



Prairie

CARDIOVASCULAR CONSULTANTS, LTD.

P.O. Box 19420 Springfield, Illinois 62794-9420 Phone #: (217) 788-0706 Fax #: (217) 525-2535

July 27, 1998

Senator Carol Moseley-Braun
320 Hart Senate Office Building
Washington, DC 20510-1303

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Dear Senator Moseley-Braun:

I am writing to support the Nuclear Regulatory Commission's Advisory Council for the medical use of Isotopes (ACMUD) endorsement of streamlining the radiation safety training and experience requirements for diagnostic nuclear cardiology to 120 hours because of its minimal risk to patients and public safety. The current training level is 1200 hours.

The American College of Cardiology has long advocated a more reasonable level of training requirement.

This is becoming critically important because of something called "intravascular brachytherapy". Currently this being performed only in large academic medical centers with strict oversight. The procedure is experimental but allows placement of various types of nuclear material into the coronary artery to reduce restenosis.

I am writing particularly because there is "intramural squabble" between radiologists and cardiologists. Radiologists tend to be protective of their "turf". This is a natural concern on their part. Radiologists do provide many valuable services; however, this is one that will really have to be moved over into cardiology since radiologists are not trained to do the coronary angiograms, stent placements, and balloon dilatations that this type of therapy requires. We certainly would be willing to work with radiology, but we simply do not wish to have onerous regulations that restrict patient care.

In summary, this is a complicated issue but I think the proper thing to do is to support the Nuclear Regulatory Advisory Council's recommendation to streamline safety training to 120 hours. This is quite adequate for the type of radiation involved and would improve patient care and accessibility of this very promising experimental approach.

Thank you for your consideration.

With kind regards,

H. Weston Moses, M.D.
HWM:bw

SPRINGFIELD

James T. Davis, M.D.
H. Weston Moses, M.D.
Richard E. Kethell, M.D.
Robert C. Woodruff, M.D.
Brian D. Miller, M.D.
Frank L. Nikkel, M.D.
Krieg P. Moulton, M.D.
Gregory J. Miskolc, M.D.
Charles L. Lucore, M.D.
Richard M. Holmway, M.D.
Kishna J. Roche-Singh, M.D.
Robert V. Trask, M.D.
Raymond L. Kadach, M.D.
Bart L. Troy, M.D.
Wilfred Lam, M.D.
Stephen A. Meyer, M.D.
Mark E. Steen, M.D.
Marc E. Shelton, M.D.
Christopher T. Mataverapu, M.D.
J. Antonio G. Lopez, M.D.
Stephen H. Jennison, M.D.
Vincent F. Zuck, M.D.
John B. GZI, M.D.
Byron F. Vandenbergh, M.D.
Mark Chin, M.D.
Frank V. Aquino, M.D.

St. John's Pavilion
Fax (217) 525-2535
Phone (217) 788-0706

Memorial Medical Center
Fax (217) 788-7022
Phone (217) 788-0706

Doctors Hospital
Fax (217) 685-1218
Phone (217) 788-0706

DECATUR

Robert S. Rosenstein, M.D.
Kris Patel, M.D.
Manchar Kaba, M.D.
Thomas J. Discher, M.D.
Charles W. Kepner, M.D.
Luis J. Caceres, M.D.

Decatur Memorial Hospital
Fax (217) 876-2444
Phone (217) 422-6100

St. Mary's Hospital
Fax (217) 422-7837
Phone (217) 422-6100

EFFINGHAM

Naser Naamodou, M.D.

St. Anthony's Memorial Hospital
Fax (217) 342-6286
Phone (217) 347-1772

CARBONDALE

Jeffrey R. Gibbs, M.D.
Glenn A. Nickele, M.D.

Carbonate Clinic
Fax (618) 351-1287
Phone (618) 649-3381