

BAYLOR UNIVERSITY MEDICAL CENTER

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ERIK AND MARGARET JOHNSON MEDICAL AND SURGICAL HOSPITAL

3500 GASTON AVENUE
DALLAS, TEXAS 75246

BOONE POWELL, F.A.C.H.A.
DIRECTOR

DAVID H. MITT, F.A.C.H.A.
EXECUTIVE DIRECTOR

June 18, 1980

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PROPOSED RULE
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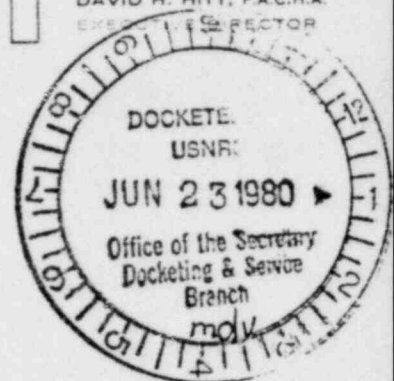
Secretary of the Commission
U. S. Nuclear Regulatory Commission
Washington, D.C. 20555

ATTENTION: Docketing and Service Branch

Gentlemen:

This is in response to the request for public comment concerning the Standards for Protection Against Radiation; Advance Notice of Proposed Rulemaking. The Baylor University Medical Center Radioisotope Committee, charged with the responsibility of safe and proper use of radiation in diagnosis and treatment of patients, is concerned about any possible changes in the current regulations. Specific points are outlined below.

1. The current permissible occupational radiation exposure limits are based on genetic considerations. These same limits have been imposed for the head and neck areas, a philosophy apparently not consistent with genetic concerns. It would seem a resolution of this discrepancy would be in order in any updating or revision of radiation protection standards.
2. The Baylor University Medical Center does not have scientific evidence or the expertise to establish safe levels of radiation exposure or consequences of radioactive effluents released into the environment. There is, however, no current body of overwhelming evidence indicating that the present radiation exposure guidelines are giving rise to significant short term or long term radiobiological effects.
3. The current record keeping requirements present a substantial burden in manpower, time and effort. An update that would streamline and consolidate these efforts would be very desirable and cost effective.
4. Based on the experience with certain special procedures such as cardiac catheterization, it would appear inadvisable to consider substantial reductions in the occupational exposures without substantive scientific evidence as an incentive. This same principle would appear to apply for radioactive effluents released to the environment. Additional requirements for particularly reductions in both effluents and occupational exposures will certainly contribute additional cost burdens.
5. It is also very desirable to have a single agency with responsibility for radiation related matters. Currently, multiple agencies (NRC, EPA, FDA, OSHA, BRH, BMD, DOT, and State and Local regulatory bodies) have independent authority in situations involving radiation. Although, they attempt to



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eliminate overlap in the various agencies, the individual radiation user is subject to regulations from all agencies. An attempt toward streamlining the multiple sources of regulatory activities is extremely desirable.

The philosophy on the use of radiation at Baylor University Medical Center has been and will continue to be consistent with the ALARA concept. Considerable time and effort is expended routinely in minimizing the radiation exposure to personnel, patients, and the general public. Revisions in current regulations that would streamline and minimize the burden of compliance with these regulations would enhance our fundamental goal of best patient care at the least possible cost to the patient.

Sincerely,

Richard E. Collier MD by [signature]

Richard E. Collier, M.D., Director
Division of Radiation Oncology
Chairman, Radioisotope Committee
Baylor University Medical Center

REC/tjh