperthyroidism

Facility:

(Affix identification label here)

URN:

Family name:

Given name(s):

Address:

Date of birth:

Sex:  M  F  I

## A. Interpreter / cultural needs

- An Interpreter Service is required?  Yes  No
- If Yes, is a qualified Interpreter present?  Yes  No
- A Cultural Support Person is required?  Yes  No
- If Yes, is a Cultural Support Person present?  Yes  No

## B. Procedure

The following will be performed (*Doctor/doctor delegate to document – include site and/or side where relevant to the procedure*)

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Iodine-131 therapy uses radioactive iodine, which is taken up and concentrated within the thyroid gland to damage the gland to stop its overactivity,

## C. Risks of the therapy

In recommending the Iodine-131 therapy, the doctor believes the benefits to you from having this therapy exceed the risks involved.

The risks and complications with this therapy can include but are not limited to the following.

### Common risks and complications include:

- Changing from having an overactive thyroid to an underactive thyroid. An underactive thyroid will require thyroid hormone replacement to be taken for the rest of your life.
- This therapy may not be successful in treating your overactive thyroid. This may require a further dose of Iodine-131.

### Less common risks and complications include:

- Mild neck soreness and swelling for a few days after treatment. This can be treated with pain relieving medications.
- Graves disease-The muscles and fat around the eye socket may become inflamed in over active thyroids producing a 'pop eyed look'. There maybe a slightly greater chance of worsening eye problems in patients treated with radioactive iodine compared with other treatments. The risk of this happening is greater in smokers.

### Rare risks and complications include:

- Death as a result of this therapy is *very* rare.

## D. Women of child bearing age

***This therapy can not be performed if you are pregnant.***

Are you or could you be pregnant?

Yes  No  Unsure

If unsure, I agree to have a urine or blood pregnancy test

Yes  No

Are you breastfeeding?

Yes  No

If you have answered 'yes' or are unsure of any of the above questions, the health practitioner will obtain further advice and consult with a Medical Officer.

## E. Risks of radiation

The risks from this therapy need to be compared to the risks of your medical condition not being treated.

Exposure to radiation may cause a slight increase in the risk of cancer to you over your lifetime.

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DO NOT WRITE IN THIS BINDING MARGIN

PROCEDURAL CONSENT FORM



## Iodine- 131 Therapy for Hyperthyroidism

Facility: \_\_\_\_\_

(Affix identification label here)

URN: \_\_\_\_\_

Family name: \_\_\_\_\_

Given name(s): \_\_\_\_\_

Address: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Sex:  M  F  I

### F. Patient consent

I acknowledge that the doctor/doctor delegate has explained the proposed procedure.

I understand;

- the risks and complications, including the risks that are specific to me.
- that this therapy is necessary as part of the management plan from my condition.
- if immediate life-threatening events happen during the procedure, they will be treated based on my discussions with the doctor/doctor delegate or my Acute Resuscitation Plan.
- a doctor/doctor delegate undergoing further training may conduct this procedure.

**I have been given the following Patient Information Sheet:**

**Iodine-131 Therapy for Hyperthyroidism**

- I was able to ask questions and raise concerns with the doctor/doctor delegate about the proposed procedure and its risks. My questions and concerns have been discussed and answered to my satisfaction.
- I understand I have the right to change my mind at any time including after I have signed this form but, preferably following a discussion with my doctor/doctor delegate.
- I understand that image/s or video footage may be recorded as part of and during my procedure and that these image/s or video/s will assist the doctor to provide appropriate treatment.
- I understand that Queensland Health may release my relevant de-identified information obtained from this and related procedures for education and training of health professionals.

On the basis of the above statements,

**I request to have the procedure**

Name of Patient: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

### Patients who lack capacity to provide consent

Consent must be obtained from a substitute decision maker/s in the order below.

Does the patient have an Advance Health Directive (AHD)?

Yes ▶ Location of the original or certified copy of the AHD: \_\_\_\_\_

No ▶ Name of Substitute Decision Maker/s: \_\_\_\_\_  
Signature: \_\_\_\_\_  
Relationship to patient: \_\_\_\_\_  
Date: \_\_\_\_\_ PH No: \_\_\_\_\_

**Source of decision making authority (tick one):**

- Tribunal-appointed Guardian
- Attorney/s for health matters under Enduring Power of Attorney or AHD
- Statutory Health Attorney
- If none of these, the Adult Guardian has provided consent. Ph 1300 653 187

### G. Doctor/delegate Statement

I have explained to the patient all the above points under the Patient Consent section (F) and I am of the opinion that the patient/substitute decision-maker has understood the information.

**Name of Doctor/delegate:** \_\_\_\_\_

**Designation:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### H. Interpreter's statement

I have given a sight translation in \_\_\_\_\_

(state the patient's language here) of the consent form and assisted in the provision of any verbal and written information given to the patient/parent or guardian/substitute decision-maker by the doctor.

