

# The Contribution of Skin Contamination Dose to the Total Extremity Dose of Nuclear Medicine Staff: First Results of an Intensive Survey

P. Covens, D. Berus, V. Caveliers, L. Struelens and D. Verellen



Vrije Universiteit Brussel

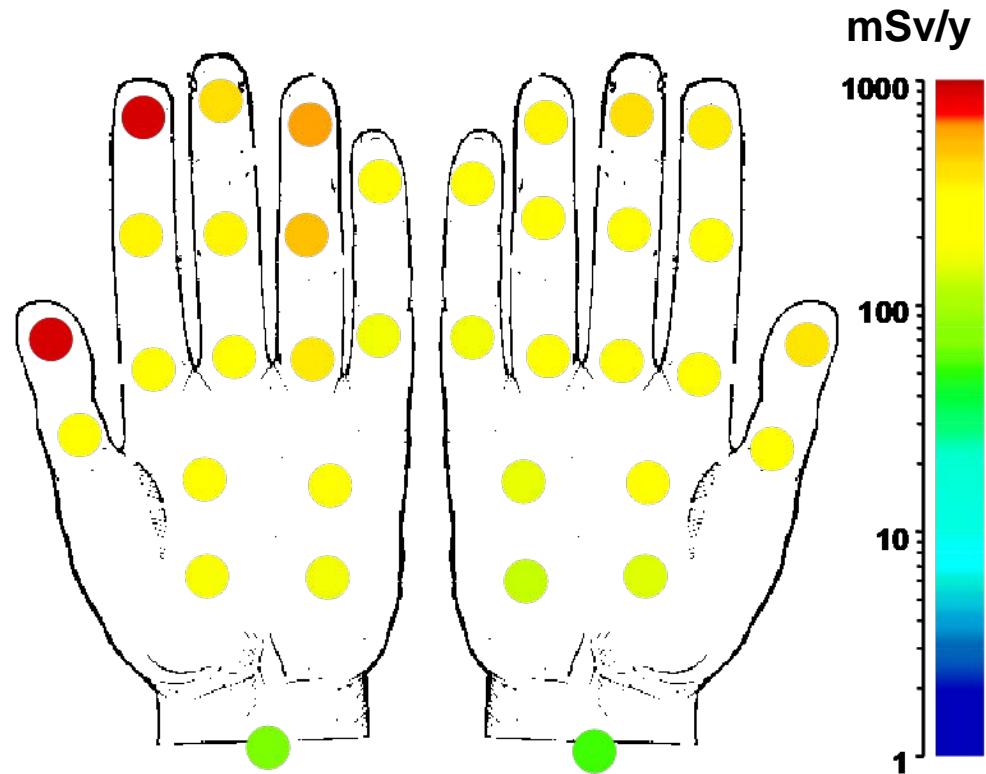


Universitair Ziekenhuis Brussel

# Introduction

## Manipulation syringes and vials in Nuclear Medicine

- Relatively high dose rates to hands
- Not uniformly distributed
- Annual dose limit easily exceeded at high workload



