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To: RulemakingComments Resource
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The proposed rulemaking is ridiculous. Patients will not know that they have been extravasated. And if they did, they will not understand the impact of the extravasation to their arm tissue and skin, much less their test results. I am a cancer survivor. I can assure you that it would be very difficult for a patient undergoing treatment to have the courage, energy, time, money, and wherewithal to address a potential radiation injury with a physician they have never even seen before.

Who, in the world, could have come up with such a nonsensical idea. I expect my clinical team to know exactly how to perform a procedure. And, if they mess up, they should tell me immediately and do everything possible to minimize the harm to me. The idea that your recommendation would allow clinicians to extravasate patients, not identify it, not tell the patient, and then send them home makes absolutely no sense.

Let me ask you this. If any of you at the NRC needed a nuclear medicine procedure, would you want to be extravasated with a large dose of radiation in your arm. I don't think so.

Why is the NRC more concerned about protecting clinicians who routinely extravasate patients than they are about putting in regulations that would drive centers to increase training and improve care?

Let me be clear. I am absolutely against having patients be involved in any reporting requirement for extravasations. These medical events should be handled just like any other medical event that exposes patients to an unnecessarily large radiation dose, the exact position that the previous ACMUI patient advocate, Miss Laura Weil, recommended.

Kathryn Jezior