

Management of a Patient Death and Cremation Following Lu-177 Therapy

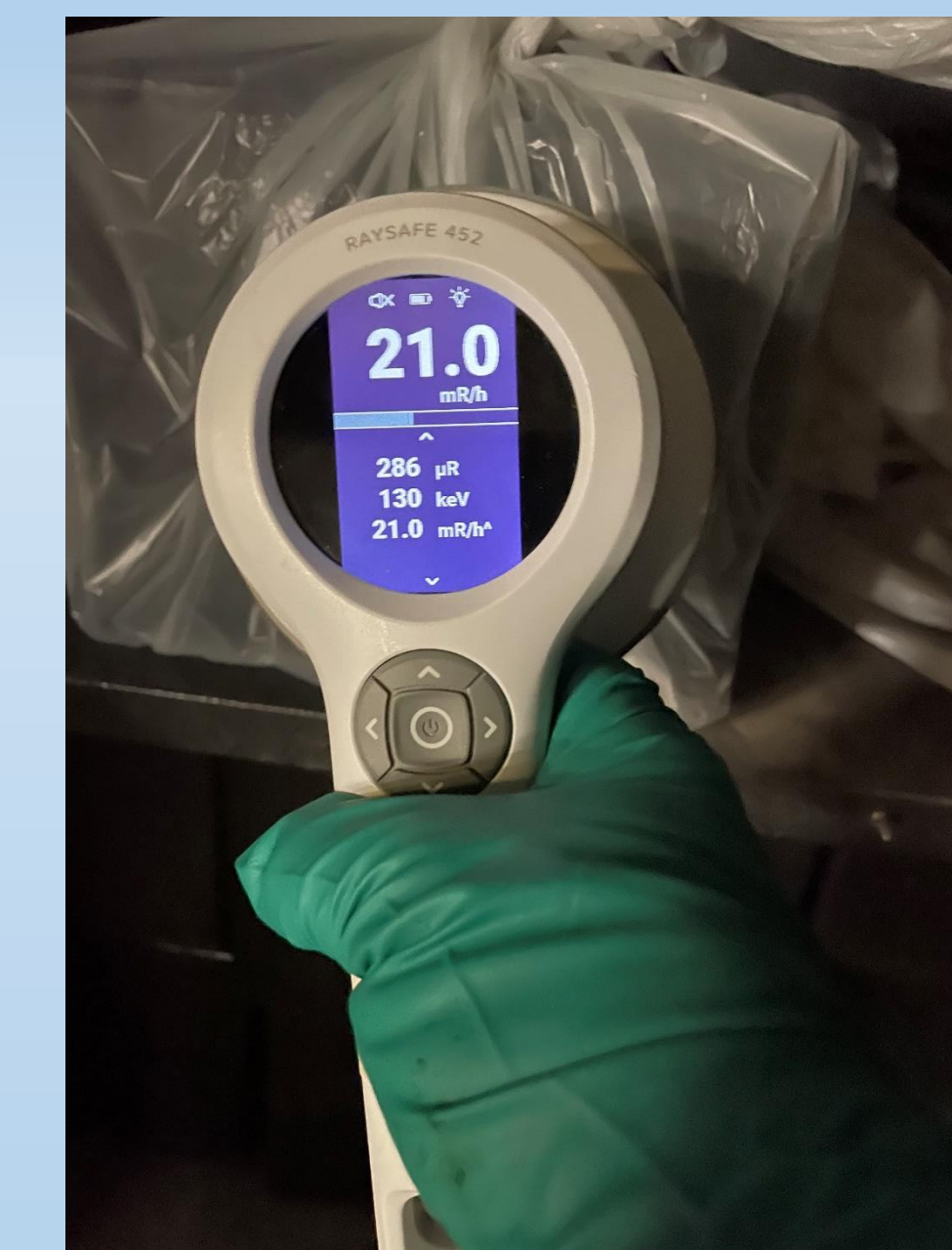