# Contaminations?

High doses can be expected

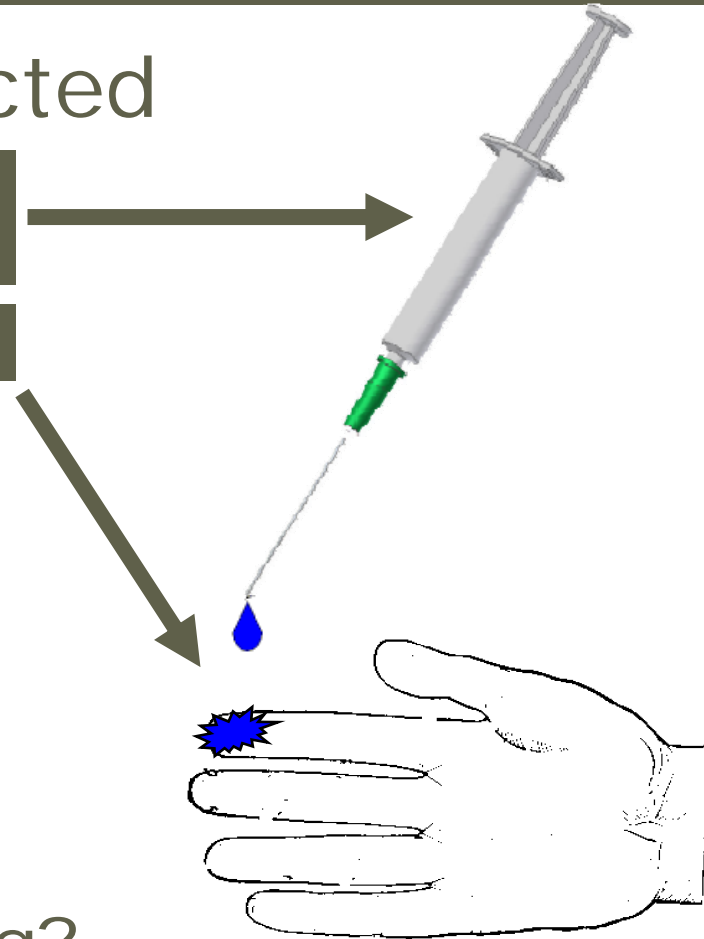
2ml-syringe with typical reference activity for common diagnostic procedure

20 $\mu$ l spot, 15 min exposure time

Cumulated skin dose	
$^{99m}\text{Tc}$	15 mSv
$^{18}\text{F}$	500 mSv !

Delacroix et al.

Dose from "sealed" manipulations: tip of iceberg?



# Origin of contaminations

## Directly

- Spills
- Removing needles/catheters
- Compress pressing
- Body fluid of patients

## Cross contamination

- Contaminated surfaces
- Contaminated tools / protection equipment

# Detection and quantification of contaminations

## Contamination check by workers

- Time consuming, asks for self-discipline
- Short half-life radionuclides → late detection difficult
- Difficult to quantify with common contamination monitors

## On-site survey needed

Survey started, protocol based on on-site detection/localisation/quantification

# Methodology/Protocol (1)

## Contamination detection

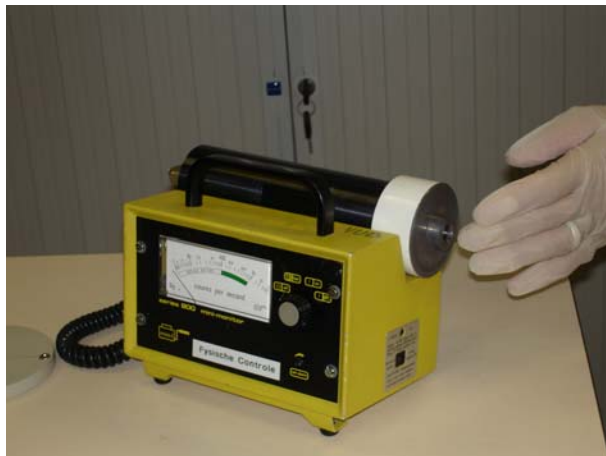
- On site survey during working day
- NaI-contamination monitor



# Methodology/Protocol (2)

## Contamination localisation

- Protective glove over contamination
- NaI-contamination monitor, small 1cm<sup>2</sup>-collimator
- Marking location



# Methodology/Protocol (3)

## Calibrated Gamma Spectrometer

- NaI Probe mounted in large  $1\text{cm}^2$ -collimator
- Probe adjustable in height (equilibrium between dead time and sufficient count rate)
- 3 spectra acquired during 60s (repositioning finger)
- Decontaminate and recount





