

Medical

RADIATION FROM PLUTONIUM (Pu) (*Treatment also applies to yttrium, americium, curium, and californium)

Agent Information: Plutonium radioisotopes are a class of highly toxic and unstable

chemicals whose radioactivity is measured by the number of atoms disintegrating per unit time. Plutonium radioisotopes emit radiation as high-energy alpha particles, medium-energy gamma rays, x-rays, and beta particles. This ionizing radiation

disrupts molecules in cells and deposits energy in tissues, causing damage. Plutonium is used to produce nuclear

weapons and is also used as a heat source in nuclear batteries

to produce electricity in devices.

Route of Exposure: Inhalation and ingestion are the most likely routes for internal

contamination from plutonium radioisotopes. Internal exposure continues until the radioactive material is flushed from the body

by natural processes, or decays. Inhaled or ingested

radionuclides are distributed to different organs and remain there for days, months, or years until they decay or are

excreted. Once internalized, plutonium radioisotopes can most

significantly affect lungs, bone, and liver as target organs.

Signs and Symptoms: Exposure to ionizing radiation from Plutonium causes

immediate or delayed health effects. Observable effects occurring soon after receiving very large doses include hair loss, skin burns, nausea, gastrointestinal distress, or death (Acute Radiation Syndrome). Long-term risks, including increased cancer risk, are a function of the specific

radioisotopes involved; and depend on the route, magnitude

and duration of exposure.

Protective Measures: Emergency medical care to save lives is the first priority.

Effective patient decontamination is important to limit the spread of radioactive materials in the hospital, and to prevent exposure to other patients and staff. Achieve dose reduction by limiting the time people are exposed, avoiding direct contact, maintaining distance from the source, and using shielding or

respiratory protection to prevent ingesting or inhaling contamination. Since deceased victims from a radiological event involving release of airborne Plutonium radioisotopes could be contaminated both internally and externally, they

should be handled using reverse isolation.



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Lab Samples Requested for

Evaluation:

CBC with absolute lymphocyte count. Repeat measurements

for at least 48 hours.

Prophylaxis: Appropriate PPE to avoid secondary contamination.

Treatment: Supportive care and decontamination are indicated. Treatment

to reduce internal dose is indicated for known uptake of

Plutonium, Yttrium, and other tranuranic radioisotopes such as americium, californium, and curium. Treatment is to administer Zinc-DTPA or Calcium-DTPA (diethylenetriaminepentaacetate)

to induce chelation, increase elimination, and reduce radioisotope body burden. Expert guidance on medical

treatment is available from REAC/TS at: 1-865-576-1005 (24/7

coverage).

Reporting: Immediately report suspect cases to the Division of Public

Health, 1-888-295-5156 (24/7 coverage).

For Additional Information: Visit the CDC website: https://emergency.cdc.gov/.