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10/19/2010

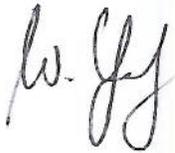
NOV 18 2010

DNMS

Dear Ms. Simmons,

I have agreed to apply as the interim RSO for the Frontier Cancer Centers NRC license 25-29392-01 and would like to do so with this email. I expect the length of the time I would be the RSO for Frontier Cancer Center to be limited to about 90-180 days maximum and only until their medical physics position has been filled. I was accepted by the State of Oregon - an agreement state - to be the RSO for license ORE-91060 and in a department with an identical PET program as Frontiers program. I am a board certified medical physicist at good standing. I am currently the Director of Medical Physics at the Oregon Health&Science University. I am attaching a transcript with my most recent CAMPEP approved Continuing Education Credits earned. I am also attaching the report showing geometry baseline, linearity baseline and accuracy baseline measurements performed at the Frontier Cancer Center. I hope you can accept my application with the information I have provided. I would also ask you to remove the IR-192 from the license for the time I would be the RSO. Frontier Cancer Center currently does not own an HDR device and no IR-192 sources should be shipped until they have a full-time in-house physicist.

Sincerely,



Wolfram Laub, PhD

*Reviewer: Request to change RSO needs to come from previous RSO or management.*

*→ JTO 12/22/10*

*No 574117*

**Baseline Audit Report and Summary**

**Frontier Cancer Center PET/CT**

**Billings, Montana**

**US-NRC License (25-29392-01)**

**September 13<sup>th</sup> and 14<sup>th</sup>, 2010**

**Brock R. Price  
Health Physics Consultant  
Sherwood, Oregon**

**Frontier Cancer Center  
Billings, Montana  
September 13th and 14<sup>th</sup>, 2010**

***Baseline Audit  
Summary Review  
Of Radioactive Materials Program.***

**Prepared by Brock R. Price  
Health Physics Consultant,  
Sherwood, Oregon**

This is a report of the baseline summary review, and the license activities of Frontier Cancer Center (US-NRC License -25-29392-01). The report is for the purpose of evaluating compliance with regulations, ALARA principles, and accepted standards of radiation protection and compliance of related policies and procedures. This audit report includes summary comments, and a continuing evaluation of the following:

1. Administrative Activities
2. As Low As Reasonably Achievable (ALARA) Program
3. Facilities, Equipment, Staffing
4. Posting and Labeling
5. Records and reports
6. Radiation Protection Procedures for positron emitting isotopes
7. Clinical Procedures
8. PET scanner Quality Control
9. Radiation Safety committee

The following is a current review for the Baseline quarter period with comments and or recommendations. The next report will be due in December, 2010.

**1. Administrative Activities**

The Radioactive Materials License # 25-29392-01 is current and operating under the original license application with an amendment pending for an interim and permanent replacement RSO. The current license is consistent with authorized use of radioactive materials used that are based upon license agreements with Kathleen A. Ryan, M.D; and Douglas R. Debenham, M.D. as Authorized users that provides professional interpretation services.

Frontier Cancer Center is responsible for the day to day technical, operational, and administration of this program. The following are notable to the activities of this audit.

- Danita Hagen, RT (R) (CT) and, Brianne Foos, RT (R) (CT) are the only authorized technologists to perform PET/CT unless amended and agreed to by Frontier Cancer Center and the designated RSO. The above listed technologists received additional specific technologist training from the manufacturer, The FDG supplier from the Huntsman Cyclotron facility in Salt Lake City, Utah, and Brock Price as consultant listed below.
- Received 32 hours onsite applications training from GE medical systems
- Received 2 days at the Huntsman Center in Salt Lake City to go over hot lab handling with Physicist and PET tech staff. Day 1 was all classroom sessions, day 2 observing patient procedures.
- Received PET Radiation safety in-service from Brock Price.
- Received comprehensive Cyclotron in-service on history, production, manufacturing and distribution from Brock Price.
- Baseline introduction to DOT Transportation of Hazardous Materials from Brock Price.
- Mandatory training in shipping and handling is required by the US Dept. of Transportation (US DOT) within the first 90 days of clinical operations. I have provided Frontier Cancer Center an on-line course through the University of New Mexico. You will need validation from this program that it is still meets the current USDOT requirements. A validation certificate of satisfactory completion must be available for inspection to the US-DOT, and or the US-NRC. Training is required every 3 years.