# Methodology/Protocol (4)

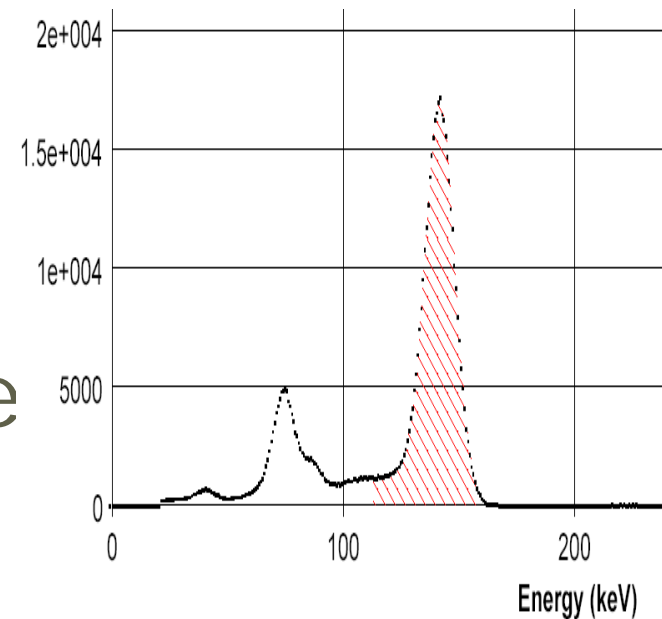
## Spectrum Analysis

- Nuclide identification
- Activity calculation averaged over 1cm<sup>2</sup>

## Calculation of dose rate and cumulated dose

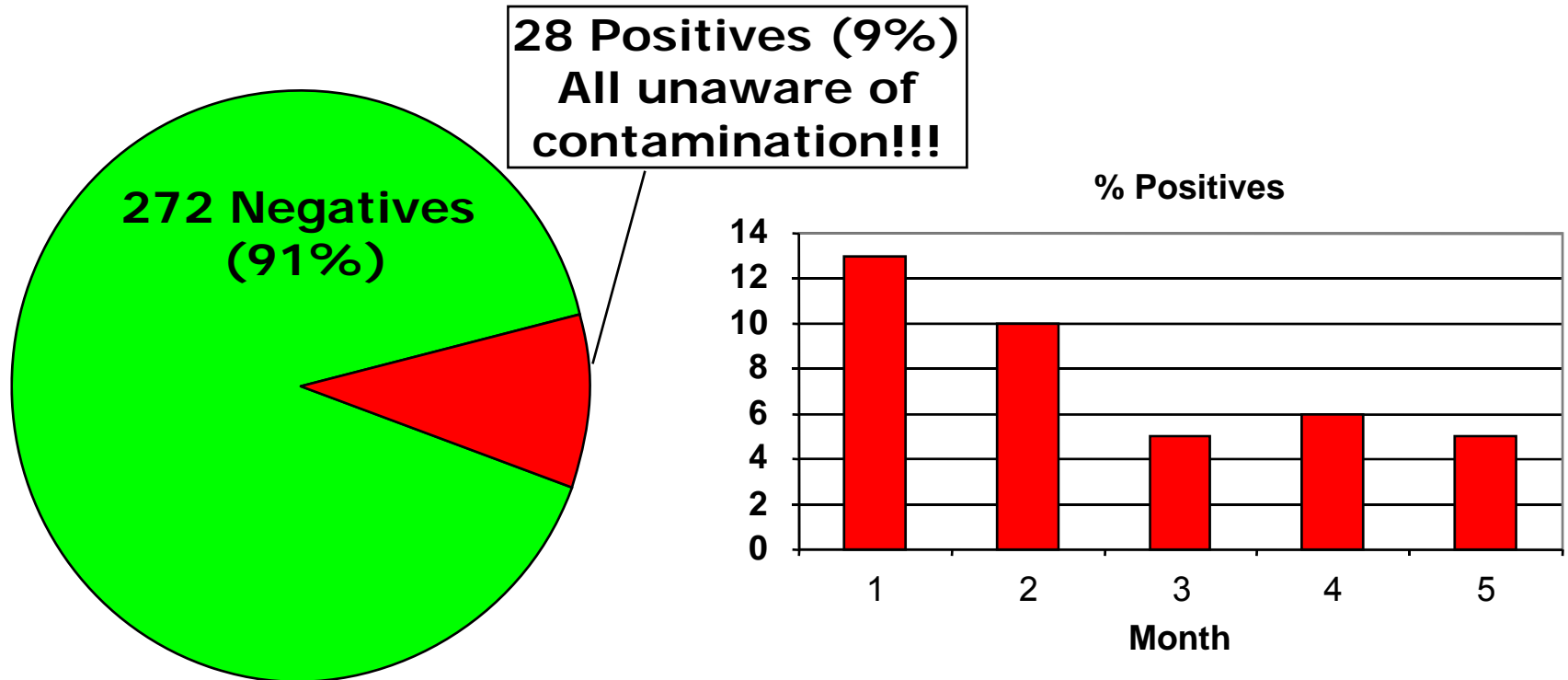
(3 ref. data)

