

Commissioner Dicus comments on COMSECY-00-0009:

I agree with the staff's alternative approach, informally approved by NCRP, that would establish a single, unified skin dose limit that would apply to any shallow dose equivalent to the skin regardless of the source or geometry of the irradiation. According to the staff's presentation to the Commission's Technical Assistants on February 15, 2000, I note that in contrast to the FTE and time schedules presented in [COMSECY-00-0009](#) dated January 31, 2000, staff has indicated that it would only take approximately two months of NCRP staff effort and approximately \$50-65K for an NCRP contract. As a result of this additional information, I have two recommendations: (1) because of past experience with deliverables, I recommend that any proposed work be accomplished through a contract rather than a grant to the NCRP, so that the NRC can place specific milestones and obligations in a contract in order to ensure that it will be complete in a timely manner; and (2) since the staff has indicated that NCRP informally advocates the staff's alternative approach, request in this contract that the proposed NCRP work be completed within six months.

In order to reduce the amount of time needed for this rule, I would also recommend that the staff not prepare a formal rulemaking plan since the Commission has already received three papers in the past two years on this issue and has provided Commission direction. To further reduce the amount of time needed for completion of this rule, it is recommended that the NCRP contract and the NRC staff work on the proposed rule be done in parallel to further reduce another 9-15 months off the proposed 33-month schedule.

As a final comment, although the staff states in the paper on page 2 that, ". . .changing this fundamental definition of shallow dose equivalent could not be done without formal, authoritative recommendations from NCRP," the staff stated in its briefing to the Commission Technical Assistants on February 15, 2000, as well as in a separate briefing to me on that same day, that NRC does not actually *need* the NCRP's formal recommendations on this issue, but rather that it is *advisable* to obtain an NCRP recommendation in this case. While I agree that it is highly advisable, I would recommend that before release of COMSECY-00-0009 to the public document room, that the statement on page 2 be clarified to state what the staff intended to say, which is:

"The staff believes that changing this fundamental definition of shallow dose equivalent would be strengthened with formal, authoritative recommendations from the NCRP."

NRC has made many changes to its regulations without formal, authoritative approval from NCRP, and we should not set a precedent in requiring that for this proposed rulemaking.