

## NEWS BRIEFS

### HHS Sued by Technologists

The American Society of Radiologic Technologists (ASRT) has filed suit against the US Department of Health and Human Services (HHS) for failing to establish minimum standards for accreditation, certification, and safety procedures as required in the Consumer-Patient Radiation Health and Safety Act of 1981.

A proposed rule implementing the Act for minimum accreditation and credentialing standards, including those for nuclear medicine technologists, was published on July 12, 1983.

The ASRT lawsuit, filed August 14, 1985, in the US District Court for the District of Columbia, is based on the HHS failure to publish a final rule. The ASRT maintains that radiologic technologists are subject to licensing requirements that vary from state to state, which has been detrimental to its 15,500 members.

According to Michael Thayer, ASRT assistant executive director, the lawsuit will not be pursued because "HHS will be publishing standards no later than December 16, 1985." ■

### ACGME Changes Appeals Procedure

The appeals process for all residency review programs was recently modified by the American Medical Association's Accreditation Council for Graduate Medical Education (ACGME). A Residency Review Committee may now receive additional information from appellants, reconsider its determination, and close the record before forwarding it to the Board of Appeals. If a residency program is at risk of being placed on probation or losing its accredita-

tion, it will now be allowed to see the Residency Review Committee's full report during the reconsideration phase. The ACGME approved these changes at its September 9 meeting in Chicago. ■

### SNM/ACNP Respond to NRC Accident Rule

In a joint effort The Society of Nuclear Medicine (SNM) and the American College of Nuclear Physicians (ACNP) urged the US Nuclear Regulatory Commission (NRC) to reconsider its proposed rule for radiation accident liability.

As announced in the *Federal Register* (June 7, 1985, pp. 23960-23963), the NRC is considering whether to amend its regulations to require licensees to demonstrate that they have adequate financial means to pay for clean-up of an accidental release of radioactivity. (See *Newsline*, September 1985, p. 978.)

The SNM and ACNP pointed out that the majority of radionuclides used in clinical nuclear medicine are short-lived, and that the occasional spills which do occur are effectively controlled by an initial clean-up and present no threat to the environment and public health.

"In short, the proposed rule would increase the cost of providing nuclear medicine services by insuring against a hazard which has not occurred, and which we believe cannot occur," said Stanley J. Goldsmith, MD, president of the SNM, and Kenneth A. McKusick, MD, ACNP president.

Robert E. Sonnemaker, MD, president of the Southwestern Chapter of the SNM, said, "At this time when the federal government is emphasizing the reduction in the cost of medical care, the proposed rule-making

would be a major step in the opposite direction." The Southwestern chapter also sent an official comment to the NRC.

Most of the general liability insurance policies carried by several institutions surveyed by the Southwestern Chapter specifically exclude environmental contamination by radioactive materials, said Dr. Sonnemaker.

"Furthermore, as a result of upheavals in the environmental liability insurance market, such coverage is almost certain to be withdrawn from the market by 1986," said Drs. Goldsmith and McKusick. "We are certain that it would be difficult, if not impossible, for medical institutions to meet the financial responsibility requirements proposed by this rule," they said.

A significant expense would also be incurred by radionuclide producers, radiopharmaceutical manufacturers, and transport agencies, they added. ■

### HCFA Lists Carrier Contacts

The Health Care Financing Administration (HCFA) has prepared a complete list of regional office and Medicare carrier contacts that physicians and medical societies should consult regarding HCFA's Common Procedural Coding System (HCPCS).

The American Medical Association (AMA), HCFA staff, and the national medical specialty societies have concurred that to improve communications between HCFA, Medicare carriers, and physicians, each medical society should designate one staff person as a liaison with Medicare carriers and HCFA staff, according to the AMA. ■