- Delacroix et al.
- Varskin 3
- MCNP<sub>Lara Struelens</sub>



# Results: Incidence

5 months survey, 30 days, 300 inspections,  
10 workers



# Results:

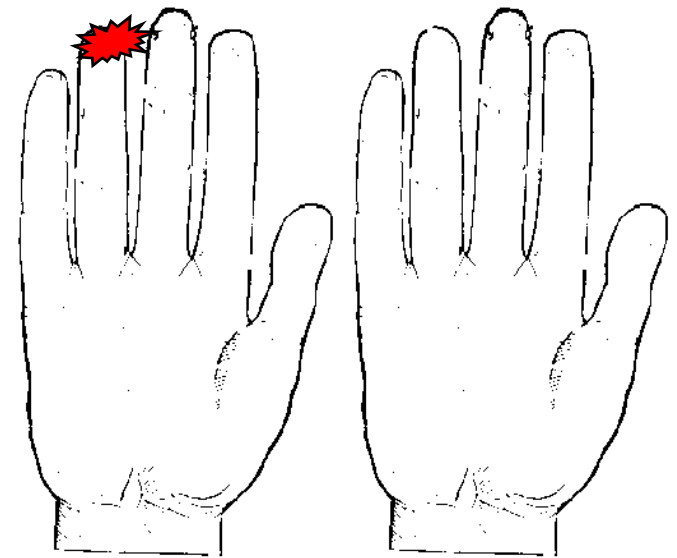
## Nature of contamination

Not uniform deposits but local contaminations! (90% cases)

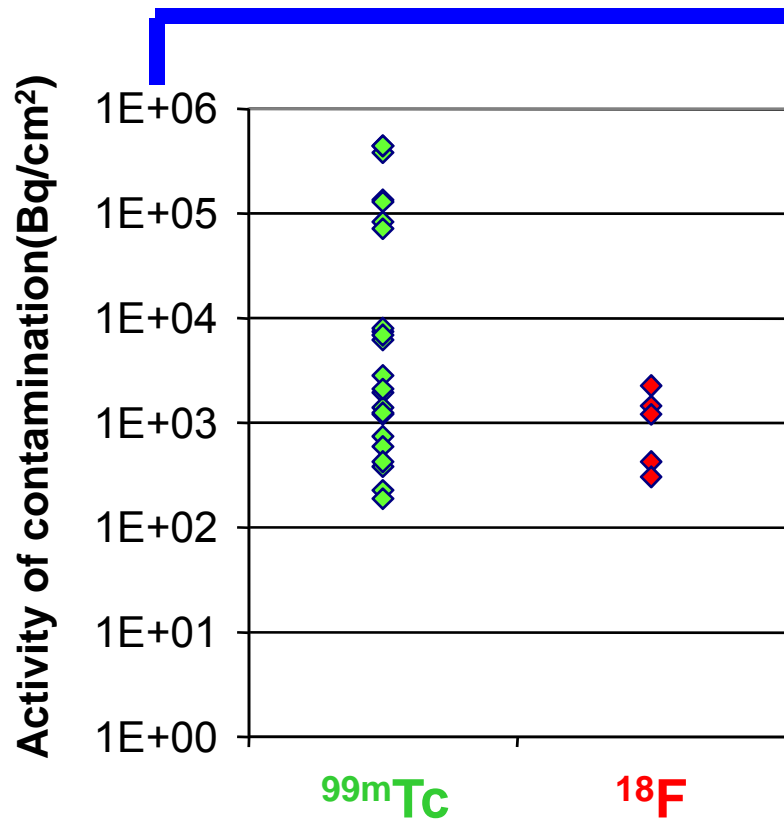
Mostly index tip of non dominant hand (70% cases)

Out of 28 positives:

