March 6, 1991 IN RESPONSE, PLEASE REFER TO: M910212

MEMORANDUM FOR: James M. Taylor
Executive Director for Operations

Harold R. Denton, Director
Office of Governmental and Public Affairs

FROM: Samuel J. Chilk, Secretary /S/

SUBJECT: STAFF REQUIREMENTS - ANNUAL BRIEFING ON MEDICAL USE OF BYPRODUCT MATERIAL (SECY-91-026), 1:30 P.M., TUESDAY, FEBRUARY 12, 1991, COMMISSIONERS' CONFERENCE ROOM, ONE WHITE FLINT NORTH, ROCKVILLE, MARYLAND (OPEN TO PUBLIC ATTENDANCE)

The Commission was briefed by the NRC staff on the medical use of byproduct material.

The staff should continue to solicit constructive comments from licensees, states, professional societies and other federal agencies on how to improve the medical program. The staff should also seek timely and effective ways to communicate with the licensees at the working level on the causes of medical misadministrations and emerging safety issues in the medical use program.

The staff committed to provide the draft final rule on medical QA to the Commission in late March. Subsequently, this has been delayed until late April.
(EDO) (SECY Suspense: 4/29/91)

The Commission requested the staff to submit an analysis of trends in and causes of medical misadministrations caused by NRC and Agreement State licensees. To the extent possible, the results of this analysis should be factored into the draft final rule package on medical QA.
(EDO/GPA) (SECY Suspense: 4/29/91)

The staff committed to provide a response to the following questions raised during the briefing.

1. If a threshold dose level were to be selected, such as the thyroid dose associated with 30 microcuries of I-131, how many of the reported abnormal occurrences associated with

medical uses over the last three years would have fallen below that level? Additionally, Commissioner Curtiss would like to know how such a threshold dose level (as well as its corresponding whole body dose equivalent) would compare with the abnormal occurrence reporting thresholds applied to other inadvertent radiation exposures (i.e. non-medical). Are the estimated health consequences (stochastic and non-stochastic) attributable to inadvertent doses of this magnitude reported in a like manner for medical and nonmedical use events?
(EDO) (SECY Suspense: 4/29/91)

2. How is the staff tracking data on enforcement actions in the medical area and what is the cause for the current upward trend?
(EDO) (SECY Suspense: 7/19/91)

3. What results have been obtained from the human factors study by Syncor International? Does the staff intend to share this information in some form with other medical use licensees? This information should be provided to the Commission when it becomes available.
(EDO) (SECY Suspense: 7/19/91)

4. To what extent is the NRC supporting the National Council of Radiation Protection and Measurements' efforts to develop a draft commentary on the health significance of medical misadministrations?
(EDO) (SECY Suspense: 4/29/91)

cc: Chairman Carr
Commissioner Rogers
Commissioner Curtiss
Commissioner Remick
OGC
ACRS
PDR - Advance
DCS - P1-24