## **PUBLIC SUBMISSION**

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Docket: NRC-2008-0419 Security and Continued Use of Cesium-137 Chloride Sources and Notice of Public Meeting

## Comment On: NRC-2008-0419-0001

Request for Comments on the Security and Continued Use of Cesium- 137 Chloride Sources and Notice of **Public Meeting** 

Document: NRC-2008-0419-DRAFT-0005 Comment on FR Doc # E8-17545

**Submitter Information** 

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## 7/31/08 73 FR 44780

Comment

Our hospital blood bank just purchased a new cesium blood irradiator 2 years ago at the cost of \$198,900 plus the newly required import/export licensing fees of \$6,000. We looked at x-ray irradiators at that time. These could not handle our volume, so we would have had to purchase 2 x-ray devices. The x-ray tubes were unpredictable, we would have had to maintain an inventory of tubes, adding to the costs. We also did not have sufficient space for 2 x-ray irradiators. It was an easy decision to remain with the cesium-sourced irradiator. If the NRC incorporates new regulations mandating that all cesium irradiators be replaced, the

NRC cannot expect hospitals that have just purchased irradiators to absorb those costs. As long as we have sufficent increased controls in place to assure security

of the device (as assured by the NRC inspection on site here), existing cesium irradiators should not be required to be replaced. If immediate replacement is mandated, time is needed for appropriate budgeting processes, and financial incentives must offset the loss.

SUNSI Review Complete

E-REDS= ADM-03 Call= J. Jankovich (JPJ2)

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## **Original Comment**

Our hospital blood bank just purchased a new cesium blood irradiator 2 years ago at the cost of \$198,900 plus the newly required import/export licensing fees of \$6,000. We looked at x-ray irradiators at that time. These could not handle our volume, so we would have had to purchase 2 x-ray devices. The x-ray tubes were unpredictable, we would have had to maintain an inventory of tubes, adding to the costs. We also did not have sufficient space for 2 x-ray irradiators. It was an easy decision to remain with the cesium-sourced irradiator. If the NRC incorporates new regulations mandating that all cesium irradiators be replaced, the NRC cannot expect hospitals that have just purchased irradiators to absorb those costs. As long as we have sufficent increased controls in place to assure security of the device (as assured by the NRC inspection on site here), existing cesium irradiators should not be required to be replaced. If immediate replacement is mandated, time is needed for appropriate budgeting processes, and financial incentives must offset the loss.