

From: outgoingagency@customerservice.nyc.gov
To: [Resolution Comments](#); survey@doitt.nyc.gov
Subject: City of New York - Correspondence #1-1-900560780 DOHMH - Comment on Proposed Rule
Date: Friday, October 18, 2013 5:54:51 PM

Your City of New York - CRM Correspondence Number is 1-1-900560780

DATE RECEIVED: 10/18/2013 17:53:18

DATE DUE: 11/01/2013 17:54:25

SOURCE: eSRM

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-----Original Message-----

From: PortalAdmin@doitt.nyc.gov
Sent: 10/18/2013 17:52:43
To: sbladmp@customerservice.nyc.gov; clong@doitt.nyc.gov; charris@doitt.nyc.gov; mguskova@doitt.nyc.gov
Subject: < No Subject >

From: ()
Subject: DOHMH - Comment on Proposed Rule

Below is the result of your feedback form. It was submitted by
() on Friday, October 18, 2013 at 17:52:43

This form resides at
http://www.nyc.gov/html/nycrules/html/proposed/comment_form.shtml?agency=DOHMH&rule=Radiation%20Control%20%28Article%20175%20%29

Office: DOHMH
Rule: Radiation Control (Article 175)
First Name: Thomas
Last Name: Petrone
Street: 728 Castleton Ave
City: Staten Island
State: New York
ZIP: 10310
Email: tpetrone@petroneassoc.com
Opinion on Proposed Rule: For

Comment: This part(see below) of the proposed rule creates different levels of public safety for dentists who have CBCT units compared to those who do not. The requirement to establish regular testing for traditional intraoral, panoramic and cephalometric xray systems should be applied to ALL dental registrants, not just those who possess a CBCT unit. Otherwise, patients who go to a dentist without a CBCT system will be irradiated by a machine that is not tested regularly for safe radiation characteristics. Typically, those who do not invest in new technologies are the very ones who possess units that are in disrepair and unsafe. To only require CBCT owners to regularly test all of there units is contrary to the purpose of protecting the public in a uniform manner.

The CBCT proposed QA testing is sound and should be retained.

Here is the section that is referenced:

§175.58 Dental radiography.

(c) Facilities possessing a Cone Beam Computed Tomography (CBCT) unit.

(1) Notwithstanding any provision of this Code to the contrary, dental facilities possessing a CBCT unit will be subject to the requirements of Section 175.07(b) of this Code, which requires a written quality assurance program for all dental equipment possessed by the facility, including a written quality control manual and a written radiation safety policy and procedures manual for the facility.

(i) For all intraoral, panoramic and cephalometric dental x-ray units (except CBCT units), the registrant must establish annual quality control testing of x-ray parameters sufficient to maintain patient doses and image quality consistent over time. The annual tests will evaluate, at a minimum, collimation, filtration, 9

patient dose, accuracy and reproducibility of X-ray techniques and the operational status of x-ray safety features.

From: [Amurao, Maxwell](#)
To: [Resolution Comments](#)
Cc: ma3272@columbia.edu
Subject: Comments re: Proposed rules for Article 175
Date: Tuesday, October 22, 2013 4:52:28 PM

Thank you for the opportunity to provide comments on the proposed changes to Article 175.

I have two comments to share regarding the proposed rules:

1. Section 175.54(c)(6) – “Protective garments that are used by operators ... must be checked annually for defects ... by using all of the following methods: visual investigation, tactile investigation, and x-ray imaging. If a defect is found ...”

My comment is that tactile investigation may be redundant to x-ray imaging. As such, if a radiation garment is inspected via x-ray imaging, then tactile investigation may not be necessary. Please consider removing the requirement for either tactile investigation or x-ray imaging.

2. Section 175.58(c)(1)(ii)(A) – “Quarterly quality control tests ... of the CBCT unit; and”

My comment is that these parameters do not change significantly in the span of one quarter for a stable system. The four parameters are more of a function of the image detector, which is generally consistent. Please consider modifying the frequency of these tests to be performed as annually, rather than quarterly. Performing the aforementioned tests may also be considered if the image receptor is replaced or repaired.

Respectfully submitted,

Maxwell Amurao, PhD, MBA, DABR

Director of Radiation Safety for Clinical Programs

Assistant Professor of Radiology (Physics)

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From: MiodownD@mskcc.org
To: [Resolution Comments](#)
Subject: Comments on Article 175.54 Proposed Amendments (Oct 22nd)
Date: Tuesday, October 22, 2013 3:42:11 PM

Comments on Article 175.54 Proposed Amendments

Thank you for the opportunity to comment during the meeting today. Below is a brief summery for your consideration.

1. Paragraphs 5 and 6 uses the phrasing “operators conducting fluoroscopic procedures...” as the determining factor for lead inspection criteria. Please clarify if the meaning of this phrase. Is the intention to include; just the operator (I.e. the individual stepping on the pedal of the fluoroscopic unit), everyone in the room of a fluoroscopic procedure, or any individual who may use a C-Arm?
2. Our institution maintains over 1200 pieces of lead protective garments. Other large scale NYC hospitals likely have comparable quantities of leaded garments. Given the little to no advantage of X-Ray inspection over tactile inspection of the garment the Committee on Radiation has ALARA concerns for the lead garment inspector(s). Perhaps consider fluoroscopy for some random fraction of the aprons?

