

Seinäjoki Central Hospital  
Physiology and Nuclear Medicine Unit

9 December 2025

## PET-CT imaging of the whole body metabolism

### Purpose of the examination

The intravenous drug is radioactive sugar, which is suitable for imaging inflammatory diseases that use sugar heavily, such as heart inflammation, and cancers.

It is used to assess inflammatory diseases and cancers, for example.

### Preparing for the examination

**On the two days before the examination, strictly follow the dietary guidelines provided below, which are intended to help you assess the heart-related findings in particular.**

The examination takes about 3 hours.

If you are taking metformin, stop taking it for three days before the study.

Avoid exerting yourself a day before and on the day of the test. Avoid exposure to cold.

Pregnancy or suspected pregnancy and breast-feeding are grounds for refusal.

If you cannot manage independently, an escort is necessary.

Blood glucose is measured at the nuclear medicine unit. Blood glucose levels should be below 10 mmol/l for the test to be performed.

**Carefully fill in the medical history form and food diary.**

The examination involves a low-carbohydrate diet **on the two days before the examination** and fasting from 6 pm onwards on the evening of the second day, after which you can drink water without restriction. **It is important for the success of the examination to follow this diet and fasting process.**

### You may eat/drink the following foods:

- meat (**not** marinated!), fish, shellfish
  - whole-meat cold cuts
  - eggs
  - matured cheeses, e.g. Edam, Emmental, Polar, Turunmaa
  - butter (100%), vegetable oil (100%)
  - parsley, dill, chives
  - clear broths (meat, fish, chicken and vegetable broths)
  - coffee, tea, water (**no sugar or milk**)
  - small quantities of the following vegetables: courgette, fresh cucumber, broccoli, cauliflower, Chinese cabbage, spinach, lettuce, mushrooms
  - **no fruit, berries or dairy products**
  - **no bread, porridge or pastries**
  - no chewing gum or pastilles
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#### Meal option 1

- bacon omelette – egg, bacon, seasonings and butter
- water

#### Meal option 2

- fried salmon
- list of vegetables
- water

#### Meal option 3

- tuna in oil
- list of vegetables
- water

#### **If you are diabetic,**

It becomes more difficult to assess the test if your blood glucose is above 10 mmol/l. Contact your diabetes nurse in good time if your fasting level is above this level.

The night before, you can eat a nutritious dinner according to the list above by 9 pm.

Check your blood sugar in the morning. If your blood sugar is low in the morning, you can have a light breakfast. After that, drink only water.

**Insulin or medication that stimulates insulin secretion should be administered at least 4 hours before the scan.**

#### Performing the examination

The imaging agent is administered intravenously. After administration of the imaging agent, you will rest for an hour before the scan. The duration of the scan is about 30 min.

#### After the examination

The radioactivity will quickly dissipate from your body. You can drink more to avoid exposing your bladder to radiation.

#### Place of the examination

Physiology and Nuclear Medicine Unit, Y building, lift no. 48, 3rd floor

If you have any questions about the study, you can contact the nuclear medicine unit, tel. +358 (0)6 415 4090.

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**PET SCAN MEDICAL HISTORY FORM**

Fill in the form and take it with you.

Name: _____	
ID: _____	Date: _____
Weight: _____	Height: _____
<b>Do you have or have you ever had any of the following (tick the box):</b>	
<input type="checkbox"/> diabetes <input type="checkbox"/> myocardial infarction <input type="checkbox"/> kidney disease <input type="checkbox"/> sarcoidosis	<input type="checkbox"/> tuberculosis <input type="checkbox"/> inflammatory bowel disease <input type="checkbox"/> cold/cough (in the last 1 month)
<input type="checkbox"/> other inflammatory disease, what? _____ <input type="checkbox"/> other long-term illness, what? _____ <input type="checkbox"/> traumas (fractures, injuries) what? _____	
Have you had any surgery/hysteroscopy/biopsy in the last <b>six months</b> ? <span style="float: right;"><input type="checkbox"/> yes    <input type="checkbox"/> no</span> What, when? _____ _____	
Have you received the following medication in the last <b>2 weeks</b> ?	
- cortisone	<input type="checkbox"/> yes <input type="checkbox"/> no
- blood cell growth factors	<input type="checkbox"/> yes <input type="checkbox"/> no
- chemotherapeutic/pharmacological agents*	<input type="checkbox"/> yes <input type="checkbox"/> no
Have you received radiotherapy in the last <b>3 months</b> *? <span style="float: right;"><input type="checkbox"/> yes    <input type="checkbox"/> no</span>	
When? _____ Which area? _____	
Question for women: is it possible that you are pregnant? <span style="float: right;"><input type="checkbox"/> yes    <input type="checkbox"/> no</span>	
Do you have an in-person/telephone appointment with a doctor? <span style="float: right;"><input type="checkbox"/> yes    <input type="checkbox"/> no</span> When? _____	

