

$$\text{Effective dose (sievert (Sv))} = \sum (\text{Tissue weighting factor} \times \text{Equivalent dose})$$

When the whole body is
evenly exposed to
1 mGy of γ -ray
irradiation

Effective dose =

- $0.12 \times 1 \text{ (mSv): bone marrow}$
- $+ 0.12 \times 1 \text{ (mSv): colon}$
- $+ 0.12 \times 1 \text{ (mSv): lungs}$
- $+ 0.12 \times 1 \text{ (mSv): stomach}$
- :
- $+ 0.01 \times 1 \text{ (mSv): skin}$
- $= 1.00 \times 1 \text{ (mSv)}$

= 1 millisievert (mSv)



When only the head is
exposed to **1 mGy** of γ -ray
irradiation

Effective dose =

- $0.04 \times 1 \text{ (mSv): thyroid}$
- $+ 0.01 \times 1 \text{ (mSv): brain}$
- $+ 0.01 \times 1 \text{ (mSv): salivary gland}$
- $+ 0.12 \times 1 \text{ (mSv)} \times 0.1: \text{bone marrow (10\%)}$
- $+ 0.01 \times 1 \text{ (mSv)} \times 0.15: \text{skin (15\%)}$
- :

= 0.07 millisieverts (mSv)



Patient Irradiation In Diagnostic Nuclear Medicine Assessment Of Absorbed Dose And Effective Dose Equivalent

Brian J McParland



Patient Irradiation In Diagnostic Nuclear Medicine Assessment Of Absorbed Dose And Effective Dose Equivalent:

Patient Irradiation in Diagnostic Nuclear Medicine Lennart Johansson,1985 *Exposure of the U.S. Population from Diagnostic Medical Radiation* National Council on Radiation Protection and Measurements,1989 **Patient Irradiation**

in Diagnostic Nuclear Medicine Lennart Johansson,1985 **Radiation Protection of the Patient in Nuclear Medicine** Walter A. Langmead,1983 **The Practice of Internal Dosimetry in Nuclear Medicine** Michael G.

Stabin,2016-10-14 Written by one of the world's leading experts in the field of nuclear medicine dosimetry this text describes in detail the use of internal dose calculations in the practice of nuclear medicine While radiation therapy with external sources of radiation always employs calculations of dose to optimize therapy for each patient this is not routinely conducted in nuclear medicine therapy As the trend towards an increasing role of dosimetry in therapy planning increases this book reviews the available methods and technologies available to make this a more common practice The book begins by covering the mathematical fundamentals of internal dose calculations and uses sample calculations to demonstrate key principles The book then moves forward to describe anthropomorphic models dosimetric models and types and uses of diagnostic and therapeutic radiopharmaceuticals The depth of coverage makes it useful reference and guide for researchers performing dose calculations and for physicians considering incorporating dose calculations into the treatment of their cancer patients

Tracking Radiation Exposure from Medical Diagnostic Procedures National Research Council,Division on Earth and Life Studies,Nuclear and Radiation Studies Board,Committee on Tracking Radiation Doses from Medical Diagnostic Procedures,2012-07-12 The growing use of medical diagnostic procedures is correlated with tremendous and undeniable benefits in the care of most patients However it is accompanied by growing concerns about the risks associated with diagnostic computed tomography and other procedures that utilize ionizing radiation A number of initiatives in radiation safety in medicine have taken place in the United States and internationally each serving different purposes Their ultimate goals are to provide higher quality clinical management of the patient and to ensure that reasonable steps are taken to keep the exposures as low as possible without compromising diagnostic efficacy Tracking Radiation Exposure from Medical Diagnostic Procedures Workshop Reports provides a summary of the presentations and discussions that took place during the December 8-9 2011 workshop titled Tracking Radiation Exposure from Medical Diagnostic Procedures This workshop was organized by the Nuclear and Radiation Studies Board of the National Academy of Sciences and sponsored by the Centers for Disease Control and Prevention the U S Food and Drug Administration and the U S Department of Health and Human Services This workshop report was authored by a six member committee of experts appointed by the National Academy of Sciences This committee brought together public health regulators physicians manufacturers researchers and patients to explore why what and how to track exposure from medical diagnostic procedures and possible next steps

