



98 JAN 12 P3:19

OFFICE OF SECRETARY
RULEM AND STAFF

Saint Joseph's Hospital of Atlanta
Department of Radiation Oncology

Henry D. Cline, M.D. Nancy H. Wiggers, M.D. R. Roger Sankey, Ph.D.

December 2, 1997

Dr. Donald A. Cool
U.S. Nuclear Regulatory Commission
11545 Rockville Pike
Rockville, MD 20852-2738

Re: Proposed revisions 10CFR Part 35

Dear Dr. Cool.

PROPOSED RULE PR 35
(62FR42219)

I am writing to request that there be no changes in the training requirements for teletherapy or brachytherapy in the revision of 10 CFR Part 35. The public has been well served and protected by the current standards. It is essential that the physician involved in the care of a patient be adequately trained. Radiation safety is a complex matter requiring extensive training and practical experience.

I am particularly concerned about regulations concerning coronary artery brachytherapy and Gamma-Knife treatments. In regards to coronary artery brachytherapy, the training requirements for this procedure should be the same as for any other brachytherapy procedure. Radiation to the heart is a high risk procedure and authorized users should have at least three years of training in therapeutic radiology. Also, in regards to Gamma-Knife treatment, radiation treatments of any kind involving the brain are high risk in nature. It is essential that anyone involved in these treatments be adequately trained with at least three years of training in therapeutic radiology.

Currently, the American Board of Radiology requires at least 6000 hours of direct clinical experience using radiation to treat patients. Should the NRC consider letting other specialty boards credential authorized users, standards should not be lessened. Patients have been well served and protected through the years by the current system. The status quo should be maintained.

Sincerely,

Many Wiggers, M.D.

9801260432 971202 PDR PR 35 62FR42219 PDR

