Radiation Exposure: Diagnose and Manage Acute Radiation Syndrome (ARS)

EVALUATE FOR

ACUTE RADIATION SYNDROME (ARS)

- What is ARS?
- ARS synonyms: Acute Radiation Syndrome, Acute Radiation Sickness
- Is ARS the result of a radiological or nuclear incident?
- More about ARS

CAUTION: MANAGEMENT

MODIFIERS

- BurnsTrauma
- Mass casualty
- Timing of surgery
- Blood products use
- At-risk/special needs populations

LOOK FOR SIGNS OF ARS

· Perform targeted physical examination

ESTIMATE DOSE FROM EXPOSURE

USE ANY CLINICAL DATA AVAILABLE (INTERACTIVE TOOLS)

- · Lymphocyte depletion kinetics
- Time to onset of vomiting
- Prodromal symptoms
- · Chromosome analysis (dicentrics)

DOSE RECONSTRUCTION BY PATIENT LOCATION

· Match patient location to exposure map

BEGIN ASSESSMENT & MANAGEMENT

- Assess/manage 4 sub-syndromes of ARS: <u>hematopoietic</u>, gastrointestinal, cutaneous, neurovascular
- Does patient need outpatient or inpatient management? (<u>Response category tool</u>)
- · Plan for evolution of ARS over time
- Expect heterogeneity of signs/symptoms
- · Consider using template for hospital orders

SPECIAL ISSUES

- Manage ARS with scarce resources (e.g., after nuclear detonation)
- Consider <u>cytokine treatment</u> for those acutely exposed to myelosuppressive doses of radiation (H-ARS), especially if dose > 2 gray
- Consider <u>multi-organ dysfunction</u> and <u>multi-organ failure syndromes of ARS</u>
- · Consider hematopoietic stem cell transplant for severe ARS

DECEASED

- Decedents with exposure only and no contamination require no special radiation precautions
- Register decedent in incident database

U.S. Department of Health & Human Services



SURVIVORS

- Discharge with appropriate <u>follow-up instructions</u>
- Register patient in incident database
- Radiation follow-up considerations
 - Whole-body dose
 - Immune status
 - Risk of cancer
 - Risk of specific organ dysfunction
 - Any future risks from external or internal contamination