

From: [Payton Williams](#)
To: [RulemakingComments Resource](#)
Subject: [External_Sender] Public comment: Docket ID NRC-2022-0218
Date: Tuesday, July 18, 2023 11:04:46 PM

I support patient advocacy organizations and urge the NRC to reconsider extravasation rulemaking.

The NRC estimates 28,000 patients are extravasated with large doses of radiation every year. Rather than having providers report when they mishandle medical isotopes, NRC's proposed rulemaking puts the burden on patients. This approach is not right. The burden should be on trained clinicians to identify and measure extravasations when they happen so harm can be mitigated immediately, and the extent of the extravasation understood.

It is disturbing that the NRC has put the interests of those they regulate above the radiation protection of patients. The NRC should not propose new patient-based reporting requirements. Rather, the NRC should require that providers treat an extravasation like any other medical event. Doing so will drive the providers to improve training of their employees, reduce extravasations, and increase radiation protection. That is the purpose of regulation.

Payton Williams

Sent from my iPhone

From: [whikejbird \(null\)](#)
To: [RulemakingComments Resource](#)
Subject: [External_Sender] Public comment: Docket ID NRC-2022-0218
Date: Tuesday, July 18, 2023 10:29:59 PM

I support patient advocacy organizations and urge the NRC to reconsider extravasation rulemaking.

The NRC estimates 28,000 patients are extravasated with large doses of radiation every year. Rather than having providers report when they mishandle medical isotopes, NRC's proposed rulemaking puts the burden on patients. This approach is not right. The burden should be on trained clinicians to identify and measure extravasations when they happen so harm can be mitigated immediately, and the extent of the extravasation understood.

It is disturbing that the NRC has put the interests of those they regulate above the radiation protection of patients. The NRC should not propose new patient-based reporting requirements. Rather, the NRC should require that providers treat an extravasation like any other medical event. Doing so will drive the providers to improve training of their employees, reduce extravasations, and increase radiation protection. That is the purpose of regulation.

Sent from my iPhone

From: [Graham Williamas](#)
To: [RulemakingComments Resource](#)
Subject: [External_Sender] Public comment: Docket ID NRC-2022-0218
Date: Tuesday, July 18, 2023 9:47:38 PM

I support patient advocacy organizations and urge the NRC to reconsider extravasation rulemaking.

The NRC estimates 28,000 patients are extravasated with large doses of radiation every year. Rather than having providers report when they mishandle medical isotopes, NRC's proposed rulemaking puts the burden on patients. This approach is not right. The burden should be on trained clinicians to identify and measure extravasations when they happen so harm can be mitigated immediately, and the extent of the extravasation understood.

It is disturbing that the NRC has put the interests of those they regulate above the radiation protection of patients. The NRC should not propose new patient-based reporting requirements. Rather, the NRC should require that providers treat an extravasation like any other medical event. Doing so will drive the providers to improve training of their employees, reduce extravasations, and increase radiation protection. That is the purpose of regulation.

-Graham Williams

From: [Kent Broach](#)
To: [RulemakingComments Resource](#)
Subject: [External_Sender] Public comment: Docket ID NRC-2022-0218
Date: Tuesday, July 18, 2023 8:58:45 PM

I support patient advocacy organizations and urge the NRC to reconsider extravasation rulemaking. The NRC estimates 28,000 patients are extravasated with large doses of radiation every year. Rather than having providers report when they mishandle medical isotopes, NRC's proposed rulemaking puts the burden on patients. This approach is not right. The burden should be on trained clinicians to identify and measure extravasations when they happen so harm can be mitigated immediately, and the extent of the extravasation understood. It is disturbing that the NRC has put the interests of those they regulate above the radiation protection of patients. The NRC should not propose new patient-based reporting requirements. Rather, the NRC should require that providers treat an extravasation like any other medical event. Doing so will drive the providers to improve training of their employees, reduce extravasations, and increase radiation protection. That is the purpose of regulation.

From: [Lucas Williams](#)
To: [RulemakingComments Resource](#)
Subject: [External_Sender] Public comment: Docket ID NRC-2022-0218
Date: Tuesday, July 18, 2023 8:52:42 PM

I support patient advocacy organizations and urge the NRC to reconsider extravasation rulemaking.

The NRC estimates 28,000 patients are extravasated with large doses of radiation every year. Rather than having providers report when they mishandle medical isotopes, NRC's proposed rulemaking puts the burden on patients. This approach is not right. The burden should be on trained clinicians to identify and measure extravasations when they happen so harm can be mitigated immediately, and the extent of the extravasation understood.

It is disturbing that the NRC has put the interests of those they regulate above the radiation protection of patients. The NRC should not propose new patient-based reporting requirements. Rather, the NRC should require that providers treat an extravasation like any other medical event. Doing so will drive the providers to improve training of their employees, reduce extravasations, and increase radiation protection. That is the purpose of regulation.

From: [Walker Williams](#)
To: [RulemakingComments Resource](#)
Subject: [External_Sender] Public comment: Docket ID NRC-2022-0218
Date: Tuesday, July 18, 2023 5:21:08 PM

I support patient advocacy organizations and urge the NRC to reconsider extravasation rulemaking.

The NRC estimates 28,000 patients are extravasated with large doses of radiation every year. Rather than having providers report when they mishandle medical isotopes, NRC's proposed rulemaking puts the burden on patients. This approach is not right. The burden should be on trained clinicians to identify and measure extravasations when they happen so harm can be mitigated immediately, and the extent of the extravasation understood.

