NRC MEDICAL RULEMAKING WORKSHOP, August 11, 2011

Medical Event Definition Associated with Permanent Implant Brachytherapy AAPM Comments

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 Should the regulations have a specific section for prostate implant brachytherapy rather than combined with all other permanent implant brachytherapy?

AAPM Response: **NO!**. It should apply to any permanent implant brachytherapy.

 Should the criterion for defining an ME [Medical Event] for permanent implant brachytherapy be activity-based only?

AAPM Response: **YES**! Written directive should be at the time of the implant, prior to the patient being discharged from the facility. Relates to 'real time' planning in the OR. Pre-plan is a 'guidance' for ordering and not for anything else.

 Should the criterion for defining an ME [Medical Event] for permanent implant brachytherapy be dose-based only?

AAPM Response: No. Not dose based but activity-based.

 Should the criterion for defining an ME for permanent implant brachytherapy be a combination activity- and dose-based criterion?

AAPM Response: No. Not dose based but activity-based.

 Should the NRC require training on how to identify MEs?

AAPM Response: **NO!** Training, in general, part of licensee's ALARA training program.

- Many professional organizations have recommended standards for when a dose to the treatment site for permanent prostate implants is assessed. The NRC staff is considering adding a time requirement to the regulations for this purpose. What is the appropriate time frame?
- AAPM Response: **NO** Do NOT add a time frame to the regulations. This can vary from same day to one month depending on patient availability for any individual licensee.

- Added AAPM Comments:
 - As we go forward, recommend we use the term 'source strength' rather than 'activity.'
 - This is consistent with current standards of professional and international scientific organizations.