

From: [Fred McCoy](#)
To: [RulemakingComments Resource](#)
Subject: [External_Sender] Fred McCoy - Public comment: Docket ID NRC-2022-0218
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Thank you for the opportunity to comment on the above matter.

Over the course of the last few years, I've become aware of the issue of extravasation in the administration of nuclear medicine. I understand that the NRC estimates that 28,000 patients are extravasated with large doses of radiation every year. For the patients, this presents major problems – over-exposure and incorrect imaging results in the presence of often life-threatening clinical realities.

Under the proposed rule, I understand that patients would be required to report such extravasations. This appears to be a misunderstanding of the administration process. Providers, not patients, are the experts – and the only ones who are in a position to observe, evaluate, document, and mitigate such extravasations. Yes, allow patients to report as they may wish, but put the burden on the providers to measure and report as a requirement.

That would be more normal and effective.

This proposed rule requiring patients to report has the unmistakable odor of regulatory capture. In it, the NRC appears to put the interests of those they regulate above the radiation protection of patients. In reality, the NRC should require that providers treat an extravasation like any other medical event. Not only are they the only ones in position to do so properly and accurately, the doing of it will drive providers to improve training of their employees, reduce extravasations, and increase radiation protection. That seems the valid purpose of the regulation.

Thus, I support patient advocacy organizations and urge the NRC to reconsider the extravasation rulemaking. Put the reporting requirement on the providers.

Sincerely,

Fred McCoy
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