



**UROLOGY**

Sunil M. Apte, M.D.

**FAMILY MEDICINE**

Matthew J. Tiefenbrunn, M.D.  
Peter J. Lambie, M.D.

**PLASTIC/RECONSTRUCTIVE SURGERY**

Benjamin W. Verdine, M.D.

**ORTHOPEDIC SURGERY**

Thomas D. Matthews, M.D.  
David E. Chalk, M.D.  
Dean A. Lusardi, M.D.  
James R. Rotramel, M.D.

**PEDIATRICS**

Elizabeth P. Hammer, M.D.

**OBSTETRICS/GYNECOLOGY**

Christiane K. Korba, M.D.  
Erika R. O'Donnell, M.D.

**GASTROENTEROLOGY**

Barbara Dixon-Scott, M.D., Ph.D.

**GASTROENTEROLOGY**

Leslie E. Tucker, M.D., F.A.C.G., F.A.C.P.  
Carl F. Blatt, Jr., M.D.  
Chien-Huan Chen, M.D., Ph.D.

**CARDIOLOGY**

Dilip Banerjee, M.D., F.A.C.C.  
John M. Mohart, M.D.

**FAMILY MEDICINE**

Kelly J. Bain, M.D.  
Kim D. Colter, M.D.  
Thomas E. Davis, M.D., F.A.A.F.P.  
James R. Grimes, M.D.  
David P. Guss, M.D.  
Craig S. Holzem, M.D., F.A.A.F.P.  
Trevor P. King, M.D.  
Timothy P. Long, M.D.  
Keith M. Ratcliff, M.D., F.A.A.F.P.  
James D. Turner, M.D., F.A.A.F.P.  
Kristin Weidle, M.D.

**GENERAL SURGERY**

James D. Cassat, M.D., F.A.C.S.  
James D. Jansen, M.D., F.A.C.S.

**INTERNAL MEDICINE**

Bryce A. Ayers, M.D.  
Gary DuMontier, M.D.  
Robert W. Halsted, M.D.  
Michael E. Rau, M.D., F.A.C.P.  
Kenneth B. Smith, M.D., F.A.C.P.  
Shaukat A. Thanawalla, M.D.

**FAMILY MEDICINE**

Mark D. Rickmeyer, D.O.  
Craig I. Schmidt, M.D.

**NEUROLOGY/SLEEP DISORDERS**

Jamie T. Haas, M.D.

**URGENT CARE**

Thomas M. Farrell, M.D.  
Ann Elizabeth Mohart, M.D.

U. S. Nuclear Regulatory Commission  
Region III  
Materials Licensing Section  
2443 Warrenville Road, Suite 210  
Lisle, Illinois 60532-4352

**License Number 24-32304-01**

Dear Materials Licensing Section:

This is a request to have Brian Seeck, M.D., added as an Authorized User on our license for any byproduct material permitted by 10 CFR 35.200 for cardiovascular procedures. The attached NRC FORM 313A (AUD) and letter, jointly signed by Drs. Siegel and Gropler, are submitted as evidence that Dr. Seeck has completed the training necessary for the byproduct use requested and can function as an independent Authorized User. Dr. Seeck is licensed to practice medicine in the state of Missouri.

If you have any additional questions, please contact me at (636) 390-1750.

Sincerely,

*Bev Glosemeyer*  
Signature

*Bev Glosemeyer*  
Name

*Director of Operations*  
Title

*10-11-2007*  
Date

RECEIVED OCT 30 2007



**AUTHORIZED USER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)**

**3. Training and Experience for Proposed Authorized User**

a. Classroom and Laboratory Training.

Description of Training	Location of Training	Clock Hours	Dates of Training*
Radiation physics and instrumentation	See attached letter		July 1, 2006 to June 30, 2007
Radiation protection	See attached letter		July 1, 2006 to June 30, 2007
Mathematics pertaining to the use and measurement of radioactivity	See attached letter		July 1, 2006 to June 30, 2007
Chemistry of byproduct material for medical use ( <i>not required for 35.590</i> )	See attached letter		July 1, 2006 to June 30, 2007
Radiation biology	See attached letter		July 1, 2006 to June 30, 2007

**Total Hours of Training:** 80 hours

b. Supervised Work Experience (completion of this table is not required for 35.590).  
(If more than one supervising individual is necessary to document supervised work experience, provide multiple copies of this section.)

**Supervised Work Experience**

**Total Hours of Experience:** In excess of 620 hours

Description of Experience Must Include:	Location of Experience/License or Permit Number of Facility	Confirm	Dates of Experience*
Ordering, receiving, and unpacking radioactive materials safely and performing the related radiation surveys	See attached letter	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	July 1, 2004 to June 30, 2007
Performing quality control procedures on instruments used to determine the activity of dosages and performing checks for proper operation of survey meters	See attached letter	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	July 1, 2004 to June 30, 2007

**AUTHORIZED USER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)**

**3. Training and Experience for Proposed Authorized User (continued)**

**b. Supervised Work Experience. (continued)**

Description of Experience Must Include:	Location of Experience/License or Permit Number of Facility	Confirm	Dates of Experience*
Calculating, measuring, and safely preparing patient or human research subject dosages	See attached letter	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	July 1, 2004 to June 30, 2007
Using administrative controls to prevent a medical event involving the use of unsealed byproduct material	See attached letter	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	July 1, 2004 to June 30, 2007
Using procedures to contain spilled byproduct material safely and using proper decontamination procedures	See attached letter	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	July 1, 2004 to June 30, 2007
Administering dosages of radioactive drugs to patients or human research subjects	See attached letter	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	July 1, 2004 to June 30, 2007
Eluting generator systems appropriate for the preparation of radioactive drugs for imaging and localization studies, measuring and testing the eluate for radionuclidic purity, and processing the eluate with reagent kits to prepare labeled radioactive drugs	See attached letter	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	July 1, 2004 to June 30, 2007

Supervising Individual License/Permit Number listing supervising individual as an authorized user  
See attached letter 24-00167-11

Supervisor meets the requirements below, or equivalent Agreement State requirements (*check one*).