Tracking Radiation Exposure from Medical Diagnostic Procedures National Research Council,Division on Earth

and Life Studies, Nuclear and Radiation Studies Board, Committee on Tracking Radiation Doses from Medical Diagnostic Procedures, 2012-06-12 The growing use of medical diagnostic procedures is correlated with tremendous and undeniable benefits in the care of most patients. However, it is accompanied by growing concerns about the risks associated with diagnostic computed tomography and other procedures that utilize ionizing radiation. A number of initiatives in radiation safety in medicine have taken place in the United States and internationally, each serving different purposes. Their ultimate goals are to provide higher quality clinical management of the patient and to ensure that reasonable steps are taken to keep the exposures as low as possible without compromising diagnostic efficacy. Tracking Radiation Exposure from Medical Diagnostic Procedures Workshop Reports provides a summary of the presentations and discussions that took place during the December 8-9, 2011 workshop titled Tracking Radiation Exposure from Medical Diagnostic Procedures. This workshop was organized by the Nuclear and Radiation Studies Board of the National Academy of Sciences and sponsored by the Centers for Disease Control and Prevention, the U.S. Food and Drug Administration, and the U.S. Department of Health and Human Services. This workshop report was authored by a six-member committee of experts appointed by the National Academy of Sciences. This committee brought together public health regulators, physicians, manufacturers, researchers, and patients to explore why, what, and how to track exposure from medical diagnostic procedures and possible next steps.

Quality Control and Radiation Protection of the Patient in Diagnostic Radiology and Nuclear Medicine G. Contento, 1995

Bulletin of the Atomic Scientists, 1971-09 The Bulletin of the Atomic Scientists is the premier public resource on scientific and technological developments that impact global security. Founded by Manhattan Project Scientists, the Bulletin's iconic Doomsday Clock stimulates solutions for a safer world. **Internal Radiation Dose in Diagnostic Nuclear**

Medicine Hans Detlev Roedler, Alexander Kaul, Gerald J. Hine, 1978 *Handbook of Radiation Doses in Nuclear Medicine and Diagnostic X-Ray* James G. Kereiakes, Marvin Rosenstein, 2019-06-13 Published in 1980, this book provides a convenient single source for practical information on doses from radiopharmaceuticals and from diagnostic X-rays. *General Concepts for the Dosimetry of Internally Deposited Radionuclides* National Council on Radiation Protection and Measurements, 1985

Relative Effective Dose Risk Based on Medical Diagnostic Modalities at the Nebraska Medical Center Michael D. Petrocchi, 2011 The use of medical diagnostic imaging involving ionizing radiation has drastically increased in recent years, causing concern about possible long-term consequences such as the induction of cancer. Recognizing this recent trend, the Institutional Review Board (IRB) at the Nebraska Medical Center commissioned this study in order to determine effective doses and corresponding lifetime attributable risk of cancer for all diagnostic scans involving ionizing radiation at its facility. The eventual product will be an on-line dose calculator specific only to the Nebraska Medical Center's scanning protocols to be utilized by its physicians, researchers, and patients for education and informed consent policies. In all 32 conventional X-ray scans, 39 nuclear medicine scans, and over 100 individual Computed Tomography scans were analyzed to determine effective

doses using the most current dosimetry data and computer software available at the time of this study The Biological Effects of Ionizing Radiation BEIR VII methodology was then applied for each nuclear medicine and CT scan s effective dose to estimate the Lifetime Attributable Risk LAR of developing cancer based on age and gender Comparisons of effective doses were also made between similar diagnostic scans from Duke University Radiation Dose Assessment Resource RADAR and www.xrayrisk.com Conventional X ray effective dose outcomes showed that there was no definitively higher rate of radiation dose between institutions Nuclear medicine effective doses varied considerably depending on the amount of radiopharmaceutical administered and source of dosimetry information acquired The computed tomography effective doses from the Nebraska Medical Center had higher values for scan regions that included the torso region with all other scans yielding similar effective doses Determining medical diagnostic radiation doses can be an intricate complex method It is pertinent that each institution wanting an accurate effective dose from their diagnostic scans base their calculations on individual scanning parameters and the most current radiation dosimetry information

