

## YALE NEW HAVEN HOSPITAL

## FAX COVER SHEET

RADIATION SAFETY OFFICE  
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NEW HAVEN, CT 06510

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|-------------------------|--------------------------|-------------------------|-----------------|
| <b>SEND TO:</b>         | USNRC REGION I           | <b>FROM:</b>            | MIKE BOHAN, RSO |
| <b>ATTENTION:</b>       | LIZETTE ROLDAN,<br>PH.D. | <b>OFFICE LOCATION:</b> | WWW-204         |
| <b>OFFICE LOCATION:</b> |                          | <b>DATE:</b>            | 1-JUNE-07       |
| <b>FAX NUMBER:</b>      | (610) 337-5269           | <b>PHONE NUMBER:</b>    | (203) 688-2950  |

☐ URGENT ☐ REPLY ASAP ☐ PLEASE COMMENT ☐ PLEASE REVIEW ☒ FOR YOUR INFORMATION

**TOTAL PAGES, INCLUDING COVER:** 7

**COMMENTS: MAIL CONTROL NUMBER - 140532**

IF YOU HAVE ANY QUESTIONS, PLEASE FEEL FREE TO CONTACT ME AT (203) 688-2950.

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NMSS/RGN1 MATERIALS-002

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NRC FORM 313A (RSO)  
(2-2007)

U.S. NUCLEAR REGULATORY COMMISSION

**RADIATION SAFETY OFFICER TRAINING AND EXPERIENCE  
AND PRECEPTOR ATTESTATION**  
[10 CFR 35.50]APPROVED BY OMB: NO. 3150-0120  
EXPIRES: 10/31/2008

Name of Proposed Radiation Safety Officer

Lily Singhaviranon, M.D.

Requested Authorization(s) The license authorizes the following medical uses (check all that apply):

- ☒ 35.100    ☒ 35.200    ☐ 35.300    ☐ 35.400    ☐ 35.500    ☐ 35.600 (remote afterloader)  
☐ 35.600 (teletherapy)    ☐ 35.600 (gamma stereotactic radiosurgery)    ☐ 35.1000 ( \_\_\_\_\_ )

**PART I - TRAINING AND EXPERIENCE**

(Select one of the four methods below)

\*Training and Experience, including board certification, must have been obtained within the 7 years preceding the date of application or the individual must have obtained related continuing education and experience since the required training and experience was completed. Provide dates, duration, and description of continuing education and experience related to the uses checked above.

☐ **1. Board Certification**

- a. Provide a copy of the board certification.  
b. Use Table 3.c. to describe training in radiation safety, regulatory issues, and emergency procedures for all types of medical use on the license.  
c. Skip to and complete Part II Preceptor Attestation.

OR

☐ **2. Current Radiation Safety Officer Seeking Authorization to Be Recognized as a Radiation Safety Officer for the Additional Medical Uses Checked Above**

- a. Use the table in section 3.c. to describe training in radiation safety, regulatory issues, and emergency procedures for the additional types of medical use for which recognition as RSO is sought.  
b. Skip to and complete Part II Preceptor Attestation.

OR

☐ **3. Structured Educational Program for Proposed Radiation Safety Officer**

- a. Classroom and Laboratory Training

| Description of Training  | Location of Training   | Clock Hours   | Dates of Training*       |
|--|--|---------------|--------------------------|
| Radiation physics and instrumentation                              | Yale-New Haven Hospital<br>Nuclear Cardiology - 20 York St.<br>New Haven, CT 06510 | 50            | Feb. 2001 -<br>Feb. 2002 |
| Radiation protection   | Same as above  | Same as above | Same as above            |
| Mathematics pertaining to the use and measurement of radioactivity | Same as above  | 50            | Same as above            |
| Radiation biology  | Same as above  | 50            | Same as above            |
| Radiation dosimetry  | Same as above  | 50            | Same as above            |
| Total Hours of Training: 250                                       |  |               |                          |

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## RADIATION SAFETY OFFICER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)

3. Structured Educational Program for Proposed Radiation Safety Officer (continued)

## b. Supervised Radiation Safety Experience

(If more than one supervising individual is necessary to document supervised work experience, provide multiple copies of this section.)