- 35.190     35.290     35.390     35.390 + generator experience in 35.290(c)(1)(ii)(G)

**c. For 35.590 only, provide documentation of training on use of the device.**

Device	Type of Training	Location and Dates

**d. For 35.500 uses only, stop here. For 35.100 and 35.200 uses, skip to and complete Part II Preceptor Attestation.**

**AUTHORIZED USER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)**

**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. (Not required to meet training requirements in 35.590)

**First Section**

Check one of the following for each use requested:

For 35.190

Board Certification

I attest that \_\_\_\_\_ has satisfactorily completed the requirements in  
Name of Proposed Authorized User

10 CFR 35.190(a)(1) and has achieved a level of competency sufficient to function independently as an authorized user for the medical uses authorized under 10 CFR 35.100.

OR

Training and Experience

I attest that \_\_\_\_\_ has satisfactorily completed the 60 hours of training and  
Name of Proposed Authorized User

experience, including a minimum of 8 hours of classroom and laboratory training, required by 10 CFR 35.190(c)(1), and has achieved a level of competency sufficient to function independently as an authorized user for the medical uses authorized under 10 CFR 35.100.

For 35.290

Board Certification

I attest that \_\_\_\_\_ has satisfactorily completed the requirements in  
Name of Proposed Authorized User

10 CFR 35.290(a)(1) and has achieved a level of competency sufficient to function independently as an authorized user for the medical uses authorized under 10 CFR 35.100 and 35.200.

OR

Training and Experience

I attest that Brian Seeck, M.D. has satisfactorily completed the 700 hours of training  
Name of Proposed Authorized User

and experience, including a minimum of 80 hours of classroom and laboratory training, required by 10 CFR 35.290(c)(1), and has achieved a level of competency sufficient to function independently as an authorized user for the medical uses authorized under 10 CFR 35.100 and 35.200.

**Second Section**

Complete the following for preceptor attestation and signature:

I meet the requirements below, or equivalent Agreement State requirements, as an authorized user for:

- 35.190     35.290     35.390     35.390 + generator experience

Name of Preceptor	Signature	Telephone Number	Date
See attached letter		314-362-2809	07/10/07
License/Permit Number/Facility Name			

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(FAX)3143626156

P. 002/002

# Washington University in St. Louis

## SCHOOL OF MEDICINE

### Division of Nuclear Medicine

10 July 2007


Certification Board in Nuclear Cardiology  
19562 Club House Road  
Montgomery Village, Maryland 20886


Re: Brian Seeck, M.D.

Brian Seeck, M.D. just completed a Fellowship in Cardiology in the program approved by the Accreditation Council for Graduate Medical Education (ACGME) at Barnes-Jewish Hospital/Washington University during the period from 1 July 2004 through 30 June 2007. During the fellowship period, Dr. Seeck undertook training in Nuclear Cardiology at this institution. This training was accomplished in two ways. First, during the first 2 years of his Cardiology Fellowship, Dr. Seeck spent 2 months on the Nuclear Cardiology Service. Subsequently, Dr. Seeck received his most intensive training within the organized structure of our ACGME-approved training program in nuclear medicine and nuclear radiology. His supervised work experience and supervised clinical experience were accomplished during rotations in the Division of Nuclear Medicine totaling 3 months in duration. In addition, Dr. Seeck has served in the capacity of research fellow in noninvasive cardiac imaging from July 2006 through June 2007. During this interval he spent the equivalent of 2 additional months receiving supervised training and clinical experience in cardiovascular nuclear medicine in the Division of Nuclear Medicine. During this training experience Dr. Seeck completed a minimum of 80 hours of classroom and laboratory training that meets the Nuclear Regulatory Commission (NRC) requirements as an INTEGRAL part of his/her fellowship/residency program. Moreover, he has provided Nuclear Cardiology services for more than 400 myocardial perfusion and radionuclide angiographic studies. Moreover, he obtained coronary angiographic correlation in more than 30 of the studies. Accordingly, Dr. Seeck has completed a training program in nuclear cardiology that meets the requirements for Level 2 training as outlined ACCFIASNC COCATS Guidelines for Training in Nuclear Cardiology, that were updated in 2006. Consequently, Dr. Seeck is competent to independently function as an authorized user under NRC 10 CFR 35.290 uses.

Please let us know if additional information is required.

Sincerely yours,

  
Barry A. Siegel, M.D.  
Director, Division of Nuclear Medicine  
Chairman, Radiation Safety Committee  
Washington University School of Medicine  
(Materials License No. 24-00167-11)

  
Robert J. Gropier, M.D.  
Lab Chief, Cardiovascular  
Imaging Laboratory - Preceptor  
CBNC Certified - number 1699

BAS/RJG:mbm

**MIR** Mallinckrodt Institute  
of Radiology  
510 South Kingshighway Boulevard, St. Louis, Missouri 63110, (314) 362-2809, Fax: (314) 362-2806

Patients First Health Care, LLC  
Nuclear Medicine - Brenda Overachmidt  
901 Patients First Drive  
Washington, Missouri 63090



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U.S. Nuclear Regulatory Commission  
Region III  
Materials Licensing Section  
2443 Warrenville Road, Suite 210  
Lisle, Illinois 60532-4352