- All required routine and operational documents were provided to Frontier Cancer Center both in hard copy and electronically for their use, such as daily Dose Calibrator and well counter QC, shipping and receipt logs for doses and surveys, all daily requirements, Sample Policies and Procedures, PET/CT sample protocols, posting requirements etc. It is the responsibility of Frontier Cancer Center to have documents organized and readily available for audit or inspection.

## 2. ALARA

- A review of dosimetry reports for staff will be reviewed by the interim and or permanent RSO to verify that the occupational doses are within the scope of practice and ALARA. Individuals who might receive 10% of the annual dose limit are monitored. The PET/CT Technologists were instructed on the correct method of wearing finger dosimeters when handling radioactive materials. Badge monitoring reports should show that all employee whole body and hand doses are ALARA. This will be reported at the next audit due in December.
- Compliance with dose limits for individual members of the public is satisfactory. Surveys show that individuals in unrestricted areas do not exceed regulatory limits. Note the following: The molding room adjacent to the Hot Lab has no additional lead shielding in the wall, other than the 2 inch lead brick cave in the Hot Lab that faces the molding room. Since additional lead shielding was not recommended by the Physics construction consultant, I would recommend to be sure that whoever has access to the molding room should be monitored with a radiation badge. This space should not be converted to a routine 8 hr a day office space unless you perform a minimum 90 day environmental monitoring with at least (2) posted badges to verify the actual exposure rate.
- There were no findings of increased readings on initial area surveys.

## 3. Facilities, Equipment and Staffing

- Staffing is adequate for the scope of services provided.
- The Dose Calibrator and wipe counter are appropriate for the scope of the current program. The technical staff should work directly with the Capintec technical representative Kathy Thomas [kthomas@capintec.com](mailto:kthomas@capintec.com)

(201-825-9500 x402), or an alternate contact at [www.capintec.com](http://www.capintec.com) if there are questions or issues with the proper operation and compliance with the unit.

- A suitable radiation survey instrument is calibrated and available for use. A method for geometric constancy was determined for daily use. I will recommend that the instrument have a Cs-137 sealed “check” source for daily use and constancy checks. I will forward information from Ludlum Instruments for the purchase. The instrument is up to date for annual calibration.
- Baseline Dose Calibrator tests were performed for Geometry with F-18. Accuracy and Constancy with a NIST Cs-137 sealed vial source. The Linearity was performed with F-18. The Well counter efficiency and constancy was established with a sealed rod source. All results passed or are satisfactory and will be sent with this report.

#### 4. Posting and Labeling. Storage and Waste.

- The NRC Regulations 10CFR Part 19, “Notices, Instructions and Reports to Workers; Inspections and Investigations: was posted conspicuously in the Hot Lab.
- The staff are also aware that they are to read and be accountable to Title 10 CFR Part 20, “Standards for Protection Against Radiation,” and applicable regulations.
- Radioactive materials and areas are properly posted. Radioactive materials were properly labeled and safely stored.
- Records of waste properly reflect compliance of policies of waste “decayed in storage”, handling and the periodic disposal of properly decayed and depleted waste material (indistinguishable from background survey readings) sharps containers to standard bio-hazardous waste containers.

#### 5. Records and Reports

- Record keeping for material receipt and use is satisfactory.
- Patient dose logs show consistency in noting the facility name, authorized user, dose administered and technologist initials.

- Performance of wipe tests for shipping and area wipes was established and must reflect each day of use.
- Area surveys for facility restrooms are satisfactory. An area map is to be established with a PDF document that reflects the daily survey results.
- Sealed source inventories and leak tests are to be performed each quarter.
- Daily Dose Calibrator and well counter constancy checks were established to be performed.

#### **6. Radiation Protection Procedures**

- Policies and procedures are sound and active.
- An emergency spill kit is available.

#### **7. Clinical Procedures**

- Policy and Procedure Manuals incorporate accepted practice.
- Patient dose logs will be established using the shipping label indicate acceptable routine doses for PET imaging.
- Policies are to be in place for reporting misadministrations, emergencies and or recordable events.

