

General Reference:

SNM Practice Guideline for Parathyroid Scintigraphy 4.0

Common Indications:

Hyperparathyroidism, hypercalcemia

Pre-scan Clinical History:

Determine history related to stated clinical history. Locate any pertinent imaging results which describe related findings. Determine if patient has had recent iodinated contrast X-rays, prior parathyroid or thyroid surgery, or is taking thyroid hormone replacement.

Patient Preparation:

If SPECT/*CT* is available, administer one (1) Iosat potassium iodide tablet, 130mg (or equivalent), PO, immediately prior to radiopharmaceutical administration.

Relative Contraindications (if present, consult with nuclear medicine physician prior to scan):

- 1. Recent nuclear medicine studies
- 2. Pregnancy

Radiopharmaceutical and Route of Administration:

20 - 30 mCi Sestamibi, IV; Myoview SHOULD NOT be substituted.

Procedure:

- 1. FLOW 128x128, 120 seconds, 3 seconds per frame, zoom 1.45
- 2. ANTERIOR IMMEDIATE 128x128, 300 seconds, zoom 1.45
- 3. 15 MINUTE DELAY 128x128, 300 seconds, zoom 1.45
- 4. 30 MINUTE DELAY 128x128, 300 seconds, zoom 1.45
- 5. **60 MINUTE DELAY** 128x128, 300 seconds, zoom 1.45
- 6. **SPECT/CT (or SPECT if SPECT/CT unavailable) -** 32 dual-detector stops (64 projections), 30 sec/stop, 128x128 matrix, center neck in FOV.
- 7. 90 MINUTE DELAY 128x128, 300 seconds, zoom 1.45, followed immediately by
- 8. CHEST 128x128, 300 seconds, zoom 1.00

Review:

Prepare images and documents for clinical review as per Nuclear Imaging Acquisition and Presentation Guidelines.

Dr. Barr | Date Implemented: 2009 | Date Revised: 11/2018 | Date Reviewed: 8/2025