

June 22nd, 2011

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

Dear Sir or Madam:

We are requesting an amendment to NRC Materials License 13-03284-02 for Reid Hospital & Health Care Services.

Please add Shiv P. Srivastava as Radiation Safety Officer.

NRC Form 313A (RSO) is attached.

The Radiation Safety Officer/ Executive Management Letter of Understanding is attached.

Please delete Charles S. Narayanan as Radiation Safety Officer.

Please delete Charles S. Narayanan as Authorized Medical Physicist.

If there are any questions concerning this, please contact

Eugene DiTullio, Director of Radiology Services, Phone: 765-983-3166

Sincerely,

Eugene DiTullio
Eugene DiTullio

Director of Radiology Services



Radiation Safety Officer/ Executive Management Letter of Understanding

Shiv P. Srivastava is appointed as the Radiation Safety Officer for Reid Hospital & Health Care Services, effective June 24th, 2011, and is responsible for insuring the safe use of radiation.

The Radiation Safety Officer is responsible for managing the radiation safety program and insuring that radiation safety activities are being performed in accordance with our own approved procedures and policies and in accordance with all regulatory requirements.

The Radiation Safety Officer is responsible for identifying radiation safety problems; initiating, recommending, and providing corrective action; verifying implementation of corrective action; and insuring compliance with regulations.

The Radiation Safety Officer is also responsible for assisting the Radiation Safety Committee in the performance of its duties.

Shiv P. Srivastava, as Reid's Radiation Safety Officer, is hereby delegated the authority necessary to meet the responsibilities and duties of Radiation Safety Officer.

Craig Kinyon

President/Chief Executive Officer

6.20.1)

Date

NRC FORM 313A (RSO) (3-2009)	U.S. NUCLEAR REGULATORY COMM	ISSION		
RADIATION SAFETY OFF AND PRECE	ICER TRAINING AND EXPERIENC PTOR ATTESTATION CFR 35.50]		APPROVED B' EXPIRES: 3/3	/ OMB: NO. 3150-0120 1/2012
Name of Proposed Radiation Safety Office	Г	-		
Shiv P. Srivastava				
Requested Authorization(s) The license	e authorizes the following medical uses (che	ck all th	at apply):	
√ 35.100 √ 35.200 √ 3	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)			
application or the individual must have	ard certification, must have been obtained wo obtained related continuing education and education and education of continuing education of continuing education of continuing education.	experien	ce since the	required training
1. Board Certification				
a. Provide a copy of the board ce				
 b. Use Table 3.c. to describe train all types of medical use on the 	ning in radiation safety, regulatory issues, ar license.	nd emer	gency proce	dures for
c. Skip to and complete Part II Pi	eceptor Attestation.			
	OR	_		
2. Current Radiation Safety Offic Officer for the Additional Med	cer Seeking Authorization to Be Recognizical Uses Checked Above	<u>ed as a</u>	Radiation	<u>Safety</u>
 Use the table in section 3.c. procedures for the additional 	to describe training in radiation safety, regulatypes of medical use for which recognition a	atory iss as RSO	ues, and em is sought.	ergency
b. Skip to and complete Part II Preceptor Attestation.				
	OR	_		
a. Classroom and Laboratory T	am for Proposed Radiation Safety Office			
Description of Training	Location of Training		Clock	Dates of
Radiation physics and instrumentation	Location of Training		Hours	Training*
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).

3.	Structured Educational Program for Proposed Ra	diation Safety Officer (continued)		
b. Supervised Radiation Safety Experience (continued)		ued)		
	(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:			
	35.100 35.200 35.300	35.400		
	35.500 35.600 (remote afterloader)	35.600 (teletherapy)		
	35.600 (gamma stereotactic radiosurgery)	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	Patrick Byrne	6-22-2011
Radiation safety, regulatory issues, and emergency procedures for 35.300 uses	Patrick Byrne	6-22-2011
Radiation safety, regulatory issues, and emergency procedures for 35.400 uses	Patrick Byrne	6-22-2011
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	Patrick Byrne	6-22-2011
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):		