It is disturbing that the NRC has put the interests of those they regulate above the radiation protection of patients. The NRC should not propose new patient-based reporting requirements. Rather, the NRC should require that providers treat an extravasation like any other medical event. Doing so will drive the providers to improve training of their employees, reduce extravasations, and increase radiation protection. That is the purpose of regulation.

From: [Guido Neels](#)
To: [RulemakingComments Resource](#)
Subject: [External_Sender] Public comment: Docket ID NRC-2022-0218
Date: Tuesday, July 18, 2023 2:56:51 PM

I support patient advocacy organizations and urge the NRC to reconsider extravasation rulemaking.

The NRC estimates 28,000 patients are extravasated with large doses of radiation every year. Rather than having providers report when they mishandle medical isotopes, NRC's proposed rulemaking puts the burden on patients. This approach is not right. The burden should be on trained clinicians to identify and measure extravasations when they happen so harm can be mitigated immediately, and the extent of the extravasation understood.

It is disturbing that the NRC has put the interests of those they regulate above the radiation protection of patients. The NRC should not propose new patient-based reporting requirements. Rather, the NRC should require that providers treat an extravasation like any other medical event. Doing so will drive the providers to improve training of their employees, reduce extravasations, and increase radiation protection. That is the purpose of regulation.

Guido Neels

The information contained in this message may be privileged, confidential, and protected from disclosure. If you are not the intended recipient, or an employee, or agent responsible for delivering this message to the intended recipient, you are hereby notified that any dissemination, distribution, or copying of this communication is strictly prohibited. If you have received this communication in error, please notify us immediately by replying to the message and deleting from your computer.

From: [Tim Spencer](#)
To: [RulemakingComments Resource](#)
Subject: [External_Sender] Public comment for Docket ID NRC-2022-0218
Date: Tuesday, July 18, 2023 12:14:54 PM

Public comment for Docket ID NRC-2022-0218

I support patient advocacy organizations and urge the NRC to reconsider extravasation rulemaking.

The NRC estimates 28,000 patients are extravasated with large doses of radiation every year. Rather than having providers report when they mishandle medical isotopes, NRC's proposed rulemaking puts the burden on patients. This approach is not right. The burden should be on trained clinicians to identify and measure extravasations when they happen so harm can be mitigated immediately, and the extent of the extravasation understood.

It is disturbing that the NRC has put the interests of those they regulate above the radiation protection of patients. The NRC should not propose new patient-based reporting requirements. Rather, the NRC should require that providers treat an extravasation like any other medical event. Doing so will drive the providers to improve training of their employees, reduce extravasations, and increase radiation protection. That is the purpose of regulation.

From: [Michelle Thompson](#)
To: [RulemakingComments Resource](#)
Subject: [External_Sender] Public comment for Docket ID NRC–2022–0218
Date: Tuesday, July 18, 2023 11:22:23 AM
Attachments: [image001.png](#)

Public comment for Docket ID NRC–2022–0218

I support patient advocacy organizations and urge the NRC to reconsider extravasation rulemaking.

The NRC estimates 28,000 patients are extravasated with large doses of radiation every year. Rather than having providers report when they mishandle medical isotopes, NRC’s proposed rulemaking puts the burden on patients. This approach is not right. The burden should be on trained clinicians to identify and measure extravasations when they happen so harm can be mitigated immediately, and the extent of the extravasation understood.

It is disturbing that the NRC has put the interests of those they regulate above the radiation protection of patients. The NRC should not propose new patient-based reporting requirements. Rather, the NRC should require that providers treat an extravasation like any other medical event. Doing so will drive the providers to improve training of their employees, reduce extravasations, and increase radiation protection. That is the purpose of regulation.

Michelle

Michelle Thompson + GPO Administrator



5400 Laurel Springs Pkwy #405 Suwanee GA 30024
678.895.6948

From: [Denise Wilson](#)
To: [RulemakingComments Resource](#)
Subject: [External_Sender] Public comment: Docket ID NRC-2022-0218
Date: Tuesday, July 18, 2023 10:27:11 AM

I support patient advocacy organizations and urge the NRC to reconsider extravasation rulemaking.

The NRC estimates 28,000 patients are extravasated with large doses of radiation every year. Rather than having providers report when they mishandle medical isotopes, NRC's proposed rulemaking puts the burden on patients. This approach is not right. The burden should be on trained clinicians to identify and measure extravasations when they happen so harm can be mitigated immediately, and the extent of the extravasation understood.

It is disturbing that the NRC has put the interests of those they regulate above the radiation protection of patients. The NRC should not propose new patient-based reporting requirements. Rather, the NRC should require that providers treat an extravasation like any other medical event. Doing so will drive the providers to improve training of their employees, reduce extravasations, and increase radiation protection. That is the purpose of regulation.

From: [Karla](#)
To: [RulemakingComments Resource](#)
Subject: [External_Sender] Public comment for Docket ID NRC-2022-0218
Date: Tuesday, July 18, 2023 7:33:29 AM

I support patient advocacy organizations and urge the NRC to reconsider extravasation rulemaking.

The NRC estimates 28,000 patients are extravasated with large doses of radiation every year. Rather than having providers report when they mishandle medical isotopes, NRC's proposed rulemaking puts the burden on patients. This approach is not right. The burden should be on trained clinicians to identify and measure extravasations when they happen so harm can be mitigated immediately, and the extent of the extravasation understood.

It is disturbing that the NRC has put the interests of those they regulate above the radiation protection of patients. The NRC should not propose new patient-based reporting requirements. Rather, the NRC should require that providers treat an extravasation like any other medical event. Doing so will drive the providers to improve training of their employees, reduce extravasations, and increase radiation protection. That is the purpose of regulation.

Onward and Upward!!!