## PROPOSED RULE (8549)



Comment on Proposed Rulemaking Regarding Training and Experience for AU, AMP and ANP.

As the Commission decides what the final rule will be, I think that there should be a clause grandfathering current AU for Medical uses, especially under 35.392. This includes the diagnostic Total Body Imaging scan, previously under 35.200 when the classifications were "diagnostic" and "therapeutic" rather than exams requiring a WD or not. When the current T&E requirements take full effect, an AU who may have been practicing for years, even decades, performing TBI scans under 35.200 (the old version) will no longer be able to sign a WD for this exam. The licensee must get an amendment, and will be required to have a preceptor statement for the AU. (As of this writing, there is some discretion being practiced by the Commission with regard to this. My understanding is, when the current rules take full effect in 2004, this discretion will be gone.) Leave aside the fact that many long practicing physicians find this insulting; in practical terms, the data required for the preceptor statement is often unavailable. A physician who has been practicing for many years has no idea how many of said exams he/she has taken part in, no idea how many clock hours were spent on this or that topic, etc. Nor, to say the least, are they interested in the tedious effort of getting this information from various past employers, schools, etc, assuming it can even be found. Computer databases of this information are a relatively recent invention, and we all know that changing technology often makes old data into irretrievable data. Thus sections 5a and b of NRC form 313A are nearly impossible to complete without inventing data, putting the licensee in a very difficult position.

An alternative to the grandfathering would be to remove diagnostic exams from the preceptor requirement.

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