

<b><sup>125</sup>I</b>	<b>Nuclide Safety Data Sheet</b> <b>Iodine-125</b> www.nchps.org	<b><sup>125</sup>I</b>
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<b>I. PHYSICAL DATA</b>
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Radiation:           Gamma - 35.5 keV (7% abundance)  
                          X-ray - 27 keV (113% abundance)

Gamma Constant:  0.27 mR/hr per mCi @ 1.0 meter [7.432E-5 mSv/hr per MBq @ 1.0 meter]<sup>1</sup>

Half-Life [T<sub>½</sub>] :    Physical T<sub>½</sub>:     60.14 days  
                          Biological T<sub>½</sub>:   120-138 days (unbound iodine)  
                          Effective T<sub>½</sub>:    42 days (unbound iodine)

Specific Activity:  1.73E4 Ci/g [642 TBq/g] max.

<b>II. RADIOLOGICAL DATA</b>
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Radiotoxicity<sup>2</sup>:    3.44E-7 Sv/Bq (1273 mrem/ Ci) of <sup>125</sup>I ingested [Thyroid]  
                          2.16 E-7 Sv/Bq (799 mrem/ Ci) of <sup>125</sup>I inhaled [Thyroid]

Critical Organ:    Thyroid Gland

Intake Routes:    Ingestion, inhalation, puncture, wound, skin contamination (absorption);

Radiological Hazard: External & Internal Exposure; Contamination

<b>III. SHIELDING</b>
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	<u>Half Value Layer [HVL]</u>	<u>Tenth Value Layer [TVL]</u>
Lead [Pb]	0.02 mm (0.0008 inches)	0.07 mm (0.003 inches)

The accessible dose rate should be background but must be < 2 mR/hr

<b>IV. DOSIMETRY MONITORING</b>
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Always wear radiation dosimetry monitoring badges [body & ring] whenever handling <sup>125</sup>I

Conduct a baseline thyroid scan prior to first use of radioactive iodine

Conduct thyroid scan no earlier than 6 hours but within 72 hours of handling 1 mCi or more of <sup>125</sup>I or after any suspected intake

<b>V. DETECTION &amp; MEASUREMENT</b>
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Portable Survey Meters:

Geiger-Mueller [e.g. Bicon PGM, ] to assess shielding effectiveness

Low Energy Gamma Detector [e.g. Ludlum 44-21, ~19% eff. for <sup>125</sup>I] for contamination surveys

Wipe Test:                   Liquid Scintillation Counter

<b>VI. SPECIAL PRECAUTIONS</b>
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Avoid skin contamination [absorption], ingestion, inhalation, & injection [all routes of intake]

Use shielding [lead or leaded Plexiglas] to minimize exposure while handling mCi quantities of <sup>125</sup>I

Avoid making low pH [acidic] solutions containing <sup>125</sup>I to avoid volatilization

For Iodinations:

- Use a cannula adapter needle to vent stock vials of <sup>125</sup>I used; this prevents puff releases
- Cover test tubes used to count or separate fractions from iodinations with parafilm or other tight caps to prevent release while counting or moving outside the fume hood.

<sup>1</sup> Health Physics & Radiological Health Handbook, 3<sup>rd</sup> Ed. [Baltimore, MD; Williams & Wilkins, 1998], p. 6-11

<sup>2</sup> Federal Guidance Report No. 11 [Oak Ridge, TN; Oak Ridge National Laboratory, 1988], p. 136, 166

## VII. GENERAL PRECAUTIONS

1. Maintain your occupational exposure to radiation As Low As Reasonably Achievable [ALARA].
2. Ensure all persons handling radioactive material are trained, registered, & listed on an approved protocol.
3. Review the nuclide characteristics on (reverse side) prior to working with that nuclide. Review the protocol(s) authorizing the procedure to be performed and follow any additional precautions in the protocol. Contact the responsible Principal Investigator to view the protocol information.
4. Plan experiments to minimize external exposure by reducing exposure time, using shielding and increasing your distance from the radiation source. Reduce internal and external radiation dose by monitoring the worker and the work area after each use of radioactive material, then promptly cleaning up any contamination discovered. Use the smallest amount of radioisotope possible so as to minimize radiation dose and radioactive waste.
5. Keep an accurate inventory of radioactive material, including records of all receipts, transfers & disposal. Perform and record regular lab surveys.
6. Provide for safe disposal of radioactive waste. Procedures - . Avoid generating mixed waste (combinations of radioactive, biological, and chemical waste). Note lab staff are not permitted to pour measurable quantities of radioactive material down the drain.
7. If there is a question regarding any aspect of the radiation safety program or radioactive material use, contact Radiation Safety.

## VIII. LAB PRACTICES

1. Disposable gloves, lab coats, and safety glasses are the minimum PPE [Personal Protective Equipment] required when handling radioactive material. Remove & discard potentially contaminated PPE prior to leaving the area where radioactive material is used.
2. Clearly outline radioactive material use areas with tape bearing the legend "radioactive". Cover lab bench tops where radioactive material will be handled with plastic-backed absorbent paper; change this covering periodically and whenever it's contaminated. Alternatively cover benches with thick plastic sheeting (i.e., painter's drop cloth), periodically wipe it clean and replace it if torn.
3. Label each unattended radioactive material container with the radioactive symbol, isotope, activity, and, except for waste, the ICN [inventory control number]. Place containers too small for such labels in larger labeled containers.
4. Handle radioactive solutions in trays large enough to contain the material in the event of a spill.
5. Never eat, drink, smoke, handle contact lenses, apply cosmetics, or take/apply medicine in the lab; keep food, drinks, cosmetics, etc. out of the lab entirely. Do not pipette by mouth.
6. Never store [human] food and beverage in refrigerators/freezers used for storing radioisotopes.
7. Prevent skin contact with skin-absorbable solvents containing radioactive material.
8. Fume hoods and biological safety cabinets for use with non-airborne radioactive material must be approved (through the protocol) and must be labeled "Caution Radioactive Material".
9. All volatile, gaseous, or aerosolized radioactive material must be used only in a properly operating charcoal and/or HEPA filtered fume hood or Biological Safety Cabinet bearing a Caution Airborne Radioactivity hood label, unless oth