- 23  $^{99m}\text{Tc}$ -radiopharmaceuticals
- 5  $^{18}\text{F}$ FDG



# Results: Order of magnitude



**Hp(0.07), contamination 1cm<sup>2</sup>  
(mSv/h/kBq)**

	99mTc	18F
Delacroix et al.	8.77E-3	7.88E-1
Varskin 3	5.78E-3	1.76E+0
MCNP <sub>Lara Struelens</sub>	3.85E-3	1.37E+0

# Factors in calculation of cumulated skin doses

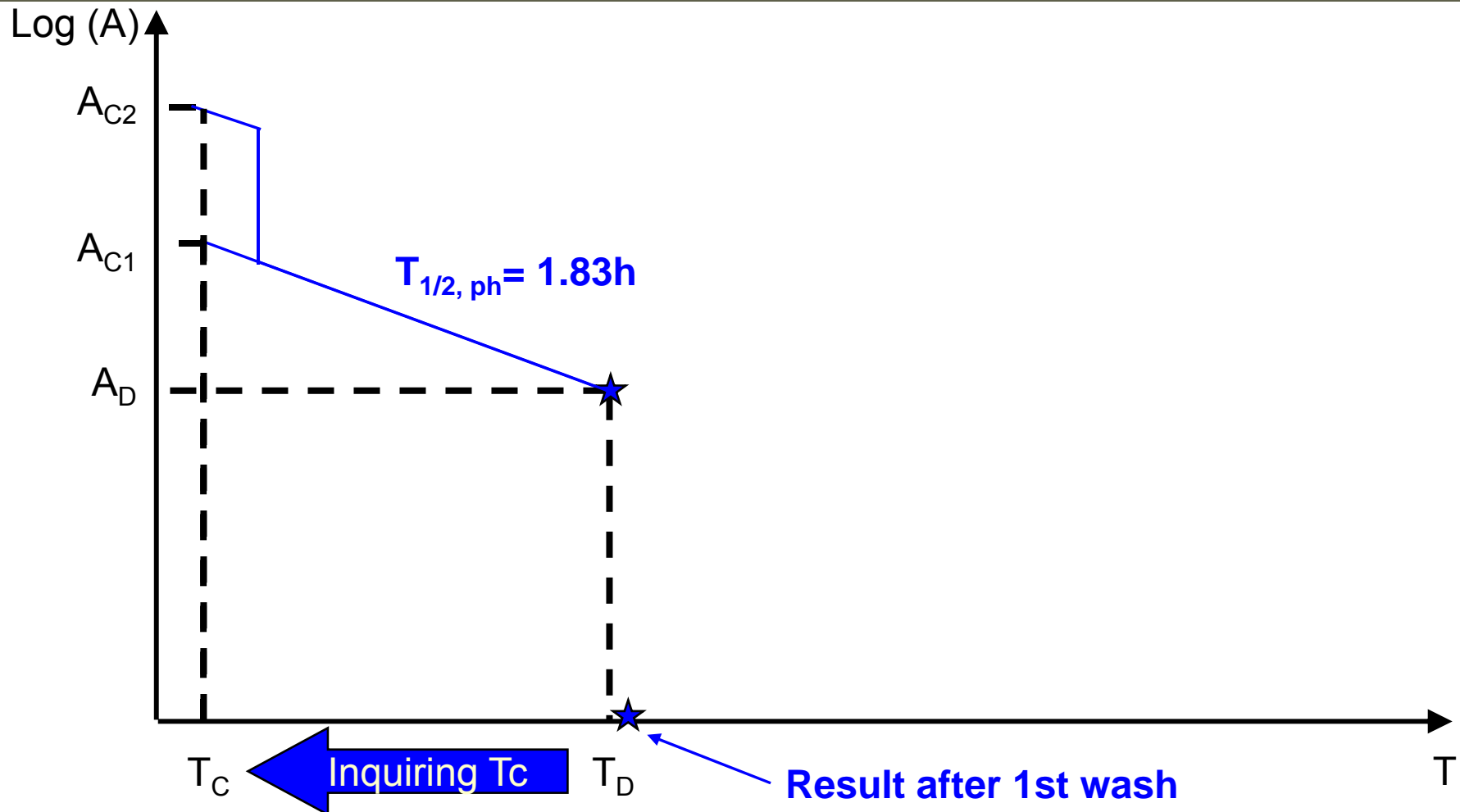
## Exposure time?