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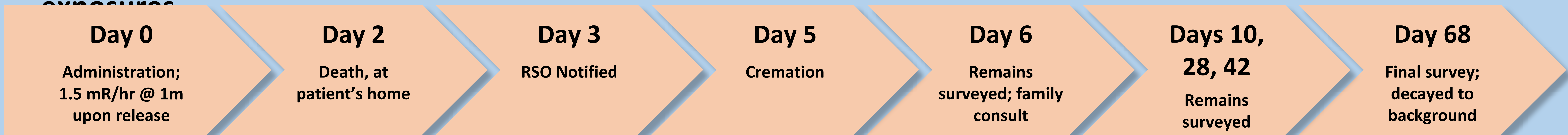
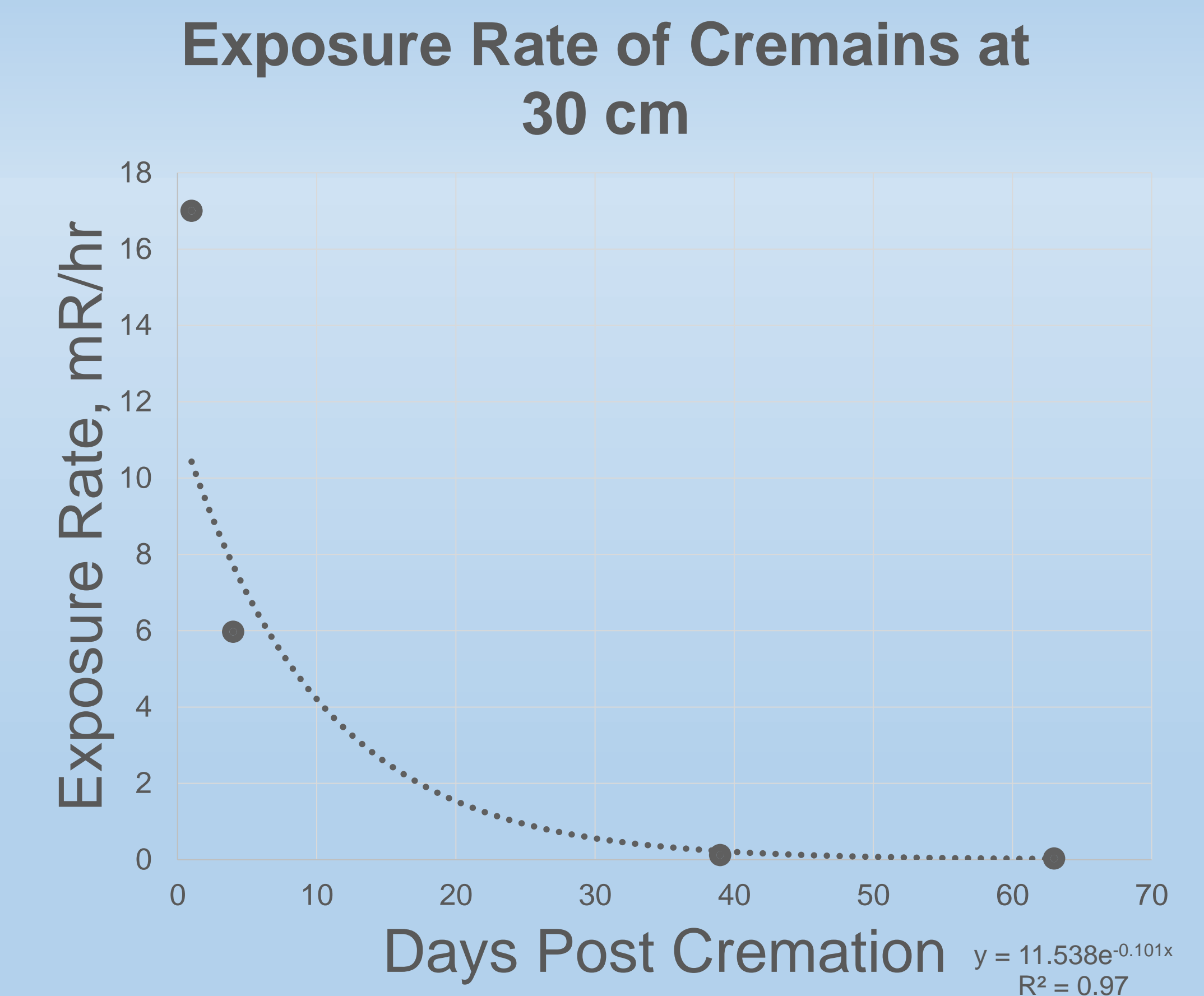
Background