(3-200	FORM 313A (RSO) P) RADIATION SAFETY OFFICER TRAINING AND EXPER	u.s. Nuclear regulatory commission IENCE AND PRECEPTOR ATTESTATION (continued)			
	Structured Educational Program for Proposed Radial				
	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.)				
	Patrick Byrne	13-02650-02			
	License/Permit lists supervising individual as:				
	Radiation Safety Officer Authorized Use Authorized Medical Physicist	Authorized Nuclear Pharmacist			
	Authorized as RSO, AU, ANP, or AMP for the following	ng 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				
✓ '	the licensee's license	r Authorized Nuclear Pharmacist identified on			
	a. Provide license number. 13-03284-02				
	 Use the table in section 3.c. to describe training in procedures for all types of medical use on the lice 				
	c. Skip to and complete Part II Preceptor Attestation.				
	PART II – PRECEPT	OR ATTESTATION			
Note	e: This part must be completed by the individual's prece individual as long as the preceptor provides, directs, one preceptor is necessary to document experience,	ptor. The preceptor does not have to be the supervising or verifies training and experience required. If more than obtain a separate preceptor statement from each.			
	et Section eck one of the following:				
	1. Board Certification				
	I attest that Name of Proposed Radiation Safety Officer	nas satisfactorily completed the requirements in			
	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).			
	OF				
	2. Structured Educational Program for Proposed Rad				
-	I attest that	nas satisfactorily completed a structural educational			
	Name of Proposed Radiation Safety Officer program consisting of both 200 hours of classroom a radiation safety experience as required by 10 CFR 35	nd laboratory training and one year of full-time			
	OF				

NRC FORM 313A (R (3-2009) RADIATION S	•	U.S. NUCLEAR REGULATORY COMMISSION G AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)
Preceptor Attesta		(
First Section (co Check one of the		
✓ 3. Addition	nal Authorization as Radiati	ion Safety Officer
✓ I attest th	at Shiv P. Srivastava	is an
	Name of Proposed Radiation	Safety Officer
Au	uthorized User	Authorized Nuclear Pharmacist
√ Au	thorized Medical Physicist	
aspec		and has experience with the radiation safety product material for which the individual has ilities
		AND
Second Section Complete for all	(check all that apply):	
✓ I attest that	Shiv P. Srivastava	has training in the radiation safety, regulatory issues, and
emergency p	Name of ProposedRadiation Safe rocedures for the following ty	•
√ 35.100		
√ 35.200		
√ 35.300	oral administration of less which a written directive i	s than or equal to 33 millicuries of sodium iodide I-131, for is required
√ 35.300	oral administration of gre-	ater than 33 millicuries of sodium iodide I-131
√ 35.300		of any beta-emitter, or a photon-emitting radionuclide with n 150 keV for which a written directive is required
35.300	parenteral administration required	of any other radionuclide for which a written directive is
√ 35.400		
35.500		
√ 35.600	remote afterloader units	
35.600	teletherapy units	
35.600	gamma stereotactic radio	osurgery units
35.1000	emerging technologies, in	ncluding:

RADIATION SAFETY OFFICER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued) AND Third Section Complete for ALL I attest that Shiv P. Srivastava 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	NRC FORM 313A (RS	iO)	U.S. NUCLEAR REGULATORY COMMISSIO
Third Section Complete for ALL I attest that Shiv P. Srivastava 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 Saint Joseph Regional Medical Center Name of Facility		AFETY OFFICER T	RAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)
I attest that Shiv P. Srivastava 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 Saint Joseph Regional Medical Center Name of Facility			AND
I attest that Shiv P. Srivastava has achieved a level of radiation safety knowledge Shiv P. Srivastava has achieved a level of radiation safety knowledge 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 Saint Joseph Regional Medical Center Name of Facility			
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 Saint Joseph Regional Medical Center Name of Facility	Complete for AL	L	
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 Saint Joseph Regional Medical Center Name of Facility	✓ I attest that		· · · · · · · · · · · · · · · · · · ·
Fourth Section Complete the following for Preceptor Attestation and signature I am the Radiation Safety Officer for Saint Joseph Regional Medical Center Name of Facility			
I am the Radiation Safety Officer for Saint Joseph Regional Medical Center Name of Facility	sufficient to f	unction independent	tly as a Radiation Safety Officer for a medical use licensee.
Complete the following for Preceptor Attestation and signature I am the Radiation Safety Officer for Saint Joseph Regional Medical Center Name of Facility			
Name of Facility			
Complete the following for Preceptor Attestation and signature I am the Radiation Safety Officer for Saint Joseph Regional Medical Center Name of Facility	Fourth Section		
Name of Facility		lowing for Precept	or Attestation and signature
Name of Facility	I am the Radiati	on Safety Officer for	. Saint Joseph Regional Medical Center
License/Permit Number: 13-02650-02	I am ore rame	Uli Galety Cinco	
	License/Permit Nu	umber: 13-02650-02	

Name of Preceptor

Patrick Byrne

Signature

Telephone Number

Date

(877) 317-5811

06/22/2011

Eugene DiTullio Director of Radiology Services Reid Hospital & Health Care Services 1100 Reid Parkway Richmond, Indiana 47374





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