

Academic Component Institutions
The University of Texas at Arlington
The University of Texas at Austin
The University of Texas at Brownsville
The University of Texas at Dallas
The University of Texas at El Paso
The University of Texas-Pan American
The University of Texas of the Permian Basin
The University of Texas at San Antonio
The University of Texas Institute of Texan Cultures at San Antonio
The University of Texas at Tyler



Health Component Institutions
The University of Texas Southwestern Medical Center at Dallas
The University of Texas Medical Branch at Galveston
The University of Texas Health Science Center at Houston
The University of Texas Health Science Center at San Antonio
The University of Texas M.D. Anderson Cancer Center
The University of Texas Health Center at Tyler

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THE UNIVERSITY OF TEXAS SYSTEM

Office of General Counsel

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OFFICE OF SECRETARY
DOCKETING & SERVICE
BRANCH

Carolyn Wright
Office of Environmental Affairs
Director

24

May 25, 1994

DOCKETED UNDER
59 FR 9146
PR 20
(59 FR 9146)

VIA OVERNIGHT COURIER

Comments Due: May 26, 1994

Secretary of the Commission
U.S. Nuclear Regulatory Commission
Washington, D.C. 20555
Attention: Docketing and Service Branch

Re: NRC, 10 CFR Part 20, RIN 3150-AE90
ANPR: Disposal of Radioactive Material by Release into Sanitary Sewer
Systems

Dear Mr. Secretary:

As the Director of the Office of Environmental Affairs, I make these comments on behalf of the six health-related institutions of the University of Texas System:

1. The University of Texas Southwestern Medical Center at Dallas;
2. The University of Texas Medical Branch at Galveston;
3. The University of Texas Health Science Center at Houston;
4. The University of Texas Health Science Center at San Antonio;
5. The University of Texas M.D. Anderson Cancer Center at Houston;
6. The University of Texas Health Center at Tyler.

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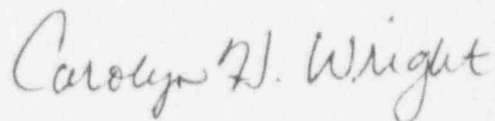
Docketing and Service Branch
May 25, 1994
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Apparently, the proposed rule stems from the detection of certain long-lived isotopes, (i.e., Am-241) at various municipal water treatment facilities around the country. We understand that such radionuclides are not commonly used in liquid form at research and clinical institutions such as those operated by the University of Texas. To the extent they are used, however, a primary concern of our medical research facilities is that excessive regulations not encumber or burden the flexibility needed for research protocols. This goal can be accomplished by exempting medical research institutions from the more stringent regulations needed for non-research medical facilities or industrial operations. As a result, the University requests that a specific exemption from the rule for all educational and medical research institutions be included in the final regulations. If a total exemption is not possible, the University requests a clear statement describing the processes that are permitted by educational and medical research institutions.

As indicated in the attached correspondence from the University of Texas Southwestern Medical Center at Dallas and the University of Texas M.D. Anderson Cancer Center in Houston, limiting the total quantity of radionuclides used in basic and clinical investigation would directly impair the University's contribution to health care and research into human disease. The University of Texas System adopts and incorporates these comments. Furthermore, solidification and disposal through a radioactive waste contractor would be costly and use valuable landfill space. In many cases the radioactive material will have decayed before disposal in radioactive waste facility. Radioactive material used in biomedical research which is disposed of in such low concentrations does not pose a significant risk to the general public and should be exempt from regulation.

If we can provide any further information, please do not hesitate to contact this office. Thank you for the opportunity to comment on behalf of the University of Texas.

Sincerely,



Carolyn H. Wright

xc: Mr. Ray Farabee
Radiation Safety Officers of the
Health-Related Institutions of
The University of Texas

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bxc: Ms. Pamela S. Bacon

THE UNIVERSITY OF TEXAS
SOUTHWESTERN MEDICAL CENTER
AT DALLAS

Frederick J. Bonte, M.D.
Effe and Wofford Cain Distinguished Chair in Diagnostic Imaging
Director, Nuclear Medicine Center

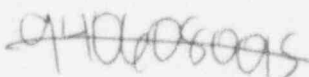
May 6, 1994

Secretary of the Commission
Nuclear Regulatory Commission
Attention: Docketing and Service Branch
Washington, DC 20555

By way of introduction I am Frederick J. Bonte, M.D., Professor of Radiology at The University of Texas Southwestern Medical School at Dallas, Texas. Presently I serve as a member of the Governor-appointed Texas Radiation Advisory Board, for which body I chair its Medical Committee; I am a member of the Commission on Radiological Units, Standards and Protection of the American College of Radiology; I am a former member of the National Council on Radiation Protection and Measurements. I would like to address the recent requests for public comments on matters involving disposal of radioactive material.

The Nuclear Regulatory Commission should not attempt to set limits on the total quantity of radioactive material that can be released annually by a licensee, when that licensee is a large institution such as our own. In our setting there are three major hospitals and a very large research complex, in which a high percentage of laboratories employ radionuclides in basic and clinical investigation. To limit the total quantity handled by such an institution would directly impair its contribution to health care, and to advancement of knowledge about human disease. The same admonition applies to the suggestion that "dose limits" might be applied. When the doses are those used in human diagnosis and treatment the judgement of the physician who is trained in the use of radioactive materials must remain paramount in each individual instance. To interfere with medical decisions is well beyond the province of the Nuclear Regulatory Commission.

The final issue involves the "continuation of exemptions for patient excreta". The concept of limiting the amount of radioactive material that a patient could



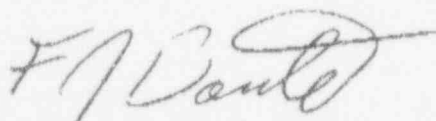
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excrete is an unfortunate one, since it would involve setting maximum values on the amount of radioactive material that could be administered to a patient with a life-threatening entity such as differentiated thyroid carcinoma. Further, if the Commission were to set some sort of limits on the amount of excreta that could be introduced into the sanitary sewer system, institutions such as our own, which deal with numerous cancer patients, would be placed in an untenable position. We do not now have, nor will we have, facilities in which to store human wastes while radioactive decay takes place. We have always been satisfied that the almost infinite dilution that occurs in the sewer system affords ample protection to the public, and to the environment.

Therefore, on behalf of myself, and all my colleagues in the practice of medical treatment and research, I ask the Commission not to attempt to regulate total quantities of radioactive material released by a licensee, nor the individual doses that may be administered to a patient, since to do so might well endanger the public health. Further I ask the Commission to continue exemptions for patient excreta, which I believe are presently being handled in a manner consonant with public safety.

Thank you for your attention to these matters.

Sincerely yours,



Frederick J. Bonte, M.D.
Cain Distinguished Chair in Diagnostic Imaging
Professor of Radiology

clt

cc: Jose Lopez, Ph.D. ✓
Jack S. Krohmer, Ph.D.