MEDICAL SUBSTITUTE AND SERVICE Branch

Radiation Oncology

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PROPOSED RULE PR-35
(47 FR 18131)

Dear Sir:

I am writing in response to the contemplated amendments to 10 CFR Part 35 as published in the Federal Register Vol. 47, No. 82. In particular, I would like to address my comments to the portion which would be redesignated as Part 35.25(b). The proposed amendment would require that the visable indicator of the radiation monitor be located so as to be observable by a person entering the room and during operation of the unit.

I think that the wording of the proposed amendment is ambiguous. Most teletherapy treatment rooms are designed with a maze wall to lower the exposure rate at the room entrance. The presence of the maze wall will make it either very awkward or impossible to observe the visual indicator both during normal operation and upon entering the room. In the case where the visual indicator were observable during normal operation, the operator would have to pass through the entire maze system before the indicator would come into view.

I think there are reasonable arguments for having the visable indicator observable either during normal operation or upon entering the room. However, to be forced to install a second visable indicator or to mount mirrors of remount television cameras to do both results in a certain amount of regulatory overkill. The purpose of the radiation monitor is to assure the operator that the radiation source has fully returned to the "OFF" position. A simple observation of the visable indicator as the operator enters the room would certainly be sufficient to fulfill this goal.

I think that the proposed amendment should be reworded in an either/or fashion, e.g., the visable indicator of high radiation levels must be

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located so as to be observable by a person entering the room or ring operation of the unit. This would remove the ambiguity of the possed amendment and still retain the spirit of this reasonable safety relation.

Sincerely,

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