



**Inland Cardiology Associates, P.S.**  
**Heart and Vascular Diseases**  
[www.inlandcardiology.com](http://www.inlandcardiology.com)

Romeo A. Pavlic, MD  
 William S. Murphy, MD  
 Ralph M. Kunkel, MD  
 Donald B. Canaday, MD  
 Joel R. Galloway, MD  
 Jamshid Alaeddini, MD  
 Phillip E. Jones, MD

Stephen N. Ewer, MD  
 Timothy T.K. Chen, DO  
 Iyad Jamali, MD  
 Madar Abed, MD  
 Saad Tabbara, MD  
 Naveen Acharya, MD  
 David T. Jones, MD  
 Robert Zelman, DO  
 Joseph P. Johns, MD

RECEIVED

OCT 20 2008

DNMS

October 9, 2008

Roberto J. Torres  
 United States Nuclear Regulatory Commission, Region IV  
 612 E. Lamar Blvd. Ste 400  
 Arlington, TX 76011-4125

RE: License # 11-27645-01

Amendment Request:

I, Jamshid Alaeddini, MD would like to change the Radiation Safety Officer to Tressa Cook, CNMT.

Respectfully Submitted,

Jamshid Alaeddini, MD  
 Radiation Safety Officer

**ICA Spokane**  
 122 W. Seventh Ave. #450  
 Spokane, WA 99204  
 509-838-2960  
 1-800-ICA-7060  
 Fax 509-459-0424

**ICA North Spokane**  
 9631 N. Nevada St. #302  
 Spokane, WA 99218  
 509-466-1563  
 Fax 509-466-1607

**ICA Coeur d'Alene**  
 Chinook Medical Building  
 980 W. Ironwood Dr. Suite 205  
 Coeur d'Alene, ID 83814  
 208-765-2610  
 1-800-960-2610  
 Fax 208-765-0635

**ICA Richland**  
 900 Stevens Dr. Suite 101  
 Richland, WA 99352  
 509-946-2699  
 1-866-374-1959  
 Fax 509-946-2675

**ICA - Post Falls**  
 NW Medical Office Building  
 750 N. Syringa, Suite 104  
 Post Falls, ID 83854  
 208-292-1281  
 Fax 208-292-5192

472004



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October 9, 2008

To Whom It May Concern:

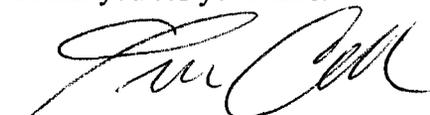
I am writing this letter to attest to my qualifications to be named Radiation Safety Officer at Inland Cardiology in Coeur D'Alene, ID.

I graduated in June of 2004 from Oregon Institute of Technology with a Bachelor's degree in Nuclear Medicine. This four year program included a full year clinical externship where I was working under the supervision of Craig Gracyalny at Sacred Heart Hospital in Spokane, WA from June of 2003 to June of 2004.

I have been a Certified Nuclear Medicine Technologist at Inland Cardiology for four and a half years and have been in the position of Assistant Radiation Safety Officer for the last four months. I have held this position under Dr. Jamshid Alaeddini, our Radiation Safety Officer, and have been performing all duties of the RSO under his guidance.

I have also recently completed the Radiation Safety Officer course through the Nevada Technical Associates in Las Vegas, NV.

Thank you for your time.



Tressa Cook, CNMT

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122 W. Seventh Ave. #450  
Spokane, WA 99204  
509-838-2960  
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Fax 509-459-0424

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1-866-374-1959  
Fax 509-946-2675

**ICA - Post Falls**  
NW Medical Office Building  
750 N. Syringa, Suite 104  
Post Falls, ID 83854  
208-292-1281  
Fax 208-292-5192

**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

*Tressa COOK, CNMT*

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	<i>Nuclear Medicine Training B.S. Degree Oregon Institute of Technology</i>		
Radiation protection			
Mathematics pertaining to the use and measurement of radioactivity			
Radiation biology			
Radiation dosimetry			

Total Hours of Training: *200 hrs. total*

**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	Inland Cardiology Associates License # 11-27645-01	July 2008 to Current
Using and performing checks for proper operation of instruments used to determine the activity of dosages, survey meters, and instruments used to measure radionuclides	↓	↓
Securing and controlling byproduct material		
Using administrative controls to avoid mistakes in administration of byproduct material		
Using procedures to prevent or minimize radioactive contamination and using proper decontamination procedures		
Using emergency procedures to control byproduct material		
Disposing of byproduct material		
Licensed Material Used (e.g., 35.100, 35.200, etc.)+ <u>Tc 99m, Tl201, Cs137, Co57 sources for patient imaging and for quality control.</u>		

