

Radioactive Iodine (RAI) Treatment — Preparation Instructions

For patients receiving I-131 for thyroid cancer (remnant ablation) or hyperthyroidism (Graves' disease / toxic nodule)

■ Read all instructions carefully before your treatment date. Failure to follow the low-iodine diet or medication instructions may require your treatment to be postponed.

Why These Instructions Matter

Radioactive iodine (I-131) works by being selectively absorbed by thyroid cells. For it to work effectively, your thyroid cells must be "hungry" for iodine — which means eliminating iodine from your diet and body beforehand. The goal is to maximize uptake of the RAI into the target tissue.

Low-Iodine Diet — Start 2 Weeks Before Treatment

The low-iodine diet begins 14 days before your treatment date and continues until after your treatment.

✓ ALLOWED — Low Iodine Foods	✗ AVOID — High Iodine Foods
Fresh or frozen meats (beef, chicken, pork, lamb)	Seafood of any kind (fish, shrimp, shellfish, seaweed)
Fresh fruits and vegetables (not canned)	Dairy products: milk, cheese, butter, yogurt, ice cream
Homemade bread (no iodized salt or dairy)	Eggs (especially egg yolks)
Pasta, rice, oats (plain)	Iodized salt (use non-iodized sea salt or kosher salt only)
Non-iodized sea salt or kosher salt	Processed or packaged foods (often contain iodized salt)
Egg whites only	Restaurant food (cannot confirm salt type)
Black pepper, herbs, spices	Soy products (soy sauce, tofu, edamame)
Vegetable oils	Red dye #3 (maraschino cherries, some candies)
Coffee, tea (without dairy or soy milk)	Vitamins or supplements containing iodine or kelp/seaweed
Water	Iodine-containing medications (amiodarone, some contrast dyes)

Thyroid Medication Instructions

For thyroid cancer patients:

- You must be hypothyroid (TSH elevated) before treatment OR have received recombinant TSH injections (Thyrogen). Your doctor will have given you specific instructions.
- If stopping thyroid hormone: stop levothyroxine (T4) 4–6 weeks before treatment, or stop liothyronine (T3 / Cytomel) 2 weeks before treatment.
- Your TSH must be >30 mIU/L for effective treatment.

For hyperthyroidism patients (Graves' disease or toxic nodule):

- Stop methimazole (Tapazole) or PTU 3–5 days before treatment as instructed by your doctor.
- You do NOT need to be hypothyroid — your TSH may actually be suppressed.
- Continue beta-blockers if prescribed.

Contrast Dye and Iodine-Containing Medications

■ **CT scans with contrast dye use large amounts of iodine and can interfere with RAI treatment for up to 2–3 months. Alert your doctor immediately if you have had a contrast CT within the past 3 months.**

- **Amiodarone (heart medication)** — contains massive amounts of iodine; may affect RAI for 6–12 months
- **CT contrast dye** — avoid for at least 6–8 weeks before treatment
- **Iodine-containing supplements** — stop 2 weeks before treatment

Radiation Safety After Treatment

After receiving I-131, you will emit radiation for a period of time. You will receive detailed radiation safety instructions from the nuclear medicine team. General guidelines:

- Maintain distance of at least 6 feet from others for 2–7 days (depending on your dose)
- Sleep alone for 3–7 days
- Avoid close contact with children and pregnant women for 1 week
- Return to work in 2–7 days depending on contact with others (desk work may resume sooner)
- Flush the toilet twice after using it for the first several days
- Use separate eating utensils and wash them separately for the first few days

Your Appointment: Your treatment date: _____ · Location: _____ · Time to arrive: _____ ·
Contact if questions: 832-968-7003