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Mr. Samuel J. Chilk
Secretary of the Commission
U. S. Nuclear Regulatory Commission
Washington, D.C. 20555

Dear Mr. Chilk:

This letter is being written in response to the proposed amendment to Section 35.14 of 10CFR, Part 35 concerning misadministration reporting requirements. A point could be made that the Nuclear Regulatory Commission could play a useful role in the prevention of misadministration of radiation by requiring notification of such an accident. This would be particularly true if a common pattern of a particular accident could be identified after having received notification of such accidents from the country at large. Measures then could be taken by the commission to prevent further such accidents.

It is my very strong feeling that any requirement concerning the notification of referring physicians, patients and their relatives should not be a part of this proposed rule change, and, indeed, should not be a function of the regulatory commission. As you have pointed out in the Federal Registry, this intrudes into the very important area of the physician-patient relationship. Also, the misadministration of irradiation is no different than the misadministration of any other substance or any other form of treatment. Adequate mechanisms for dealing with this type of problem already exist.

I, therefore, strongly believe that the Nuclear Regulatory Commission's role should be limited solely to the prevention of future misadministration of radiation and should not in any way deal with the physician-patient relationship.

Sincerely yours,

A handwritten signature in cursive script, appearing to read "F. Bing Johnson".

F. Bing Johnson, M.D.
Associate Professor of Radiology
Division of Therapeutic Radiology

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Acknowledged by card 9/7