#### **8. Compliance with Procedures, License, and Regulations**

- There appears to be adequate control of the radiation safety program with continuous process for improvements.
- Operations are conducted in accordance with license conditions, US-NRC Rules, and safe lab practices.
- Quantities of radioactive material are within license limitations.
- Security of radioactive materials and storage areas are satisfactory.
- No incidents of patient misidentification have occurred as of this report

## **9. PET Scanner Quality Control**

The PET/CT scanner manufacturer (GE) trained the PET/CT technologists to perform Quality Control and store auditable records to show that a daily dated quality control is performed with an automated analysis of the PET system compared to target thresholds. The scans are analyzed for acceptable variance. The acquired QC scans is calculated and documented. The analysis confirms that the detectors are Okay, or if service is required.

## **10. Radiation Safety Committee**

Updates regarding the Radiation Safety Committee will be reviewed in the next quarter audit. The quarterly audit may suffice but will need approval from the NRC.

## **Quality Management Program (QMP)**

This licensee is not required to have a QMP at this time.

## **Summary**

The review for the Baseline audit of the Radiation Protection program appears to be sound and active with adequate follow-up. Active processes and improvements should be continuous. There are no further recommendations to be made at this time. It was a pleasure to work with the administrative and technical staff, and expect compliance to remain sound as long as the established approved processes remain in place.

Regards,

Brock R. Price  
Health Physics Consultant  
Sherwood, Oregon

# The American Board of Radiology

Diagnostic Radiology      Radiation Oncology      Radiologic Physics

Robert R. Hattery, M.D., Executive Director



## The American Board of Radiology Letter of Equivalence in Radiologic Physics

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In  
**Wolfram Ulrich Laub, PhD**  
**Radiation Oncology Physics**  
Expires December 31, 2013

The American Board of Radiology hereby affirms that the above individual has pursued an accepted course of graduate study and clinical experience, has met the required standards and qualifications, and has passed the examinations conducted under the authority of The American Board of Medical Physics.

### Radiation Oncology

Beth A. Erickson, M.D.  
Milwaukee, Wisconsin  
Jay R. Harris, M.D.  
Boston, Massachusetts  
Richard T. Hoppe, M.D.  
Stanford, California  
Larry E. Kun, M.D.  
Memphis, Tennessee  
Steven A. Leibel, M.D.  
New York, New York  
H. Rodney Withers, M.D.  
Los Angeles, California

*R.R. Hattery*  
Robert R. Hattery, M.D.  
Executive Director  
The American Board of Radiology

*William R. Hendee*  
William R. Hendee, PhD  
President  
The American Board of Radiology

Date: December 18, 2003

### Radiologic Physics

William R. Hendee, Ph.D.  
Milwaukee, Wisconsin  
Bhudatt R. Paliwal, Ph.D.  
Madison, Wisconsin  
Stephen R. Thomas, Ph.D.  
Cincinnati, Ohio

SCHOOL OF MEDICINE

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Portland, OR 97239-3098  
P: 503-494-8756  
F: 503-346-0237  
[www.ohsu.edu/radmedicine](http://www.ohsu.edu/radmedicine)

October 19, 2010

Clinical Division

- **Charles R. Thomas, Jr., M.D.**  
Professor & Chair
- **Martin Fuss, M.D., Ph.D.**  
Professor & Vice-Chair  
Director of IGRT Program
- **John M. Holland, M.D., M.A.**  
Associate Professor  
Residency Program Director
- **Arthur Y. Hung, M.D.**  
Assistant Professor  
Director, Medical Student Clerkship Program
- **Charlotte D. Kubicky, M.D., PhD**  
Assistant Professor  
Medical Director, Tuality OHSU Cancer Center
- **Carol M. Marquez, M.D.**  
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- **Samuel J. Wang, M.D., PhD**  
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Radiation Physics Division

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Assistant Professor  
Associate Director, Medical Physics
- **Richard Crilly, PhD**  
Assistant Professor
- **Tongming (Tony) He, Ph.D.**  
Assistant Professor
- **Brandon Merz, M.S.**  
Instructor
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- **James Tanyi, PhD**  
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Administration Division

- **Tricia Thompson**  
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Off-Campus Facilities

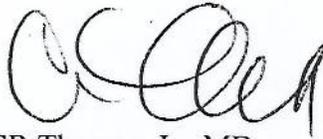
- **Tuality OHSU Cancer Center**  
299 S.E. 9th Street  
Hillsboro, OR 97123  
P: 503-681-4200  
F: 503-681-4210  
[www.tuality-ohsu-cancercenter.org](http://www.tuality-ohsu-cancercenter.org)
- **Pacific Oncology, PC  
Cancer Center**  
15700 SW Greystone Ct.  
Beaverton, OR 97006  
P: 503-203-1000  
F: 503-203-1010  
[www.pacificoncology.org](http://www.pacificoncology.org)

To Whom It May Concern:

I am writing this letter on behalf of Dr. Wolfram Laub to attest to his good professional standing. Dr. Laub currently works in the Department of Radiation Medicine at Oregon Health & Science University in Portland, Oregon as the Associate Director of Medical Physicist and has so since July, 2008. Prior to that, he spent two years at Pacific Oncology, a freestanding Radiation Oncology Center in Beaverton, Oregon, where he was the responsible medical physicist and RSO (ORE-91060) for the PET/CT and radiation oncology program.

