

PRM-35-20
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OFFICE OF SECRETARY RULEMAKINGS AND ADJUDICATIONS STAFF

Annette L. Vietti-Cook, Secretary
Attn: Rulemakings and Adjudications Staff
U.S. Nuclear Regulatory Commission
Washington, DC 20555-0001

DOCKETED
USNRC

January 16, 2007 (3:17pm)

Subject: Comment of Petition for Rulemaking (Docket No. PRM-35-20)

OFFICE OF SECRETARY
RULEMAKINGS AND
ADJUDICATIONS STAFF

Dear Ms. Vietti-Cook:

This letter is to provide comments on the petition for rulemaking filed by E. Russell Ritenour, Ph.D for the American Association of Medical Physicists, which was published in the Federal Register on November 1, 2006.

My recommendation for this proposed rule in general is that you should be careful. If you look at history, this is a similar position suggested to the agency by the various medical (physician) boards 12 years ago. Those petitions said, accept my board certification as evidence (ABR, etc.) that I have adequate training in the appropriate areas to serve as an authorized user. To take the board I've gone through a residency program that covers every thing needed. What did we find? Many of the certifying boards did not have sufficient control of the content of the residency programs and/or did not enforce their requirements. It took almost 12 years to turn that regulation around so that now the certifying boards have to be approved by the NRC as sufficient to meet requirements for the various roles what ever they were (authorized user, medical physicist, RSO). In the interim, many physicians were qualified as authorized users that either didn't have the training or the experience to perform the tasks and procedures being requested.

With Radiation Safety Officers, I've seen good ones and I've seen VERY poor ones out there practicing. I think that it would be a mistake to say that since you have a particular board certification, you qualify for a particular position.

I've been a practicing RSO since 1986, and when I originally applied I was required to complete a USNRC 313M supplement A. This document recorded my training and experience with radiation and radioactive materials. Along with that application, I submitted my college transcripts, a training summary and a CV. I did this because I wanted to provide a complete picture of who I was and that I was qualified to perform as an RSO.

I think that certain defined positions are important. An RSO is responsible for overseeing radiation safety and regulatory compliance within an organization, a diagnostic medical physicist ensures patient exposures are minimized and image quality is maximized, the therapeutic medical physicist develop dose plans for the administration of radiation to cure. A board certification doesn't necessarily mean that the individual

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can or will perform these duties properly. So establishing that a board certification is the only criteria necessary to qualify for a position doesn't serve the public well.

Over the years, I have had many friends and acquaintances within state and federal regulatory agencies. These people seemed to be able to look at a request for authorization and make an appropriate decision as to whether the applicant had sufficient training and experience to practice. My recommendation would be to let them do this!!

If you are determined to go to the "I've got a board certification, so I'm qualified model", I think you need to do the same that was done with the physicians and do a vetting of the educational programs behind the degrees (similar to the residency programs) and link the board certification process to a "proper" educational program.

This is a lot more difficult than it may sound. Why can't we just allow our regulators to use their *judgment*, clearly with some guidelines and acceptable types of training and experience? It's difficult to put every person through the same mold as many people may learn from experience, others through various courses, and others through formal school training. What I can tell you though is that just because you went to Wisconsin for medical physics and passed the ABR **does not** in and of itself mean you'd make good or qualified RSO.

So my recommendations would be:

- Create a regulation that provides guidance about various types of ways to demonstrate qualifications to be an RSO.
- Allow the various state and federal regulators latitude in assessing appropriateness.
- Do not create a regulation that mandates that you must have a particular board certification to be good enough or qualified enough to perform a particular job.
- Do not create a regulation that states that just because you have a particular board certification you must be qualified to perform a particular job.

I've belonged to the AAHP and AAMP for many years and I've seen a great deal of controversy between the AAPM/ABMP/ABR/ABHP each fighting for turf and political prominence. I've seen regulations generated that say that you have to be ABR/ABMP but not ABHP to perform a particular job. This is nonsense.

As I said, I've been practicing for 20 years and I've been responsible as the Radiation Safety Officer. I've been responsible for performing all performance evaluations of all imaging equipment. I've been responsible for assisting and overseeing all inpatient radionuclide therapies. So I guess that makes me an RSO/Diagnostic Medical Physicist and a Therapeutic Medical Physicist. Of course this too is nonsense. I'm not a trained Therapeutic Medical Physicist – I can't calibrate a linac or do dose plans but I have provided valuable services to Endocrinology while treating thyroid cancer... So what does that make me? A square peg in a round hole?

It's difficult to say that one form of credential is either sufficient or insufficient for a particular task. Further, it is critical that people use a little thing called professional judgment and ethics to know what they are comfortable and qualified to be doing and when different skills are needed to solve a particular problem, get them. That's what being a professional is all about.

Finally, watch out for these "Boards" fighting for the dues and the membership trying to undercut other "Boards" by saying they're not good enough!! It's about money and politics not practice.

Most sincerely,

Louie Tonry

Louie Tonry, CHP
US Army, Major (Ret)
Medical Service Corp

From: Carol Gallagher
To: SECY
Date: Tue, Jan 16, 2007 2:05 PM
Subject: Comment on PRM-35-20

Attached for docketing is a comment letter on the above noted PRM that I received via the rulemaking website on 1/14/07.

The commenter's address is:

louie tonry
8 john stark lane
hampton NH 03842

Carol

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Subject: Comment on PRM-35-20
Creation Date Tue, Jan 16, 2007 2:05 PM
From: Carol Gallagher

Created By: CAG@nrc.gov

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1795-0029.doc	31232	Tuesday, January 16, 2007 1:46 PM

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