| Description of Experience  | Location of Training/<br>License or Permit Number of Facility            | Dates of<br>Training*    |
|--|--|--------------------------|
| Shipping, receiving, and performing related radiation surveys  | Yale-New Haven Hospital<br>New Haven, CT 06510<br>NRC Lic. # 06-00819-03 | Feb. 2001 -<br>Feb. 2002 |
| Using and performing checks for proper operation of instruments used to determine the activity of dosages, survey meters, and instruments used to measure radionuclides  | Same as above  | Same as above            |
| Securing and controlling byproduct material  | Same as above  | Same as above            |
| Using administrative controls to avoid mistakes in administration of byproduct material  | Same as above  | Same as above            |
| Using procedures to prevent or minimize radioactive contamination and using proper decontamination procedures  | Same as above  | Same as above            |
| Using emergency procedures to control byproduct material   | Same as above  | Same as above            |
| Disposing of byproduct material  | Same as above  | Same as above            |
| Licensed Material Used (e.g., 35.100, 35.200, etc.)+<br>Tc-99m, Tl-201 <input checked="" type="checkbox"/><br>in nuclear cardiology applications <input checked="" type="checkbox"/><br>only <input checked="" type="checkbox"/> | Same as above  | Same as above            |

\* Choose all applicable sections of 10 CFR Part 35 to describe radioisotopes and quantities used: 35.100, 35.200, 35.300, 35.400, 35.500, 35.600 remote afterloader units, 35.600 teletherapy units, 35.600 gamma stereotactic radiosurgery units, emerging technologies (provide list of devices).

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**RADIATION SAFETY OFFICER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)****3. Structured Educational Program for Proposed Radiation Safety Officer (continued)****b. Supervised Radiation Safety Experience (continued)***(If more than one supervising individual is necessary to document supervised work experience, provide multiple copies of this section.)*

|   |  |
|---|--|
| Supervising Individual<br><br>Michael J. Bohan, RSO   | License/Permit Number listing supervising individual as a Radiation Safety Officer<br><br>06-00819-03, 06-00819-04 & 06-30445-01 |
| This license authorizes the following medical uses:   |  |
| <input checked="" type="checkbox"/> 35.100 <input checked="" type="checkbox"/> 35.200 <input checked="" type="checkbox"/> 35.300 <input checked="" type="checkbox"/> 35.400 |  |
| <input checked="" type="checkbox"/> 35.500 <input checked="" type="checkbox"/> 35.600 (remote afterloader)  | <input checked="" type="checkbox"/> 35.600 (teletherapy)   |
| <input checked="" type="checkbox"/> 35.600 (gamma stereotactic radiosurgery)  | <input checked="" type="checkbox"/> 35.1000 ( <u>SirSpheres, GliaSite</u> )  |

**c. Describe training in radiation safety, regulatory issues, and emergency procedures for all types of medical use on the license.**

| Description of Training   | Training Provided By  | Dates of Training*       |
|---|---|--------------------------|
| Radiation safety, regulatory issues, and emergency procedures for 35.100, 35.200, and 35.500 uses               | Yale-New Haven Hospital<br>20 York St.<br>New Haven, CT 06479 | Feb. 2001 -<br>Feb. 2002 |
| Radiation safety, regulatory issues, and emergency procedures for 35.300 uses                                   | N/A   | N/A                      |
| Radiation safety, regulatory issues, and emergency procedures for 35.400 uses                                   | N/A   | N/A                      |
| Radiation safety, regulatory issues, and emergency procedures for 35.600 - teletherapy uses                     | N/A   | N/A                      |
| Radiation safety, regulatory issues, and emergency procedures for 35.600 - remote afterloader uses              | N/A   | N/A                      |
| Radiation safety, regulatory issues, and emergency procedures for 35.600 - gamma stereotactic radiosurgery uses | N/A   | N/A                      |
| Radiation safety, regulatory issues, and emergency procedures for 35.1000, specify use(s):                      | N/A   | N/A                      |

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**RADIATION SAFETY OFFICER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)****3. Structured Educational Program for Proposed Radiation Safety Officer (continued)**

- c. Training in radiation safety, regulatory issues, and emergency procedures for all types of medical use on the license (continued)

Supervising Individual If training was provided by supervising RSO, AU, AMP, or ANP. (If more than one supervising individual is necessary to document supervised training, provide multiple copies of this page.)

