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Secretary of the Commission
U.S. Nuclear Regulatory Commission
Docketing and Service Branch, Docket #PRM-35-9
Washington, DC 20555

Dear Mr. Secretary:

I write to support the Petition for Rulemaking filed by my professional societies (ACNP and SNM). I write as a nuclear medicine physician in charge of services in a University and Veterans Hospital. I have been concerned for ages that I am forced to follow the package insert and so therefore deny my patients of alternative procedures. At our hospital we deliberately modify procedures and protocols to suit particular patients to decrease their time in the department and to improve the information obtained from the study. We would welcome the idea of substituting radiopharmaceuticals occasionally to decrease radiation doses to patients - a good example is the use of Tc-99m-DTP for CSF flow imaging when used for confirming intrathecal drug administration and checking ventriculoperitoneal shunt patency. The required radiopharmaceutical is In-11-DTPA which imparts an unnecessarily high dose as the only package insert approved radiopharmaceutical. Other examples include the use of Tc-99m-MAA for LaVeen shunts and hepatic artery Infusaid testing - these tests are not package approved, but required tests, in a large institution.

In all respects I agree with the changes provided by the ACNP and SNM and endorse them wholeheartedly.

Yours sincerely,

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