Fundamentals of Nuclear Medicine Dosimetry Michael G. Stabin, 2008-01-15 Written by a leading international authority in the field this book is ideal for physicians and residents in nuclear medicine who want to improve their knowledge in internal dosimetry The text is a practical introduction that guides the reader through fundamental concepts in the calculation of radiation dose including discussions of standardized models methods of calculations and available software applications This comprehensive guide discusses too the biological effects of radiation on living systems The book also includes an overview of regulatory aspects related to the radiation dosimetry of new radiopharmaceuticals

Nuclear Medicine Radiation Dosimetry Brian J McParland, 2010-07-03 Complexities of the requirements for accurate radiation dosimetry evaluation in both diagnostic and therapeutic nuclear medicine including PET have grown over the past decade This is due primarily to four factors Growing consideration of accurate patient specific treatment planning for radionuclide therapy as a means of improving the therapeutic benefit development of more realistic anthropomorphic phantoms and their use in estimating radiation transport and dosimetry in patients Design and use of advanced Monte Carlo algorithms in calculating the above mentioned radiation transport and dosimetry which require the user to have a thorough understanding of the theoretical principles used in such algorithms their appropriateness and their limitations increasing regulatory scrutiny of the radiation dose burden borne by nuclear medicine patients in the clinic and in the development of new radiopharmaceuticals thus requiring more accurate and robust dosimetry evaluations An element common to all four factors is the need for precise radiation dosimetry in nuclear medicine which is fundamental to the therapeutic success of a patient undergoing radionuclide therapy and to the safety of the patients undergoing diagnostic nuclear medicine and PET procedures As the complexity of internal radiation dosimetry applied to diagnostic and therapeutic nuclear medicine increases this book will provide the theoretical foundations for enabling the practising nuclear medicine physicist to understand the dosimetry calculations being used and their

limitations allowing the research nuclear medicine physicist to critically examine the internal radiation dosimetry algorithms available and under development and providing the developers of Monte Carlo codes for the transport of radiation resulting from internal radioactive sources with the only comprehensive and definitive Medical Radiation Exposure of Patients in the United States, 2019 This Report is an update 10 y after the publication of NCRP Report No 160 NCRP 2009 and is focused on 2016 doses to patients from medical exposures Occupational doses and doses to caregivers are not included Discussion of any potential risks and benefits of the use of medical exposures was beyond NCRP's scope of work Several metrics are estimated as follows number and type of procedures involving patient diagnostic and interventional medical radiation procedures effective dose per procedure which is a calculated dose based upon the type of radiation and the radiation detriment associated primarily with the induction of cancer in tissues exposed risk factors are based on average population characteristics and derive from linear nonthreshold assumptions collective effective dose which is the number of procedures multiplied by the effective dose per procedure and annual average individual effective dose which is the collective effective dose divided by the U S population whether the persons were exposed or not and allows comparison of the magnitude of medical radiation exposure to that from various nonmedical sources *Reference Doses and Quality in Medical Imaging* B. Bauer, 1998 **Fundamentals of Radiation Dosimetry** J.R Greening, 2017-12-14 This book reviews ionising radiation quantities and the relationships between them and discusses the principles underlying their measurement The emphasis is on the determination of absorbed dose and related dosimetric quantities *The Experimental Basis for Absorbed-dose Calculations in Medical Uses of Radionuclides* National Council on Radiation Protection and Measurements, 1985 **Journal of Nuclear Medicine** Society of Nuclear Medicine. Medical Internal Radiation Dose Committee, 1968

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