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Reporting Nuclear Medicine Injection Extravasations as Medical Events

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General Comment

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I believe we should stay with the current definition of extravasation as designated by Nursing and Oncology whereas an extravasation is an infiltration of a vesicant substance. It will be very important to call out that most radiopharmaceuticals do not have sufficient energy, chemical properties, and or volume to rise to the level of extravasations. Most radiopharmaceuticals will NOT cause blistering, ulcers or tissue death. However, those that can such as Thallous Chloride and most therapy agents; should be included in a extravasation plan and potentially reportable. Each institution should have a policy to cover how to prevent, identify, and treat infiltrations and extravasations. There should be a set standard as what rises to a level of "extravasation" that can be agreed on. This definition should include, but is not limited, Radiopharmaceuticals that are Vesicants (very limited), Therapeutical doses, infiltrated sites that have blanching, readniss and swelling greater than 10mm, and/or sites that cause significate pain with loss of mobility (again rare). By doing this, you will eliminate the idea that TC99m products raise to any level of severity that would include them in a reportable medical event, which would severely cripple the technology and be an injustice.