- Inquiring possible time of contamination ( $T_c$ )
- Exposure starts from  $T_c$

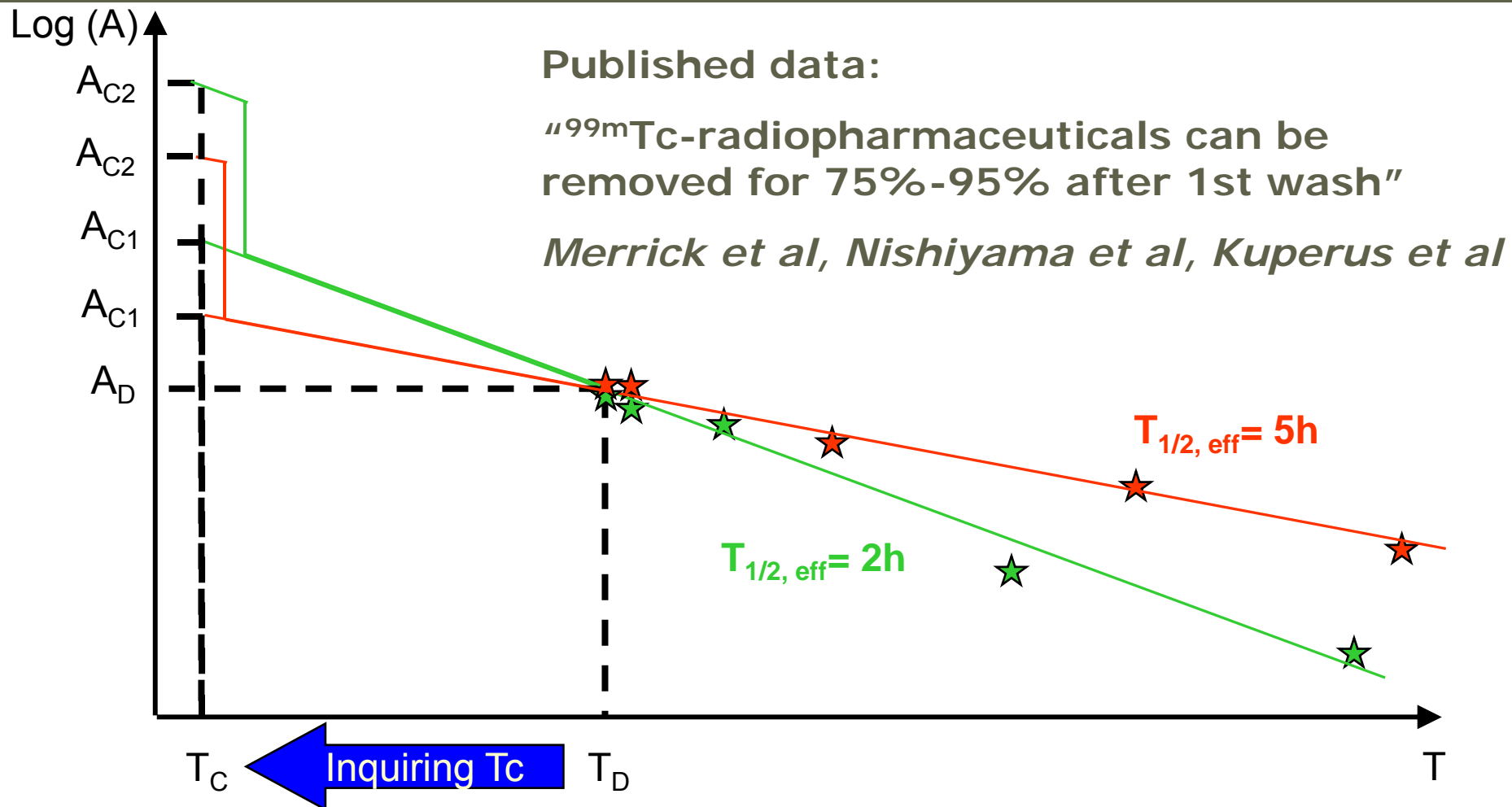
## Efficiency of decontamination? $T_{1/2,eff}$ ?