A patient died after treatment with a drug containing 6.6 GBq of Lutetium-177. The RSO worked with the funeral director and family to minimize

When an RSO has been notified that a patient has died shortly after administration of a therapeutic quantity of radioactive material, the RSO should notify the morgue or funeral home that the body contains residual quantities of radioactive material and provide precautions to minimize radiation exposures and radioactive contamination for embalming and burial or cremation. (RG 8.39)



21 mR/hr on contact day 6

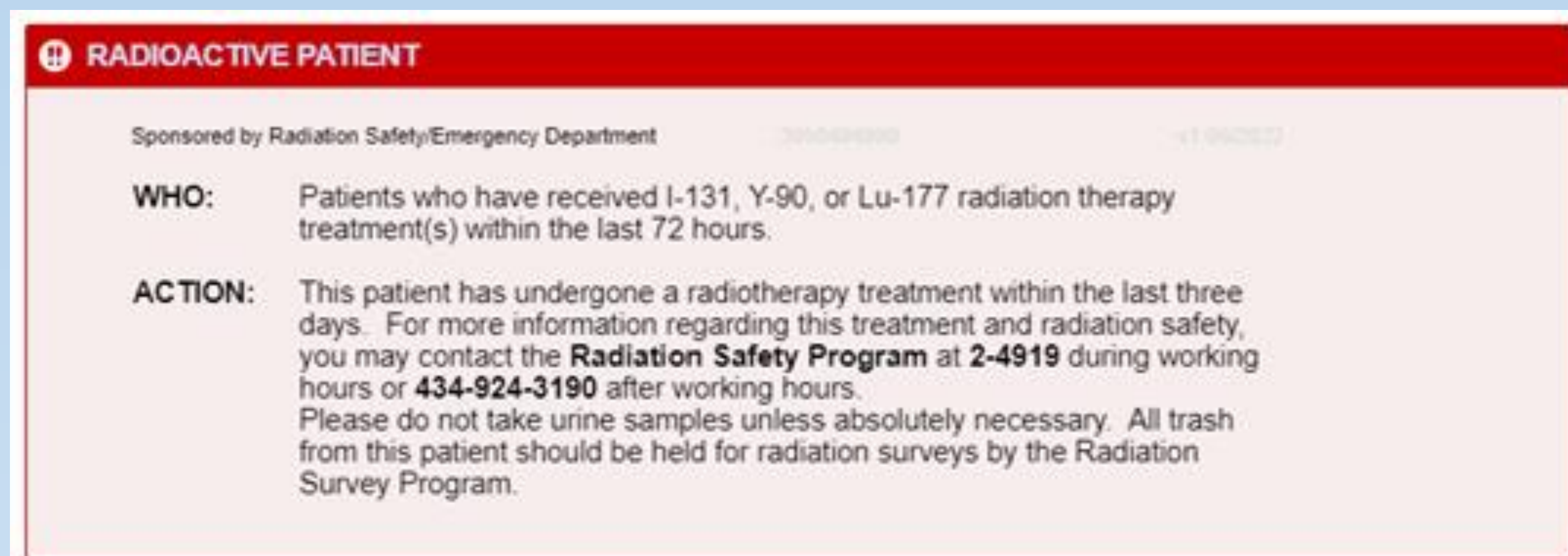
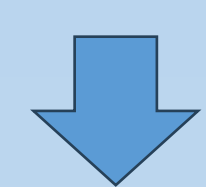


The RSO recommended funeral home staff wear respiratory protection when removing cremains from the furnace to avoid RAM uptake. (Intake of ~1% of the cremains would result in a CEDE of about 1 mSv)

The family was advised of the minimal exposure they would receive if they opted to scatter the cremains. They opted to allow a few weeks of decay prior to carefully burying them.

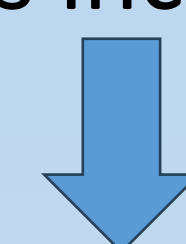
Tools To Keep Radiation Safety Informed:

If death is in-house, notes in the medical record seen by decedent affairs;



Detectors in the ED & morgue with audible/visible alarms;

Release instructions include notes on death



Death Notification

· If death should occur within 30 days of treatment, contact the UVA Radiation Safety Office at...

Pertinent Guidance & Resources

[NRC Reg Guide 8.39](#)

[AAPM/ACR Statement](#)

[NCRP Report 155](#)

[ICRP Pub 140](#)

[REGDOC-2.7.3](#)

[State Funeral Directors Assn](#)