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PROPOSED RULE **PR 20,35**  
**(59 FR 30724)**

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American Association of Physicists in Medicine

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OFFICE OF SECRETARY  
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September 30, 1994

US Nuclear Regulatory Commission  
Attn: Larry Camper  
Mail Stop T8 F5  
11545 Rockville Pike, OWFN  
Rockville, MD 20852-2738

Re: NRC Proposed Rule: "Criteria for the Release of Patients Administered Radioactive Materials."

Dear Dr. Camper

On behalf of the American Association of Physicists in Medicine (AAPM) and its nearly 4000 members, I would like to provide the following comments on the NRC proposed rule on "Criteria for the Release of Patients Administered Radioactive Materials":

The AAPM endorses the NRC's efforts to resolve differences between Part 20 and Part 35 by declaring that Part 35 takes precedence over Part 20.

We agree with the NRC that the dose limit to the family member should be raised from 100 mrem per year to 500 mrem per year. We like that the Paragraph 35.75 of the proposed rules states explicitly that "a licensee may authorize release...if the total effective dose equivalent to an individual...is not likely to exceed 5 millisieverts (0.5 rem) in any one year." It is our interpretation that the whole point of this proposed rule is to raise the annual limit to exposed individuals from 100 millirem to 500 millirem.

The AAPM is concerned about the ability of the licensee to control a patient in a location other than the hospital or licensed facility. The AAPM believes releasing patients administered radioactive materials to a location other than the hospital is fraught with problems and needs further guidance from the NRC either through a policy statement or a revision of the regulatory guide. It is not clear also where liability lies if a released patient refuses to follow directions.

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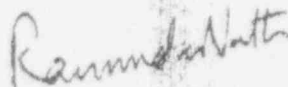
The AAPM is also concerned that there is a real possibility of radionuclide contamination by released individuals. Neither the proposed rule nor the regulatory guide address the issues of contamination. This is a deficiency which must be addressed.

It is AAPM's position that the decision regarding nursing an infant should be made by the informed mother and her physician. The NRC should not interfere with this decision.

Finally, the AAPM believes that the requirement of dose calculations rather than either calculation of remaining activity or a measurement of dose rate at one meter may significantly increase the time and paperwork required for each release. The proposed calculations are complex and open to a licensee's interpretation, and it is too likely that the NRC may interpret the circumstances in a specific case differently. In addition, it should be made clear that the calculations should be used as advice, but the ultimate decision to release a patient should be made by the physician and physicist working together. An expansion of the regulatory guide to include additional guidance with more examples is requested.

Thank you for allowing us to comment on this important regulation. We look forward to working with you in the future.

Sincerely,



Ravinder Nath, Ph.D.  
President, AAPM

RN/tm  
sent via FAX 301-415-5369

cc AAPM EXCOM  
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