+ 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  <i>Jamshid Alaeddini, MD</i>	License/Permit Number listing supervising individual as a Radiation Safety Officer  <i>License #11-27645-01</i>
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 (gamma stereotactic radiosurgery)	<input type="checkbox"/> 35.600 (teletherapy)
	<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	<i>Oregon Institute of Technology</i> <i>and</i>	<i>2000-2004</i>
Radiation safety, regulatory issues, and emergency procedures for 35.300 uses	<i>Clinical Externship</i> <i>Sacred Heart Hospital</i> <i>Spokane, WA</i>	<i>2003-2004</i>
Radiation safety, regulatory issues, and emergency procedures for 35.400 uses	<i>and</i> <i>RSO Training course</i> <i>by Nevada Technical</i> <i>Associates</i>	<i>Sept. 2008</i>
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.)*

License/Permit Number listing supervising individual

Jamshid Alaedidini, MD

License # 11-27645-01

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 Tressa Cook 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 \_\_\_\_\_ 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 Tressa Cook, CNMT 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:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

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

U.S. NUCLEAR REGULATORY COMMISSION

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

AND

Third Section  
Complete for ALL

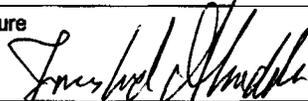
I attest that Tressa Cook, CNMT has achieved a level of radiation safety knowledge  
Name of Proposed Radiation Safety Officer

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 Inland Cardiology  
Name of Facility

License/Permit Number: # 11-27645-01

Name of Preceptor	Signature	Telephone Number	Date
Jamshid Alaeddini, MD		(509) 838-2960	10/10/08

PAGE 8

**Tressa N. Cook, CNMT**

*Has successfully completed the 40 hour technical short course entitled*

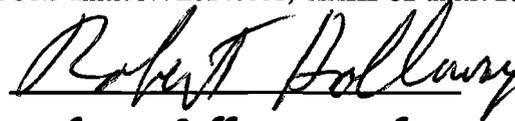
**Radiation Safety Officer**

*September 15 - 19, 2008*

*This certificate presented in Las Vegas, Nevada, September 19, 2008*

*By Nevada Technical Associates, Inc.*

Approval codes for C.E. units are: ASRT 30.5 units: NVZ0146001, AAHP 32 units: 2008-00-005, ABIH 4.5 units: 08-1362



**Robert Holloway, Ph.D.**

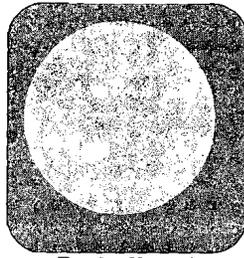
*Course Coordinator*

# NMTCB

The Nuclear Medicine Technology  
Certification Board  
3558 Habersham at Northlake, Bldg. I  
Tucker, GA 30084-4009  
404-315-1739

November 30, 2007

Tressa N. Cook, CNMT



Peel off seal  
ACTIVE

KEEP THIS AS A RECEIPT FOR YOUR RECORDS  
This annual registration card and annual seal acknowledges payment of \$35.00 for your 2008 registration fee. Your credentials are valid for the calendar year of 2008.



**NMTCB**  
www.nmtcb.org

(404) 315-1739

The Nuclear Medicine Technology  
Certification Board CERTIFIES THAT

Tressa N. Cook  
Certificate No: 025465

is an active Certified Nuclear Medicine Technologist in good standing.

Certificant since: 08/04/2004

Expiration: December 31, 2008

REMOVE CARD ALONG PERFORATIONS  
REPLACEMENT CARD \$5.00 PER CARD

# OREGON INSTITUTE OF TECHNOLOGY

The Oregon State System of Higher Education,  
on the nomination of the faculty  
has conferred upon

Tressa Noel Cook

the degree of  
Bachelor of Science  
in  
Radiologic Science  
Nuclear Medical Technology Option

with all rights and privileges thereto pertaining  
June 12, 2004

  
Chancellor



  
President, Oregon Institute of Technology

  
Governor

4 0 0 0 4

## ACCEPTANCE REVIEW MEMO (ARM)

**Licensee:** Inland Cardiology Associate PS      **License No.:** 11-27645-01  
**Docket No.:** 030-35234      **Mail Control No.:** 472004  
**Type of Action:** Amend      **Date of Requested Action:** 10-09-2008

**Reviewer Assigned:** ARM reviewer(s): Torres

Response	Deficiencies Noted During Acceptance Review
	<input type="checkbox"/> Open ended possession limits. Submit inventory. Limit possession. <input type="checkbox"/> Submit copies of latest leak test results. <input type="checkbox"/> Add IC L.C./Fingerprint LC, add SUNSI markings to license. <input type="checkbox"/> Confirm with licensee if they have NARM material.

**Reviewer's Initials:** \_\_\_\_\_ **Date:** \_\_\_\_\_

- Yes  No Request for unrestricted release Group 2 or >. Consult with Bravo Branch.
- Yes  No Termination request < 90 days from date of expiration
- Yes  No Expedite (medical emergency, no RSO, location of use/storage not on license, RAM in possession not on license, other)
- Yes  No TAR needed to complete action.

