

~~DOCKET NUMBER~~
~~PETITION RULE FROM~~ 35-18
(10FR 75752)

DOCKETED
USNRC

February 6, 2006 (12:01pm)

February 5, 2006

OFFICE OF SECRETARY
RULEMAKINGS AND
ADJUDICATIONS STAFF

Dear Members of the NRC:

On February 21, 2006, I am scheduled for an outpatient Iodine 131 treatment. As done in many states and hospitals in Connecticut, I will be given the "pill" of 100 millicuries and sent directly home with my guidelines for not contaminating my family/environment. I belong to a Thyroid Cancer Support Group and the national Thyroid Cancer Society, and many of the other members have gone through the outpatient treatment even with small children and pets at home. I had to fill out a one page yes or no check list (no place for comments) with general questions about my home life during treatment. It is my understanding that an "outside" safety officer reviews the checklist and decides if a patient should be in the hospital or have outpatient treatment. Neither my doctor, nor the hospital seemed to know exactly what the criteria is for hospitalizing people since it is so rarely done. The pat answer was "the patient prefers to go home." Who asked us?? Another answer I got from a doctor was, "In the hospital you can get sick from someone else!" No one I know prefers the risk of contaminating his home, to getting sick from something in the hospital.

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I am not sure how that decision is made, but I have yet to meet anyone who has had inpatient RAI treatment within the last two years. My support group leader had a seven year old at home, and was given a massive dose of 400 millicuries. She went home, even after setting off radiation alarms in the hospital! Believe me she was not happier going home to her family, and as for her well-being...do you think she was more concerned about herself or possible contamination to her family?

No one I have met in person, or on the Thyroid Cancer Website, has felt it was "better to be home" and "liked" the idea of not being isolated in the hospital. We are very concerned about our families, just as the hospital is concerned about its employees. It is my understanding that there are a GREAT deal of precautions taken in the hospital when a person is (was) admitted for inpatient RAI treatment. The room is in complete isolation, walls are covered, and anything used by the patient is disposed of in radioactive-safe containers. No employees or visitors are allowed near the patient.

As you know, nausea and vomiting are common side effects of this treatment. My husband will be driving me to and from treatment-an hour round trip. I am bringing a bucket "just in case" I vomit. I hope I can keep my whole head in the bucket and not contaminate my car and husband.

While at home, I am going to isolate myself in one room anyway, just as would be done in a hospital. I won't have any more freedoms than I would at the hospital. The only difference is, I have to clean my own contaminated toilet (a job done by professionals in the hospital) dispose of my own waste in plastic bags that have to be put somewhere (??) until they are no longer contaminated (how long?). I will contaminate my sewer system, use the same shower as my family, and do a major clean-up each day while I am feeling

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so sick (check the websites to see how ill many people feel before, during and after treatment). I must clean (I was told to use soap and water) anything that I might have gotten ANY body fluids on: perspiration, saliva, urine, vomit, feces (flush the toilet 2-3 times) I don't have a Geiger counter, so I really won't know when I am "safe" to be around others. Apparently, the hospitals (used to) use a Geiger counter and measures radioactivity to check for safe levels before allowing a person to go home, after several days in isolation. Doesn't anyone at the NRC see the huge and dangerous discrepancies and safety issues between hospitalizing the patient and sending the patient home to care for him/herself? Is this going to be another problem that will be recognized 20 years from now, just as nuclear testing and x-rays in the 1950s and 1960s, when it is too late? I know big business (i.e. insurance companies, hospitals) "rule the roost", but it is our government's business to protect us, our families, pets, and the environment.

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From: Carol Gallagher
To: Evangeline Ngbea
Date: Mon, Feb 6, 2006 11:17 AM
Subject: Comment letter on PRM-35-18

Attached for docketing is a comment letter on the above noted PRM from Nancy Griswold that I received via the rulemaking website on 2/5/06.

Her address is:

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Mail Envelope Properties (43E77697.21E : 3 : 886)

Subject: Comment letter on PRM-35-18
Creation Date: 2/6/06 11:17AM
From: Carol Gallagher

Created By: CAG@nrc.gov

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MESSAGE	1001	02/06/06 11:17AM
1661-0012.doc	28672	02/06/06 11:04AM

Options

Expiration Date: None
Priority: Standard
Reply Requested: No
Return Notification: None

Concealed Subject: No
Security: Standard