Should you have any questions, please contact me at (503) 494-8758.

Sincerely,



CR Thomas, Jr., MD  
Professor & Chair  
Department of Radiation Medicine  
OHSU Knight Cancer Institute

**CAMPEP**  
**Commission on Accreditation of Medical Physics Education Programs, Inc.**  
**Certificate of Medical Physics Continuing Education Credits**  
**----Unofficial Transcript----**

**Wolfram Laub**

US

Participated in the following CAMPEP accredited educational program(s) and is awarded Medical Physics Continuing Education Credits (MPCECs) as designated

<u>Program Title</u>	<u>Date Credits Earned</u>	<u>Category/SubCategory</u>	<u>EA Title</u>	<u>Credits</u>
52nd Annual Meeting SAMs	07/19/2010	Radiotherapy:None	Accelerated Partial Breast Irradiation	1.5
52nd Annual Meeting SAMs	07/20/2010	Radiotherapy:None	Data Flow and Management in Radiation Therapy	1.5
52nd Annual Meeting SAMs	07/21/2010	Radiotherapy:None	Linac Beam Calibration and Commissioning	1.5
52nd Annual Meeting SAMs	07/18/2010	Radiotherapy:Stereotactic	VMAT Overview and Applications to Stereotactic Radiosurgery	1.5
AAPM 51st Annual Meeting SAMs	07/28/2009	Radiotherapy:Dosimetry	CE - Therapy: Dose Calculation Algorithms in 3D-CRT and IMRT	1.92
AAPM 51st Annual Meeting SAMs	07/30/2009	Radiotherapy:Brachytherapy	HDR and LDR Brachytherapy: Everything You Need to Know	1.92
AAPM 51st Annual Meeting SAMs	07/29/2009	Radiotherapy:Image-guided	Image Processing in Radiation Therapy: A Play in three Acts	1.92
AAPM 51st Annual Meeting SAMs	07/27/2009	Radiotherapy:None	Particle Therapy: Issues and Considerations	1.92
AAPM 52nd Annual Meeting	07/21/2010	Radiotherapy:Image-guided	Adaptive Radiotherapy	1
AAPM 52nd Annual Meeting	07/18/2010	General Medical Physics:Education	Education Council Symposium	1.5
AAPM 52nd Annual Meeting	07/20/2010	Radiotherapy:Stereotactic	Educational Course - Therapy Physics and	1.92

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			Dosimetry of SBRT	
AAPM 52nd Annual Meeting	07/20/2010	Radiotherapy:Stereotactic	Establishing an SBRT Program	1.83
AAPM 52nd Annual Meeting	07/18/2010	None:None	General Poster Viewing	7
AAPM 52nd Annual Meeting	07/19/2010	Radiotherapy:Intensity-modulated Radiotherapy	IMRT Optimization	1.83
AAPM 52nd Annual Meeting	07/20/2010	Radiotherapy:Dosimetry	IMRT QA	1.5
AAPM 52nd Annual Meeting	07/18/2010	None:None	John R Cameron: Young Investigators Symposium	2
AAPM 52nd Annual Meeting	07/18/2010	Radiotherapy:None	Moderated Poster - IMRT Novel Planning and Delivery Techniques: Optimization	0.75
AAPM 52nd Annual Meeting	07/18/2010	Radiotherapy:Intensity-modulated Radiotherapy	Moderated Poster - IMRT QA I: Commercial QA Devices	0.75
AAPM 52nd Annual Meeting	07/19/2010	Radiotherapy:None	Monte Carlo Clinical Applications	1.5
AAPM 52nd Annual Meeting	07/21/2010	Radiotherapy:None	Particle Therapy	1
AAPM 52nd Annual Meeting	07/21/2010	General Medical Physics:None	PQI	1.83
AAPM 52nd Annual Meeting	07/19/2010	General Medical Physics:Professional	Presidents Symposium - Diagnosis and Treatment, the Patients Perspective	2
Safety In Radiation Therapy - A Call to Action	06/25/2010	Radiotherapy:Radiation Protection	Accreditation, Regulation and Event Reporting	1.5
Safety In Radiation Therapy - A Call to Action	06/25/2010	Radiotherapy:None	Complex Systems and the Human Interface	1
Safety In Radiation Therapy - A Call to Action	06/24/2010	Radiotherapy:None	Education, Experience and the Maintenance of Competence: What is Needed	1
Safety In Radiation Therapy - A Call to Action	06/24/2010	Radiotherapy:Radiation Protection	Errors in Radiation Treatment: The Perspective of	0.75