Thank You,

Daniel Miodownik
Radiation Safety
Office: 1-212-639-7391
Mobile: 1-516-554-3363
miodownd@mskcc.org
Pager: 8438

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From: [Rich DiPietro](#)
To: [Resolution Comments](#)
Subject: resolution comments
Date: Tuesday, October 22, 2013 1:48:55 PM

With regards to the proposed changes to Article 175...

Under 175.58 Dental radiography (i): Is the department requiring all dental units other than CBCT, have annual quality control tests regardless of CRESO testing and inspections or is this just for the units that also have a CBCT on site?

(A) Quality control tests for CBCTs:

- The CT number of water, noise and uniformity should be performed at more often a frequency than quarterly at the facility. These numbers fluctuate and require a more frequent verification.
- The spatial resolution and reconstructed image measurement accuracy should be left to an annual test frequency. MQSA for mammography and the ACR for CT leave the spatial resolution to an annual medical physicist check.
- Is the reconstructed image measurement accuracy referring to a recon slice thickness or scaling measurement? Many of the CBCTs I have encountered do not include a slice thickness test and have thicknesses as small as 0.6mm
- kVp accuracy is not even a requirement for conventional CT and this should be removed. CT numbers of water at different kVps is a better option.
- training time for operators should be given a time requirement minimum (i.e. 8 hours at a minimum).

Richard V. DiPietro, M.S. DABR
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From: outgoingagency@customerservice.nyc.gov
To: Resolution.Comments:survey@doitt.nyc.gov
Subject: City of New York - Correspondence #1-1-901527467 DOHMH - Comment on Proposed Rule
Date: Tuesday, October 22, 2013 12:32:41 PM

Your City of New York - CRM Correspondence Number is 1-1-901527467

DATE RECEIVED: 10/22/2013 12:32:13

DATE DUE: 11/05/2013 12:32:38

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-----Original Message-----

From: PortalAdmin@doitt.nyc.gov
Sent: 10/22/2013 12:31:42
To: sbladmp@customerservice.nyc.gov; clong@doitt.nyc.gov; charris@doitt.nyc.gov; mguskova@doitt.nyc.gov
Subject: < No Subject >

From: ()
Subject: DOHMH - Comment on Proposed Rule

Below is the result of your feedback form. It was submitted by
() on Tuesday, October 22, 2013 at 12:31:41

This form resides at
http://www.nyc.gov/html/nycrules/html/proposed/comment_form.shtml?agency=DOHMH&rule=Radiation%20Control%20%28Article%20175%20%29

Office: DOHMH
Rule: Radiation Control (Article 175)
First Name: James
Last Name: Astarita
Street: 414 Rt 111
City: Smithtown
State: NY
ZIP: 11787
Email: jastarita@aaphysics.com

Opinion on Proposed Rule: For

Comment: 175.58 - Keep testing frequencies of CBCTs consistant with medical CTs by removing the need for quarterly testing.

Medical Event Reporting - Eliminate the dose threshold aspect of the medical reporting process as it pertains to diagnostic x-ray equipment as doses are not prescribed in a diagnostic procedure. Possibly consider skin reactions as an undesired threshold instead.

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From: outgoingagency@customerservice.nyc.gov
To: [Resolution Comments: survey@doitt.nyc.gov](mailto:Resolution.Comments:survey@doitt.nyc.gov)
Subject: City of New York - Correspondence #1-1-901504456 DOHMH - Comment on Proposed Rule
Date: Tuesday, October 22, 2013 11:37:21 AM

Your City of New York - CRM Correspondence Number is 1-1-901504456

DATE RECEIVED: 10/22/2013 11:36:55

DATE DUE: 11/05/2013 11:37:16

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To: sbladmp@customerservice.nyc.gov; clong@doitt.nyc.gov; charris@doitt.nyc.gov; mguskova@doitt.nyc.gov
Subject: < No Subject >

From: ()
Subject: DOHMH - Comment on Proposed Rule

Below is the result of your feedback form. It was submitted by
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http://www.nyc.gov/html/nycrules/html/proposed/comment_form.shtml?agency=DOHMH&rule=Radiation%20Control%20%28Article%20175%20%29

Office: DOHMH
Rule: Radiation Control (Article 175)
First Name: Kevin
Last Name: Strining
Email: kstrining@aaphysics.com
Opinion on Proposed Rule: For

Comment: 175.58 Frequencies of CBCT testing are more strict than for conventional CT which has a much higher patient dose. There are also tests which are not performed for CT such as kVp and exposure time accuracy. Following manufacturers recommendations is a nightmare; I suggest thoroughly defined annual testing by a medical Physicist and daily and monthly in-house testing.
Also, the amount of operator training and how it is documented must be defined.

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