**Branch Chief's and/or HP's Initials:** \_\_\_\_\_ **Date:** \_\_\_\_\_

### SUNSI Screening according to RIS 2005-31

Yes  No **Sensitive and Non-Publicly Available** if any item below is checked

General guidance:

- \_\_\_\_\_ RAM = or > than Category 3 (Table 1, RIS 2005-31), use Unity Rule
- \_\_\_\_\_ Exact location of RAM [suite #, bldg. #, location different from mailing address] (whether = or > than Category 3 or not)
- \_\_\_\_\_ Design of structure and/or equipment (site specific)
- \_\_\_\_\_ Information on nearby facilities
- \_\_\_\_\_ Detailed design drawings and/or performance information
- \_\_\_\_\_ Emergency planning and/or fire protection systems

Specific guidance for medical, industrial and academic (above Category 3):

- \_\_\_\_\_ RAM quantities and inventory
- \_\_\_\_\_ Manufacturer's name and model number of sealed sources & devices
- \_\_\_\_\_ Site drawings with exact location of RAM, description of facility
- \_\_\_\_\_ RAM security program information (locks, alarms, etc.)
- \_\_\_\_\_ Emergency Plan specifics (routes to/from RAM, response to security events)
- \_\_\_\_\_ Vulnerability/security assessment/accident-safety analysis/risk assess
- \_\_\_\_\_ Mailing lists related to security response

NOV - 5 2008

**Branch Chief's and/or HP's Initials:** RITZ **Date:** \_\_\_\_\_

NOV 18 2008

DATE

This is to acknowledge the receipt of your letter/application dated 10-09-08, and to inform you that the initial processing, which includes an administrative review, has been performed.

There were no administrative omissions. Your application will be 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:

---

The action you requested is normally processed within 90 days.

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** 472004.  
When calling to inquire about this action, please refer to this mail control number.  
You may call me at 817-860-8103.

Sincerely,

*Colleen Murdahan*  
Licensing Assistant

BETWEEN: : (FOR LFMS USE)  
 : INFORMATION FROM LTS  
 : -----  
 :  
 License Fee Management Branch, ARM : Program Code: 02201  
 and : Status Code: 0  
 Regional Licensing Sections : Fee Category: 7C  
 : Exp. Date: 20091130  
 : Fee Comments:  
 : Decom Fin Assur Req'd: N  
 : ::

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED  
 Applicant/Licensee: INLAND CARDIOLOGY ASSOCIATES PS  
 Received Date: 20081020  
 Docket No: 3035234  
 Control No.: 472004  
 License No.: 11-27645-01  
 Action Type: Amendment

2. FEE ATTACHED  
 Amount: \_\_\_\_\_  
 Check No.:       /      

3. COMMENTS  
 Signed Colleen Murahan  
 Date 10-30-08

B. LICENSE FEE MANAGEMENT BRANCH (Check when milestone 03 is entered /\_/)

1. Fee Category and Amount: \_\_\_\_\_

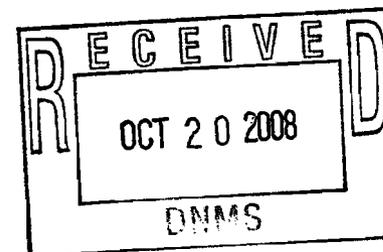
2. Correct Fee Paid. Application may be processed for:  
 Amendment \_\_\_\_\_  
 Renewal \_\_\_\_\_  
 License \_\_\_\_\_

3. OTHER \_\_\_\_\_

Signed \_\_\_\_\_  
 Date \_\_\_\_\_

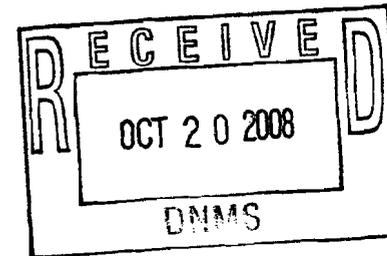
**Tressa Cook  
Inland Cardiology  
980 W Ironwood Dr. Ste 205  
Coeur D'Alene, ID 83814**

NOV 11 2008  
11:11 AM  
RECEIVED



**Roberto J. Torres  
Senior Health Physicist  
U.S. Nuclear Regulatory Commission, Region IV  
Division of Nuclear Materials Safety  
Nuclear Materials Safety, Branch B  
612 East Lamar Boulevard, Suite 400  
Arlington, Texas 76011-4125**

y  
Dr. Ste 205  
D 83814



**Roberto J. Torres**  
**Senior Health Physicist**  
**U.S. Nuclear Regulatory Commission, Region IV**  
**Division of Nuclear Materials Safety**  
**Nuclear Materials Safety, Branch B**  
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**Arlington, Texas 76011-4125**