

December 18, 2003

American Association for Nuclear Cardiology, Inc.
Attn: Mr. Charles H. Rose, MA, MSPH, D(ABSNM)
5660 Airport Boulevard, Suite 101
Boulder, Colorado 80301

Dear Mr. Rose:

Thank you for your commendation letter dated November 18, 2003 concerning the Information Notice 2003-12, "Problems Involved in Monitoring Dose to the Hands Resulting from the Handling of Radiopharmaceuticals." The considerations listed in your letter from studies by your association will be taken into consideration in the agency's current activities on issues of monitoring extremity dose.

As to your consideration number 4, the Nuclear Regulatory Commission has addressed the total exposure of licensed individuals. In paragraph 20.1001(b), Title 10 CFR Part 20 specifies the purpose of the regulation is to control use of licensed material by a licensee such that the *total* dose to an individual does not exceed the standards for protection against radiation. This *total* dose mentioned includes doses resulting from licensed and unlicensed sources of radiation (other than background radiation). Thus, licensees are required to take into consideration all doses received from licensed and unlicensed sources, if both are present as sources of exposure, even if the licensed source contributes only a small fraction of the *total* dose.

To address your consideration number 5, currently the NRC does not have guidance as to the minimum required hours of training for each specific topic listed in 10 CFR 35.50. However, if an Authorized User is named as Radiation Safety Officer (RSO), he or she must have the required experience with the radiation safety aspects of similar types of uses of by-product material for which the individual has RSO responsibilities (10 CFR 35.50(c)). A licensee must always amend its license before it allows an individual to work as an RSO (10 CFR 35.13(c)). NRC reviews the training and experience of the RSO as part of the licensing review process to determine if the individual has fulfilled the necessary requirements to be named as an RSO for the medical use authorized at the licensed facility.

Sincerely,

/RA/
Marissa Bailey, Section Chief
Section A, Material Safety and Inspection Branch
Division of Industrial and Medical Nuclear Safety
Office of Nuclear Material Safety and Safeguards

December 18, 2003

American Association for Nuclear Cardiology, Inc.
Attn: Mr. Charles H. Rose, MA, MSPH, D(ABSNM)
5660 Airport Boulevard, Suite 101
Boulder, Colorado 80301

Dear Mr. Rose:

Thank you for your commendation letter dated November 18, 2003 concerning the Information Notice 2003-12, "Problems Involved in Monitoring Dose to the Hands Resulting from the Handling of Radiopharmaceuticals." The considerations listed in your letter from studies by your association will be taken into consideration in the agency's current activities on issues of monitoring extremity dose.

As to your consideration number 4, the Nuclear Regulatory Commission has addressed the total exposure of licensed individuals. In paragraph 20.1001(b), Title 10 CFR Part 20 specifies the purpose of the regulation is to control use of licensed material by a licensee such that the *total* dose to an individual does not exceed the standards for protection against radiation. This *total* dose mentioned includes doses resulting from licensed and unlicensed sources of radiation (other than background radiation). Thus, licensees are required to take into consideration all doses received from licensed and unlicensed sources, if both are present as sources of exposure, even if the licensed source contributes only a small fraction of the *total* dose.

To address your consideration number 5, currently the NRC does not have guidance as to the minimum required hours of training for each specific topic listed in 10 CFR 35.50. However, if an Authorized User is named as Radiation Safety Officer (RSO), he or she must have the required experience with the radiation safety aspects of similar types of uses of by-product material for which the individual has RSO responsibilities (10 CFR 30.50(c)). A licensee must always amend its license before it allows an individual to work as an RSO (10 CFR 35.13(c)). NRC reviews the training and experience of the RSO as part of the licensing review process to determine if the individual has fulfilled the necessary requirements to be named as an RSO for the medical use authorized at the licensed facility.

Sincerely,

/RA/

Marissa Bailey, Section Chief
Section A, Material Safety and Inspection Branch
Division of Industrial and Medical Nuclear Safety
Office of Nuclear Material Safety and Safeguards

Distribution:

IMNS r/f

DOCUMENT NAME: G:\IMNS\DECICCO\Roseltr11_18_03.wpd Accession No. ML033460288

To receive a copy of this document, indicate in the box: "C"= Copy without attachment/encl. "E" = Copy with attachment/encl "N" = No copy * = See previous concurrence

OFC	MSIB*		MSIB*		MSIB*		MSIB	
NAME	J DeCicco		L Gersey		R Zelac		M Bailey	
DATE	12/12/03		12/16/03		12/17/03		12/18/03	

OFFICIAL RECORD COPY