Michael J. Bohan, RSO

License/Permit Number listing supervising individual

06-00819-03

License/Permit lists supervising individual as:

- ☒ Radiation Safety Officer    ☐ Authorized User    ☐ Authorized Nuclear Pharmacist  
☒ Authorized Medical Physicist

Authorized as RSO, AU, ANP, or AMP for the following medical uses:

- ☒ 35.100    ☒ 35.200    ☒ 35.300    ☒ 35.400  
☒ 35.500    ☒ 35.600 (remote afterloader)    ☒ 35.600 (teletherapy)  
☒ 35.600 (gamma stereotactic radiosurgery)    ☒ 35.1000 ( SirSpheres, GliaSite )

- d. Skip to and complete Part II Preceptor Attestation.

**OR****4. Authorized User, Authorized Medical Physicist, or Authorized Nuclear Pharmacist Identified on the licensee's license**

- a. Provide license number.  
b. Use the table in section 3.c. to describe training in radiation safety, regulatory issues, and emergency procedures for all types of medical use on the license.  
c. Skip to and complete Part II Preceptor Attestation.

**PART II – PRECEPTOR ATTESTATION**

Note: This part must be completed by the individual's preceptor. The preceptor does not have to be the supervising individual as long as the preceptor provides, directs, or verifies training and experience required. If more than one preceptor is necessary to document experience, obtain a separate preceptor statement from each.

**First Section**

Check one of the following:

☐ **1. Board Certification**

☐ I attest that \_\_\_\_\_ has satisfactorily completed the requirements in  
Name of Proposed Radiation Safety Officer

10 CFR 35.50(a)(1)(i) and (a)(1)(ii); or 35.50 (a)(2)(i) and (a)(2)(ii); or 35.50(c)(1).

**OR**☒ **2. Structured Educational Program for Proposed Radiation Safety Officers**

☒ I attest that Lily Singhaviranon, M.D. has satisfactorily completed a structural educational  
Name of Proposed Radiation Safety Officer

program consisting of both 200 hours of classroom and laboratory training and one year of full-time radiation safety experience as required by 10 CFR 35.50(b)(1).

**OR**

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## RADIATION SAFETY OFFICER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)

## Preceptor Attestation (continued)

## First Section (continued)

Check one of the following:

☐ 3. Additional Authorization as Radiation Safety Officer☐ I attest that \_\_\_\_\_ is an  
Name of Proposed Radiation Safety Officer☐ Authorized User☐ Authorized Nuclear Pharmacist☐ Authorized Medical Physicist

identified on the Licensees license and has experience with the radiation safety aspects of similar type of use of byproduct material for which the individual has Radiation Safety Officer responsibilities

AND

## Second Section

Complete for all (check all that apply):

☒ I attest that Lily Singhaviranon, M.D. has training in the radiation safety, regulatory issues, and  
Name of Proposed Radiation Safety Officer

emergency procedures for the following types of use:

☒ 35.100 Nuclear Cardiology applications only☒ 35.200 Nuclear Cardiology applications only☐ 35.300 oral administration of less than or equal to 33 millicuries of sodium iodide I-131, for which a written directive is required☐ 35.300 oral administration of greater than 33 millicuries of sodium iodide I-131☐ 35.300 parenteral administration of any beta-emitter, or a photon-emitting radionuclide with a photon energy less than 150 keV for which a written directive is required☐ 35.300 parenteral administration of any other radionuclide for which a written directive is required☐ 35.400☐ 35.500☐ 35.600 remote afterloader units☐ 35.600 teletherapy units☐ 35.600 gamma stereotactic radiosurgery units☐ 35.1000 emerging technologies, including:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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**RADIATION SAFETY OFFICER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)**

**AND**

**Third Section**  
**Complete for ALL**

Ⓝ 5 June 07

☒ I attest that Lily Singaliranan, R.D. has achieved a level of radiation safety knowledge  
Name of Proposed Radiation Safety Officer  
sufficient to function independently as a Radiation Safety Officer for a medical use licensee.

**Fourth Section**  
**Complete the following for Preceptor Attestation and signature**

I am the Radiation Safety Officer for Yale-New Haven Hospital  
Name of Facility

License/Permit Number: 06-00819-03

|  |  |                                    |                   |
|--|--|------------------------------------|-------------------|
| Name of Preceptor<br>Michael J. Bohan, RSO | Signature<br> | Telephone Number<br>(203) 688-2950 | Date<br>1-June-07 |
|--|--|------------------------------------|-------------------|

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