

**CDC Patient Information Sheet –  
Additional Information for Infants, Children and Breastfeeding Women**

**Who can take KI (potassium iodide)?**

The thyroid glands of a fetus and of an infant are most at risk of injury from radioactive iodine. Young children and people with low amounts of iodine in their thyroid are also at risk of thyroid injury.

**Infants (including breast-fed infants)**

Infants have the highest risk of getting thyroid cancer after being exposed to radioactive iodine. All infants, including breast-fed infants need to be given the dosage of KI (potassium iodide) recommended for infants.

- Infants (particularly newborns) should receive a single dose of KI. More than a single dose may lead to later problems with normal development. Other protective measures should be used.
- In cases where more than one dose is necessary, medical follow up may be necessary.

**U.S. Food and Drug Administration (FDA) Recommendation**

All newborns (birth to 1 month) that are treated with KI should have their thyroid function monitored by a physician.

**Children**

The U.S. Food and Drug Administration (FDA) recommends that all children internally contaminated with (or likely to be internally contaminated with) radioactive iodine take KI (potassium iodide), unless they have known allergies to iodine (contraindications).

**Pregnant Women**

Because all forms of iodine cross the placenta, pregnant women should take KI (potassium iodide) to protect the growing fetus. Pregnant women should take only one dose of KI following internal contamination with (or likely internal contamination with) radioactive iodine.

**Breastfeeding Women**

Women who are breastfeeding should take only one dose of KI (potassium iodide) if they have been internally contaminated with (or are likely to be internally contaminated with) radioactive iodine. They should be prioritized to receive other protective action measures.