

Clarion Hospital

RECEIVED
REGION 1

2007 NOV 19 PM 12:44

October 31, 2007

NMSB1

U.S.N.R.C.
Region I
475 Allendale Road
King of Prussia, PA 19406-1415

03012379

Re: License #37-17215-01

To Whom It May Concern:

Please amend our radioactive materials license for the following item:

1. Please change the RSO on our license to Dr. Albert Barrett. Please refer to Form 313A and our radioactive materials license # 37-17215-01 (enclosed) for evidence of his training and experience.
2. Please delete dr. Gary F. Haverty as an authorized user of materials on our license.

Thank you for your attention in this matter.

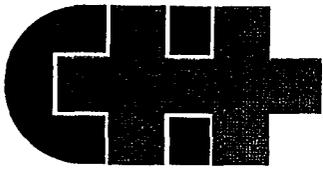
Sincerely,

Vincent Lamorella
Interim CEO

wv

141342

NMSS/RGN1 MATERIALS-002



Clarion Hospital

DELEGATION OF AUTHORITY

To: A. J. Barrett, D.O.

From: Vincent Lamorella, Interim CEO

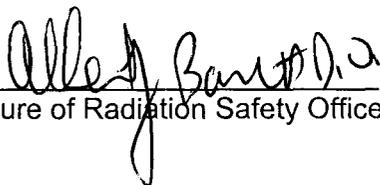
Subject: Delegation of Authority

You, Albert J. Barrett, D.O., have been appointed Radiation Safety Officer and are responsible for ensuring the safe use of radiation. You are responsible for managing the radiation protection program; identifying radiation protection problems; initiating, recommending, or providing corrective actions; verifying implementation of corrective action; stopping unsafe activities; and ensuring compliance with regulations. You are hereby delegated the authority necessary to meet those responsibilities, including prohibiting the use of radioactive material by employees who do not meet the necessary requirements and shutting down operations where justified by radiation safety. You are required to notify management if staff do not cooperate and do not address radiation safety issues. In addition, you are free to raise issues with the State of Pennsylvania Bureau of Radiation and the NRC at any time.

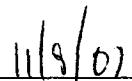
I accept the above responsibilities,



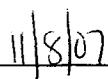
Signature of Management Representative



Signature of Radiation Safety Officer



Date



Date

**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
Albert J. Barrett, D.O.

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			
Radiation protection			
Mathematics pertaining to the use and measurement of radioactivity			
Radiation biology			
Radiation dosimetry			

Total Hours of Training: Physician is an authorized user.

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/ License or Permit Number of Facility	Dates of Training*
Shipping, receiving, and performing related radiation surveys	Clarion Hospital; Lic.#:37-17215-01	1/2/07 to 10/1/07
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	Same
Securing and controlling byproduct material	Same	Same
Using administrative controls to avoid mistakes in administration of byproduct material	Same	Same
Using procedures to prevent or minimize radioactive contamination and using proper decontamination procedures	Same	Same
Using emergency procedures to control byproduct material	Same	Same
Disposing of byproduct material	Same	Same
Licensed Material Used (e.g., 35.100, 35.200, etc.)+ 35.100 materials; <input type="checkbox"/> + 35.200 materials-diagnostic <input type="checkbox"/> + quantities <input type="checkbox"/> +	Same	Same

+ 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).

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 James Puckett, D.O., RSO	License/Permit Number listing supervising individual as a Radiation Safety Officer 37-17215-01
This license authorizes the following medical uses:	
<input checked="" type="checkbox"/> 35.100 <input checked="" type="checkbox"/> 35.200 <input type="checkbox"/> 35.300	<input type="checkbox"/> 35.400
<input type="checkbox"/> 35.500 <input type="checkbox"/> 35.600 (remote afterloader)	<input type="checkbox"/> 35.600 (teletherapy)
<input type="checkbox"/> 35.600 (gamma stereotactic radiosurgery)	<input type="checkbox"/> 35.1000 (_____)

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	James Puckett, D.O., RSO	1/2/07 to 10/1/07
Radiation safety, regulatory issues, and emergency procedures for 35.300 uses		
Radiation safety, regulatory issues, and emergency procedures for 35.400 uses		
Radiation safety, regulatory issues, and emergency procedures for 35.600 - teletherapy uses		
Radiation safety, regulatory issues, and emergency procedures for 35.600 - remote afterloader uses		
Radiation safety, regulatory issues, and emergency procedures for 35.600 - gamma stereotactic radiosurgery uses		
Radiation safety, regulatory issues, and emergency procedures for 35.1000, specify use(s):		

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.)*

James Puckett, D.O., RSO

License/Permit Number listing supervising individual

37-17215-01

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 (_____)

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 _____ 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

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 Albert J. Barrett, D.O. is an
Name of Proposed Radiation Safety Officer

Authorized User Authorized Nuclear Pharmacist

Authorized Medical Physicist

identified on the Licensee's 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 Albert J. Barrett, D.O. 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

35.200

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:

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

AND

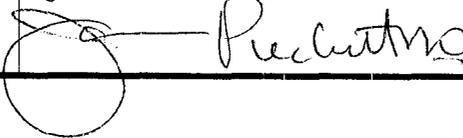
Third Section
Complete for ALL

I attest that Albert J. Barrett, D.O. 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 Clarion Hospital
Name of Facility

License/Permit Number: 37-17215-01

Name of Preceptor James Puckett, D.O.	Signature 	Telephone Number 814-226-1368	Date 11/9/07
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This is to acknowledge the receipt of your letter/application dated

10/31/2007 ^(RECEIVED) ~~(11/19/2007)~~ and to inform you that the initial processing which includes an administrative review has been performed.

AGEND. 37-17215-01
There were no administrative omissions. Your application was assigned to a technical reviewer. Please note that the technical review may identify additional omissions or require additional information.

Please provide to this office within 30 days of your receipt of this card

A copy of your action has been forwarded to our License Fee & Accounts Receivable Branch, who will contact you separately if there is a fee issue involved.

Your action has been assigned **Mail Control Number** 141342.
When calling to inquire about this action, please refer to this control number.
You may call us on (610) 337-5398, or 337-5260.