

Resolution of Public Consultation Comments for

## ***ICRP Publication 157: Ethics in Radiological Protection for Patients in Diagnosis and treatment***

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### **Background**

ICRP is grateful for the time and effort taken to review and comment on draft publications during their public consultation period. Active public consultations are a valuable part of developing high-quality publications. Comments are welcome from individuals and organisations, and all are considered in revising the draft prior to publication.

To ensure transparency, comments are submitted through the ICRP website and visible by visiting [www.icrp.org](http://www.icrp.org).

### **Public Consultation**

This draft report was available for public consultation for five months, ending 11 August, 2023. About 120 responses were received on behalf of 5 organisations and 4 individuals (see annex).

In addition to the responses from public consultation, comments were received from ICRP Committees 3 and 4 as well as the Main Commission before and after consultation. During later stages of drafting of the document, TG members presented it for feedback to various RP organisations around the globe. During the public consultation, an online Zoom workshop was held to promote awareness of the draft document and encourage comments from the RP community.

The revised report was approved for publication by the Main Commission in November 2023, with agreement on some final revisions.

### **Resolution of Comments**

The many constructive comments received during public consultation are gratefully acknowledged and have helped the authors improve the report. It has been revised throughout and in particular:

- The word ‘patients’ has been added to the title to clarify the focus of this document so that it now reads “Ethics in Radiological Protection in Medical Patient Diagnosis and Treatment”.
- The key messages have been collected into an annexe for easy access and review.
- Language has been added to provide more clarity and description about how to use the evaluation methods of ethical values in the scenarios.

- Language was added to acknowledge our lack of understanding of radiosensitivity: "we do not yet fully understand".

Opinions on the content of the report and its usefulness were generally in agreement that the subject was useful and filled a gap. There were several comments/requests to clarify (a) how to use the method laid out for addressing an ethical dilemma in real practice or more to the point of this document, in teaching ethics in the radiation protection professions and (b) the realism of the provided case scenarios.

With respect to the evaluation method of ethical values of scenarios presented in Section 5, this approach has been tested and published, and there have been presentations at conferences to aid our understanding. The authors have added language to further describe not only why it is useful but how to use the method in this section as well as to reinforce how to refer back to specific descriptions in Section 5 and definitions in Section 2.

With respect to the realism of the scenarios, these are all based on experience or knowledge of task group members and some have been published. Unfortunately, while the cases may seem impossible to occur in today's health care facilities, in fact these incidents or types of incidents continue to happen, and we can learn from them.

Several comments suggested revising or adding scenarios. The purpose of these scenarios is above all illustrative, and we have decided to keep them to a limited number. However, this in no way invalidates these proposals. On the contrary, it demonstrates the value of the method, and the Commission is delighted that practitioners are going to develop scenarios that are specifically adapted to their practices and experiences.

With respect to comments about how to incorporate ethical training into the medical radiological professions, this is discussed in the final section, Section 8. Some of the commenters may not have realised this section provides several open source, web based materials.

There were several helpful comments referring to the contributions and interactions of the patients/family which were emphasised in the revision. For example, we agree that it is important to consider that two patients with similar knowledge may have different attitudes to risk, and frankly, to benefit of a medical imaging or treatment intervention. This is a daily occurrence.

### **Annexe: Consultation respondents**

Responses were received on behalf of the following organisations: the SRP (UK Society for Radiological Protection), SoR (Society and College of Radiographers), SFPM (French Medical Physicists Society), EFOMP (European Federation of Organisations for Medical Physics), and KARP (Korean Association for Radiation Protection). Responses were received from the following individuals: Cameron Jeffries, Jeanne Berg, Christopher Kalman, and Andrea Mastrelli.