- Determined by repeated washes and measurements of positive results
- Radiopharmaceutical-related
- $^{18}\text{F}$ FDG can be removed completely after 1st wash
- $^{99\text{m}}\text{Tc}$ -radiopharmaceuticals difficult to remove

# Results: Decontamination of $^{18}\text{F}$ FDG



# Results: Decontamination of $^{99m}\text{Tc}$ -radiopharmaceuticals



# Results: Calculated cumulated skin doses

Conservative assumption

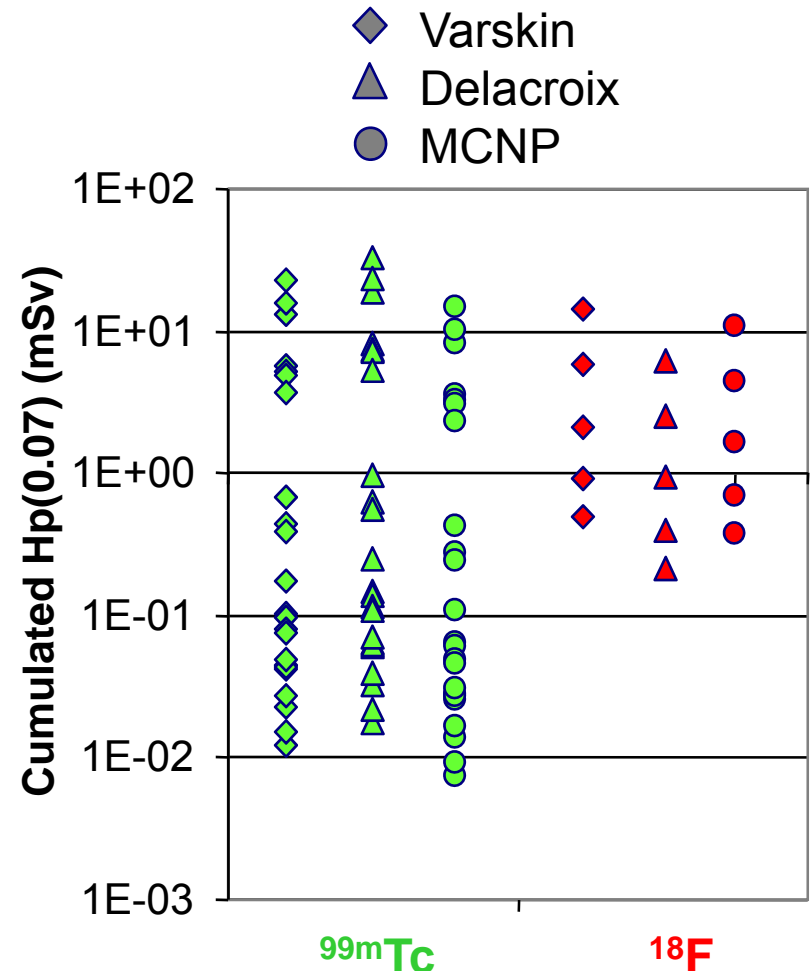
$^{99m}\text{Tc}$ :  $A_{C1}, T_C, T_{1/2,eff}$  (individual)  
Exposure time: 48h

$^{18}\text{F}$ FDG:  $A_{C1}, T_C, T_{1/2,ph}$   
Exposure time  $T_D - T_C$

For individual worker:

Values up to 30mSv can be measured due to single contamination!

> 500mSv/y based on random survey





# Next?

Refining dose rate calculations

Contamination survey will resume after 2 months break

Possibility survey in other hospital

$T_{1/2,eff}$  of radiopharmaceuticals?

- Further analysis in vivo in case of positive contamination
- New study started to determine  $T_{1/2,eff}$  using pig skin samples

# Conclusions

## Contamination survey in NM

- Positive results on a regular base
- Enables to quantify activity/dose rate

## Calculation of cumulated dose

- Influenced by dose rate values,  $T_c$  and  $T_{1/2\text{eff}}$
- More research needed

Possible contribution to the total extremity dose can easily exceed 500mSv/y

Thank you for your attention!