

## PATIENT GROUP DIRECTION for the SUPPLY of POTASSIUM IODATE TABLETS by AUTHORISED PERSONS to PATIENTS EXPOSED TO RADIOACTIE IODINE

## Developed nationally by

	Name	Signature
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Other		

Signed: Hilary Walker (chair)	Date:7/12/10

Reviewed by the Department of Health Patient Group Direction Review Group (Radioactive Iodine)



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#### NHS TRUST ACCOUNTABILITY

This Patient Group Direction has been approved by the			
Signed:	(secretar	y) Date	·
Date approved for use:		Loca	l Review Date:
Name of organisation (NHS Trust	<del>:</del> )	Address of orga	nisation (NHS Trust)
Signatory	Name		Signature
Medical Director			
Director of Nursing & Quality			
Clinical Governance Lead			
Trust Chief Pharmacist			
Other			

## **Management of Patient Group Direction**

This Patient Group Direction must be read, agreed to and signed by all healthcare professionals involved in its use. The original signed copy should be held by the manager. This Patient Group Direction must be easily accessible to the healthcare professionals in the clinical setting.



## LOCAL AUTHORISATION: (e.g. Directorate or Department)

Authorised by	
On behalf of	
Signed	
Date of implementation	
I have read and understood the Patient Group Direction and	I agree to use it.
Healthcare professional:	
Name	Name
Date	Date
Signature	Signature
Name	Name
Date	Date
Signature	Signature
Name	Name
Date	Date
Signature	Signature
Name	Name
Date	Date
Signature	Signature
Name	Name
Date	Date
Signature	Signature

# PATIENT GROUP DIRECTION for the SUPPLY of POTASSIUM IODATE TABLETS by AUTHORISED PERSONS to PATIENTS EXPOSED TO RADIOACTIE IODINE

Members of the public and those implementing protective actions who may have been exposed recently, or who will shortly be exposed to significant levels of radioactive iodine, should, on the instructions of the Director of Public Health (or delegate), receive a single treatment of potassium iodate.

The decision by the Director of Public Health (or delegate) for potassium iodate tablets to be distributed will take account of the likely level of exposure and the availability of tablets. In any circumstance requiring prioritisation, young children (those aged under 10 years) are to receive the highest priority.

#### 1. CLINICAL CONDITION

Define situation/condition	Known, expected or suspected exposure to radioactive iodine, at or above a level judged appropriate by a Director of Public Health (or delegate)  OR  On the direction of a Director of Public Health (or delegate).
Criteria for inclusion	All age groups including pregnant women
Criteria for exclusion	Those with known: - iodine sensitivity, - hypocomplementaemic vasculitis - dermatitis herpetiformis. (It is not necessary to exclude those with previously treated or active thyroid disease.)
Additional information	<ul> <li>Priority should be given to young children (under the age of 10 years).</li> <li>Pregnant and nursing mothers should receive the normal adult treatment.</li> </ul>
Refer to supervising doctor after administration	<ul> <li>Babies under 1 month old should be referred to their GPs for assessment of hormone levels, who will refer to specialist unit if appropriate.</li> <li>Adults with previously treated or active thyroid disease should consult their GP if they notice any change in their condition.</li> </ul>
Action if excluded	Refer to supervising doctor.
Action if patient declines	Refer to supervising doctor.

#### 2. CHARACTERISTICS OF STAFF

Qualifications required	Registered healthcare professionals.
Additional requirements	Training in the management of emergency situations following the release of, or the potential release of radioactive iodine.
Continued training requirements	Regular update training.



### 3. DESCRIPTION OF TREATMENT

Name, Form and Strength of Medicine Potassium iodate 85mg tablets.

POM/P/GSL/▲	Р		
Doses	Age Group	Number of Tablets	Equivalent Mass of Iodine (mg)
	Adults and adolescents aged 13-16 years	2	100
	Children aged 3-12 years	1	50
	Children aged 1 month – under 3 years	1/2	25
	Neonates (birth – under 1 month)	1/4	12.5
	Dose should be taken immediately		•
Route/Method	Oral.  May be broken up and stirred into a drink or mixed with a small quantity of food to ease swallowing.		
Frequency	<ul> <li>One treatment will provide protection for 24 hours.</li> <li>A second treatment should not be provided without the explicit authority of the Director of Public Health (or delegate).</li> <li>Repeat treatment is not advised for babies less than 1 month of age; pregnant and lactating women should not receive more than two treatments.</li> </ul>		
Total dose/no. tablets	See table above.		
Follow up	<ul> <li>Contact details of the patient must be recorded.</li> <li>All pregnant women in their third trimester and those with babies aged under 1 month should advise their GPs, so that umbilical cord blood/blood samples can be tested for TSH hormone levels, and, if raised, T4 levels.</li> <li>Adults with previously treated or active thyroid disease should consult their GP if they notice any change in their condition.</li> <li>Other patients do not need to consult their GP unless they notice any change in their condition. If they consult their GP for any reason, they should mention that they have received potassium iodate treatment.</li> </ul>		
Adverse reaction/side effects	Reactions to the drug may include:  • allergic reactions, usually mild nausea, vomiting and skin rash  • relapse of thyrotoxicosis  • iodine-induced hyperthyroidism		
Advice	A special leaflet has been developed for giving to all patients at the time of treatment.		
Record/Audit trail	<ul> <li>Records of supply must be maintained and s</li> <li>the patient name; address; telephone nur</li> <li>drug, batch number, expiry date and qua</li> </ul>	nber; GP; ntity supplied;	
	<ul> <li>the whereabouts of the individual during 6 hours prior to treatment (for better estimation of exposure).</li> <li>Signature of person supplying the medicine</li> </ul>		