January 31, 2000

Chairman Meserve MEMORANDUM TO: **Commissioner Dicus Commissioner Diaz Commissioner McGaffigan Commissioner Merrifield**

FROM: William D. Travers /RA by Frank Miraglia Acting For/ **Executive Director for Operations**

SUBJECT:

SUMMARY MINUTES OF THE OCTOBER 20, 1999, MEETING OF THE ADVISORY COMMITTEE ON THE MEDICAL USES OF **ISOTOPES**

An Advisory Committee on the Medical Uses of Isotopes (ACMUI) meeting was held on

October 20, 1999. Attachment 1 is a summary of the discussion, and endorsements by the

ACMUI. Attachment 2 is a more detailed description of the minutes of the meeting.

Attachments:

- 1. Summary of Discussion and Endorsements
- 2. ACMUI Minutes, October 20, 1999
- cc: SECY OGC OPA OCA CFO CIO

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CONTACT: Betty Ann Torres, NMSS/IMNS/RGB 301-415-0191

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UNITED STATES NUCLEAR REGULATORY COMMISSION WASHINGHOW, B.C. 200900001

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SUMMARY OF ACMUI DISCUSSION AND ENDORSEMENTS FROM OCTOBER 20, 1999 MEETING

Discussion of Self Evaluation of the ACMUI

Draft responses to the self-evaluation criteria for ACMUI were developed and will be provided to ACMUI members for review and comment before being finalized and forwarded to the Commission.

Discussion of ACMUI's Presentation for the Part 35 Commission Briefing

<u>Radiation Safety Committee (RSC)</u>: The ACMUI endorsed the requirement for an RSC for two or more different types of uses under Subparts E, F, and H or two or more types of units under Subpart H.

<u>Training and Experience</u>: The ACMUI endorsed the alternative pathway for training and experience and the 80 hour requirement for physicians who only use I-131.

<u>Medical Event</u>: The ACMUI had previously endorsed the dose thresholds for medical events at their March, 1999 meeting.

<u>Reporting Threshold for Reporting Exposure to an Embryo/Fetus/Nursing Child</u>: The ACMUI discussed the impact on medical care, including standards of practice for pregnancy testing, the financial impact of pregnancy testing, unduly alarming pregnant women by notifying them of low exposures to an embryo or fetus, patient-physician confidence, increased regulatory burden, and the relationship of the threshold for reporting to safety considerations.

<u>Notification Following a Medical Event or Exposure of an Embryo/Fetus or Nursing Child</u>: While the ACMUI does not support any regulation requiring notification of physicians and patients, since this is redundant with existing standards of care, the Committee unanimously voted in favor of the alternative rule text, which was provided to the Commission in response to the SRM for the March, 1999 briefing on Part 35.

Implementation Issues: Ms. Haney updated the Committee on the status of the guidance document being developed along with the Part 35 rulemaking, pointing out that a benefit of the NUREG would be to provide model procedures for licensees that are less sophisticated than some of the larger licensees, while also providing flexibility for licensees to use different types of procedures. Dr. Wagner noted that ACMUI subcommittees would be useful in the development of revised inspection procedures.