			Regulators	
Safety In Radiation Therapy - A Call to Action	06/24/2010	Radiotherapy:Radiation Protection	Errors in Radiation Treatment: The Perspectives of Manufacturers	0.75
Safety In Radiation Therapy - A Call to Action	06/25/2010	Radiotherapy:None	Panel Discussion: Safety in Delivering Radiation Treatments: Manufacturers Actions	1
Safety In Radiation Therapy - A Call to Action	06/24/2010	Radiotherapy:None	Panel Discussion: What Are We Doing to Address Patient Safety	1.5
Safety In Radiation Therapy - A Call to Action	06/24/2010	Radiotherapy:None	The Complexity of Radiation Treatment	0.5
Safety In Radiation Therapy - A Call to Action	06/24/2010	Radiotherapy:None	The Culture of Patient Safety	1
Safety In Radiation Therapy - A Call to Action	06/24/2010	Radiotherapy:None	The Function of the Radiation Team	1.25
Safety In Radiation Therapy - A Call to Action	06/24/2010	Radiotherapy:None	What Can Go Wrong in Radiation Treatment	0.75
Safety In Radiation Therapy - A Call to Action	06/25/2010	Radiotherapy:None	What Have We Learned at this Meeting What to Do Next	0.5
			Total Released Credits:	51.59

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**RADIATION SAFETY OFFICER TRAINING AND EXPERIENCE  
AND PRECEPTOR ATTESTATION  
[10 CFR 35.50]**

APPROVED BY OMB: NO. 3150-0120  
EXPIRES: 3/31/2012

Name of Proposed Radiation Safety Officer

Wolfram Laub, PhD

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:**

**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		
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.)+ _____ _____ _____		

+ 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	License/Permit Number listing supervising individual as a Radiation Safety Officer
This license authorizes the following medical uses: <input type="checkbox"/> 35.100 <input 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		
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 <i>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.)</i>	License/Permit Number listing supervising individual
License/Permit lists supervising individual as:	
<input type="checkbox"/> Radiation Safety Officer <input type="checkbox"/> Authorized User <input type="checkbox"/> Authorized Nuclear Pharmacist <input type="checkbox"/> Authorized Medical Physicist	
Authorized as RSO, AU, ANP, or AMP for the following medical uses:	
<input type="checkbox"/> 35.100 <input 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 ( _____ )	

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. ORE-91060
- 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 \_\_\_\_\_ 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 \_\_\_\_\_ 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 \_\_\_\_\_ 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 \_\_\_\_\_  
Name of Facility

License/Permit Number: \_\_\_\_\_

Name of Preceptor	Signature	Telephone Number	Date
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6 574117

BETWEEN:

Accounts Receivable/Payable  
and  
Regional Licensing Branches

[ FOR ARPB USE ]  
INFORMATION FROM LTS

Program Code: 02230  
Status Code: Pending Amendment  
Fee Category: 7C  
Exp. Date:  
Fee Comments:  
Decom Fin Assur Reqd:

### License Fee Worksheet - License Fee Transmittal

#### A. REGION

##### 1. APPLICATION ATTACHED

Applicant/Licensee: FRONTIER CANCER CENTERS AND BLOOD INSTITUTE  
Received Date: 12/17/2010  
Docket Number: 3038298  
Mail Control Number: 574117  
License Number: 25-29392-01  
Action Type: Notifications

##### 2. FEE ATTACHED

Amount: \_\_\_\_\_

Check No.: \_\_\_\_\_

##### 3. COMMENTS

Signed: Colleen Murnahan

Date: 12-17-2010

#### 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: \_\_\_\_\_