



Feline Radioiodine Center

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QUICK REFERRAL GUIDE FOR RADIOIODINE

HOW TO REFER:

- 1. Email us records from 1 yr prior to diagnosis 2. ask your client to email us I-131records@nva.com. 3. share our website. www.ovshosp.com/feline-radioiodine-center. We'll take it from there!
- **TIME TO TREATMENT:** Stable patients who have completed a methimazole or y/d trial: usually 1-2 months. Patients who do not tolerate those treatments: usually within a month.
- **COST:** Consult \$175-\$200. Pre-testing (not all tests are required for each patient): ~\$300-~\$1100. Radioiodine: **\$1475** - 48 hour stay, usually for patients with TT4 less than 10. **\$1575** - 72 hour stay, usually for patients with TT4 up to 20. **\$1875** - 72 hr stay, higher dose for aggressive benign nodules. **\$3000** - 10 day stay, high dose for suspected adenocarcinoma. Post-testing: **per your fees.**

WHEN TO REFER:

- Most **patients should have completed a methimazole or y/d trial prior to referral.** Younger patients with TT4 < ~ 7.5, mild clinical signs, and no evidence of renal disease may be exceptions.
- **Other than rare exceptions, we will advise waiting to do radioiodine for gray zone TT4 cases** due to the higher risk of iatrogenic hypothyroidism.
- Radioiodine is most effective when pursued **early in the disease.** Clients are advised of a lower 1st injection cure rate with longer disease course and higher TT4 (85 – 90% vs 95% for early cases).
- **Patients must be stable** to be admitted to the hospital for the injection and post-radioiodine isolation. We have a limited ability to monitor, test and treat radioactive patients. **Radioiodine should virtually never be an emergency procedure in a severely debilitated patient.**

TESTING:

- Please submit **all TT4 to reference lab.** Due to high variability in in-house testing, we will ask for repeat testing if in-house results are sent to us for pre- or post-radioiodine thyroid values.
- **TSH** is preferred over (or in addition to) fT4-ED to evaluate thyroid status, especially to confirm early cases or to diagnose iatrogenic hypothyroidism. We have the Truforma feline TSH and may ask that some tests are run at our clinic.
- **SDMA** is available at Antech as an inexpensive add-on (code T1035.)
- A **full panel with U/A** is needed **3–4 wks after starting methimazole** to assess safety and efficacy.
- **Please submit labwork including TT4 even if there is a reaction.** 1. It may be our only chance to assess renal values with lower TT4. 2. Potential liver, bone marrow reactions need to be assessed.
- If you perform **radiographs** at your clinic, please see below for guidelines

TIMELINE AND REQUIRED TESTS:

- **PRE (Required) Full lab panel to reference lab within 30 – 60 days** pre-radioiodine. Timing is at OVSH doctor's discretion based on overall health, co-morbidities, age.
- **PRE (Required) 3-view chest and abdomen with board-certified radiologist review** within ~ 30 days prior to radioiodine. An Against Medical Advice will be needed if radiographs are declined.
- **PRE (Recommended) Pro-BNP or echocardiogram** as auscultation and radiographs are not adequate to diagnose most cases of thyrotoxic cardiomyopathy.
- **POST (Required) Reference lab full panel with urine** at 1, 3 and 6 months post-radioiodine.

We appreciate you referring to us and allowing us the privilege of treating your patients.