



DEPARTMENT OF THE ARMY
HEADQUARTERS, TRIPLER ARMY MEDICAL CENTER
1 JARRETT WHITE ROAD
HONOLULU HI 96859-5000

21 March 2011

REPLY TO
ATTENTION OF

MCHK-PVR

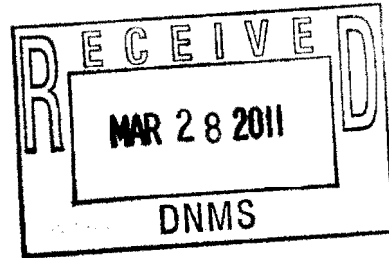
US Nuclear Regulatory Commission, Region 4
612 E. Lamar Blvd., Suite 400
Attention: NMSB-1
Arlington, TX 76011-412

Dear Ms Michelle Simmons,

Docket No.: 030-03537

License No.: 53-00458-04

Mail Control No.: 573912



Please attach the enclosed the NRC Form 313A (RSO) (Enclosure) as a supplement to the one submitted for myself in Tripler Army Medical Center's (TAMC) recent NRC License amendment request. I received training on radiation safety, regulatory issues, and emergencies, applicable to 10 CFR 35.600 – remote afterloader uses, during the week of 14 March 2011, under the direction of Mark W. Bower, CHP, Ph.D. (RSO) at Brooke Army Medical Center. This allows TAMC to meet the training requirements for 10 CFR 35.50 for use as stated in 10 CFR 35.600 (remote afterloader uses).

Varian Medical Systems qualified representatives will provide vendor specific training (device operation, safety and emergency procedures) for the RSO(s), Authorized Medical Physicist, and Authorized User(s) prior to beginning medical use of the remote afterloaders per 10 CFR 35.600. Verification of this vendor specific training will be sent to you upon completion.

If you have any questions concerning this letter please contact Mr. Lou N. Shimabuku at (808) 433-2335 or facsimile at (808) 433-2440 or by e-mail at Lou.Shimabuku@amedd.army.mil

Lou N. Shimabuku, CHP
Health Physicist
RSO, Tripler Army Medical Center

Encl
CF:
TAMC Radiation Safety Committee

5 7 4 8 1 0

**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

Lou Shimabuku, CHP

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 COL Mark W. Bower, CHP, PhD	License/Permit Number listing supervising individual as a Radiation Safety Officer 42-01368-01
This license authorizes the following medical uses:	
<input checked="" type="checkbox"/> 35.100	<input checked="" type="checkbox"/> 35.200
<input type="checkbox"/> 35.500	<input checked="" type="checkbox"/> 35.600 (remote afterloader)
<input type="checkbox"/> 35.600 (gamma stereotactic radiosurgery)	<input checked="" type="checkbox"/> 35.300
	<input checked="" type="checkbox"/> 35.400
	<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		
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	Brooke Army Medical Center - Health Physics and Radiation Oncology staff, directed by COL Mark W. Bower	14-16 Mar 2011
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)

<p>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></p> <p>COL Mark W. Bower, CHP, PhD</p>	<p>License/Permit Number listing supervising individual</p> <p style="text-align: center;">42-01368-01</p>
<p>License/Permit lists supervising individual as:</p> <p><input checked="" type="checkbox"/> Radiation Safety Officer <input type="checkbox"/> Authorized User <input type="checkbox"/> Authorized Nuclear Pharmacist</p> <p><input type="checkbox"/> Authorized Medical Physicist</p> <p>Authorized as RSO, AU, ANP, or AMP for the following medical uses:</p> <p><input checked="" type="checkbox"/> 35.100 <input checked="" type="checkbox"/> 35.200 <input checked="" type="checkbox"/> 35.300 <input checked="" type="checkbox"/> 35.400</p> <p><input type="checkbox"/> 35.500 <input checked="" type="checkbox"/> 35.600 (remote afterloader) <input type="checkbox"/> 35.600 (teletherapy)</p> <p><input type="checkbox"/> 35.600 (gamma stereotactic radiosurgery) <input type="checkbox"/> 35.1000 (_____)</p>	

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 Lou Shimabuku, CHP, MS 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 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 Lou Shimabuku, CHP, MS 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

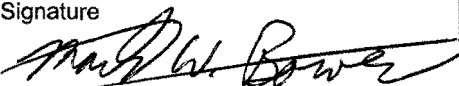
**Third Section
Complete for ALL**

I attest that Lou Shimabuku, CHP, MS 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 Brooke Amry Medical Center
Name of Facility

License/Permit Number: 42-01368-01

Name of Preceptor	Signature	Telephone Number	Date
COL Mark W. Bower, CHP, PhD		(210) 295-2411	03/16/2011

APR - 5 2011

DATE

This is to acknowledge the receipt of your letter/application dated 3/21/11, and to inform you that the initial processing, which includes an administrative review, has been performed.

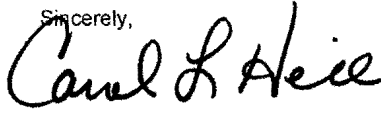
- There were no administrative omissions. Your application will be assigned to a technical reviewer. Please note that the technical review may identify other omissions or require additional information.
- Please provide to this office within 30 days of your receipt of this card:

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** 574810.
When calling to inquire about this action, please refer to this mail control number.
You may call me at (817) 860-8103.

Sincerely,



Licensing Assistant

BETWEEN:

Accounts Receivable/Payable
and
Regional Licensing Branches

[FOR ARPB USE]
INFORMATION FROM LTS

Program Code: 02110
Status Code: Pending Amendment
Fee Category: 7B 7C
Exp. Date:
Fee Comments:
Decom Fin Assur Req: Y

License Fee Worksheet - License Fee Transmittal

A. REGION

1. APPLICATION ATTACHED

Applicant/Licensee: ARMY, DEPARTMENT OF THE
Received Date: 03/28/2011
Docket Number: 3003537
Mail Control Number: 574810
License Number: 53-00458-04
Action Type: Amendment

2. FEE ATTACHED

Amount: _____

Check No.: _____

3. COMMENTS

Signed: _____

Carol L. Heic

Date: _____

4/1/11

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: _____

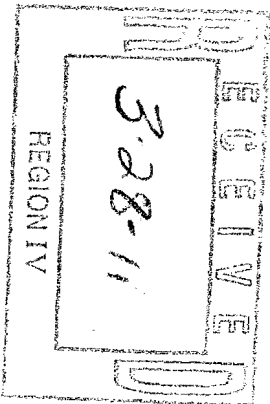
License: _____

3. OTHER _____

Signed: _____

Date: _____

DEPARTMENT OF THE ARMY
ATTN: MCHK-PVR ROOM 3A351
CDR TAMC
1 JARRETT WHITE ROAD
TRIPLER AMC, HI 96859-5000
Official Business



US Nuclear Regulatory Commission, Region 4
612 E. Lamar Blvd., Suite 400
Attention: NMSB-1 (Ms. Michelle Simmons)
Arlington, TX 76011-412