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Secretary
U.S. Nuclear Regulatory Commission
Washington, DC 20555-0001

OFFICE OF SECRETARY
RULEMAKINGS AND
ADJUDICATIONS STAFF

Attn: Rulemaking and Adjudications Staff

Arkansas Department of Health, Radiation Control and Emergency Management, Radioactive Materials Program has reviewed the proposed amendment to 10 CFR Part 35, "Medical Use of Byproduct Material".

In response to the Commission's request for public comments regarding recognition of professional specialty board certifications, the Department has several comments regarding the proposed rule. These comments are included on the attached page, "Comments on Proposed Revisions to Part 35".

If you have any questions regarding these comments, please contact Jared Thompson, Program Leader, or myself at (501) 661-2173.

Sincerely,

Kim C. Wiebeck, Health Physicist
Radioactive Materials Program
Radiation Control and Emergency Management

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SECY-02

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**ARKANSAS DEPARTMENT OF HEALTH
RADIATION CONTROL AND EMERGENCY MANAGEMENT**

COMMENTS ON PROPOSED REVISION TO PART 35

Adoption of the Proposed Revision by October 24, 2005

Agreement States should be given a full three-years from the implementation date of the proposed rule revision in which to develop a compatible rule. Many states, including Arkansas, must have legislative approval of regulation changes. Our legislature only meets every two-years. A shortened implementation period would be very difficult if not impossible to meet.

Preceptor Statements

We are glad to see that the burden of obtaining these statements has been placed on the individual rather than the certification boards as a prerequisite to the certification process.

Attest versus Certify

We had to look up the definitions of both words. From what we could find in Webster's they mean the same thing. So it shouldn't matter whether "certification" or "attestation" is used. However, since preceptors have been "attesting" for years, why not continue with this terminology since they are used to it and it will not seem like a big issue.

"High Energy"

The term high energy is used to specify the type of training for AMPs. However, NRC did not want to define the term because it would be "overly prescriptive and might be misinterpreted as establishing a threshold for the minimum photon energy appropriate." So why even include this terminology? Why not just state external beam therapy? Does anyone think an AMP is going to get the required training on less than mega-voltage external beam equipment?