**Name of Interpreter:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

DO NOT WRITE IN THIS BINDING MARGIN

## 1. What is Iodine-131 Therapy

## Consent Information-Patient Copy Iodine- 131 Therapy for Hyperthyroidism

Iodine-131 therapy uses radioactive iodine, which is taken up and concentrated within the thyroid gland to damage the gland and stop its overactivity. An allergic reaction to the radioactive iodine is extremely rare.

### 2. Will there be any discomfort, is any anaesthetic needed?

Iodine-131 therapy is painless and no anaesthetic is required.

### 3. Preparation for the therapy

The nuclear medicine department will give you instructions on how to prepare for your therapy. These instructions include:

- All anti-thyroid tablets should be stopped at least 5 days before your nuclear medicine appointment.
- A recent thyroid scan is required prior to this therapy. This scan will check that your thyroid is capable of taking up enough radioactive iodine for the therapy to be effective.
- ***You must not have radioactive iodine if you are breastfeeding, pregnant or there is any chance you might be pregnant.***
- If your pregnancy status is uncertain it will need to be confirmed with a urine or blood test. This is done by the Nuclear Medicine Department prior to therapy.

### 4. During the therapy

You will need to swallow a small, standard-sized capsule with water. This capsule contains the radioactive iodine. If you have difficulty swallowing capsules, please inform your nuclear medicine department at least a few days before your appointment. Liquid preparations exist if required.

### 5. What are the risks of this therapy?

In recommending Iodine-131 therapy, your doctor believes the benefits to you from having this therapy exceed the risks involved.

The risks and complications with this therapy can include, but are not limited to, the following:

#### **Common risks and complications include:**

- Changing from having an overactive thyroid to an underactive thyroid. An underactive thyroid will require life-long thyroid hormone replacement in tablet form.
- This therapy may not be successful in treating your overactive thyroid. A further dose of Iodine-131 may be needed.

### Less common risks and complications include:

- Mild neck soreness and swelling for a few days after treatment. This can be treated with pain relieving medications.
- *Graves disease only* -The muscles and fat around the eye socket may become inflamed, producing a 'pop eyed look'. There may be a slightly greater chance of new or worsening eye problems in patients treated with radioactive iodine compared with other treatments. The risk of this happening is greater in smokers.

### Rare risks and complications include:

- Death as a result of this therapy is very rare.

### 6. Risks of radiation:

The risks from this therapy need to be compared to the risks of your medical condition not being treated and to risks of other treatments including surgery.

Exposure to radiation may cause a slight increase in the risk of cancer to you over your lifetime.

It is important that:

- **Women should not become pregnant for at least 6 months after therapy.**
- **Men should not father children for 3 months after therapy.**

### 7. What are the safety issues when you leave the hospital?

Contact your GP or Endocrinologist or Emergency Department if you become unwell.

Most of the radioiodine in the capsule you have swallowed is taken up by the thyroid gland. The remainder is cleared in the urine for 7-10 days after treatment. Smaller amounts are found in your sweat, saliva and stools. This could potentially expose those people around you to a small amount of radiation. It will not make them sick, but unnecessary radiation exposure can be avoided by the following safety precautions:

For the **first 2 days** after therapy:

- Do not travel in a car with other people for more than 2 hours a day.
- Do not use public transport if the trip is more than 2 hours.

For the **first 5 days** after therapy:

## Consent Information-Patient Copy Iodine- 131 Therapy for Hyperthyroidism

- Keep at least 1.5m (about two outstretched arms) distance between yourself and other people. Brief hugs and touches are permissible.
- Separate and use your own cutlery and crockery. (These are safe after washing)
- Do not share food with others.
- Sleep by yourself in a separate bed.
- Sit down on the toilet when passing urine.
- Flush the toilet twice after use and wash hands well afterwards.
- Avoid all contact with children and pregnant women. Again, brief hugs are permissible but, if possible, you should not live in the same household with young children for 5 days.

If you can follow the safety precautions at work then there is no reason why you should not continue to work. If you cannot, (for example, you have to work sitting close to people), please ask your doctor for a medical certificate.

If you work with radiation or radiation sensitive material (eg photographic film), you will need special advice – please discuss this with the doctor before your treatment.

### **Do I start tablets again after Iodine-131?**

If you were taking antithyroid medication prior to your treatment, you may need to resume this temporarily, sometimes at a lower dose. If you have not been provided with this information, please contact your treating doctor for advice. Treatment with anti-thyroid medications should not resume for 5 days after treatment, except in special circumstances.

### **Long-term follow-up:**

Due to the likelihood of an underactive thyroid, regular blood tests and follow-up with your doctor are essential so that medical treatment can be started if necessary.

### **Notes to talk to my doctor / health practitioner about.**