

National Oncologic PET Registry Begins Accepting Patient Data

he National Oncologic PET Registry (NOPR) officially began accepting patient data May 8. The last step in the process for launching the NOPR occurred when the American College of Radiology (ACR) Institutional Review Board (IRB) reviewed and approved a slightly modified project plan in late April. On February 10, the Centers for Medicare & Medicaid Services (CMS) announced an agreement with the NOPR to collect data on PET scans as part of a project to evaluate the efficacy of PET as an oncologic tool, thereby allowing for greatly expanded coverage of PET under Medicare's new "coverage with evidence development" protocol. However, following that announcement, it became apparent that some changes were necessary related to IRB review and approval and consent issues.

The new project design requires both the patient and the referring physician to indicate their willingness to participate in the research component of the NOPR, although written informed consent is not required. Should either the patient or referring physician choose not to participate in the NOPR research, the information pertaining to that specific patient's PET scan will be excluded from the research database. Refusal of either the patient or referring physician to participate in the NOPR research will not affect CMS reimbursement for the PET scan. As originally planned, CMS reimbursement for PET scans covered by the NOPR is based upon receipt of the required information from the referring physician within the designated time frame.

Since CMS announced its intent to support a PET registry in January 2005, SNM representatives have assisted in developing NOPR, a national, Internet-based, audited data repository designed to gather PET data from Medicare beneficiaries and providers. In addition to SNM, representatives from the Academy of Molecular Imaging (AMI), ACR, the ACR Imaging Network, and the American Society of Clinical Oncology have also played key roles in guiding the project's development. The opening of NOPR means that Medicare coverage for PET will be available for

essentially all types of cancers including, but not limited to, brain, cervical, small cell lung, pancreatic, testicular, and ovarian cancers. (Coverage for breast cancer diagnosis and initial staging of axillary nodes was previously excluded and remains so.)



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NRC and NARM

Last year Section 651(e) of the Energy Policy Act of 2005 granted the Nuclear Regulatory Commission

(NRC) regulatory authority over naturally occurring and accelerator-produced radioactive material (NARM). Legislators gave the NRC just 18 months to promulgate new regulations covering NARM. Around April 7 the NRC released the proposed draft NARM rule package that was being submitted to the commission for review in an effort to give the public extended notification. The proposed draft rule package is available online at: http://ruleforum.llnl.gov/cgi-bin/library?source=*&library=narm_lib&file=*&st=ipcr.

The commission met on regulatory interests related to the Energy Policy Act of 2005 on May 15, and the NARM package was expected to be among the discussion topics. We expect that the final proposed draft rule for NARM will be released for a 45-day public comment period sometime after the May 15 meeting, pending any major alterations requested by the commissioners.

The SNM Public Affairs staff encourages all members with an interest in radioactive materials—particularly those who own or work directly with cyclotrons—to contact us at hcannon@snm.org or 703-708-9000 ext.1322 to share their impressions and/or concerns about the proposed draft rule package. Your insight would be much appreciated as the SNM staff and leaders prepare to develop comments on the final draft rule that is expected to be released within the next couple of months. *