

**From:** [Nate Johnson](#)  
**To:** [O'Dowd, Dennis](#)  
**Subject:** Supporting Documents  
**Date:** Tuesday, August 21, 2012 9:22:03 PM  
**Attachments:** [ABR\\_Johnson.jpg](#)  
[N Johnson MD AUT.pdf](#)

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Dennis,

Here is the documents that were requested for number 57788. These may have already been submitted to you by other parties but I wanted to make sure they get to you. Enclosed is the AUT form with the requested boxes filled out and resubmission of my ABR certificate for the 3rd time. This version is clearly legible and I do not want to send it via fax again since it did not work twice and is likely an issue on that end. Also the RSO from University of Rochester said he had already resubmitted the letter to the NRC with the line stating that the head of nuclear medicine at my residency is authorized in 35.1, 2 and 3 as requested. Please let me know that it has been received. Thanks again for your help with this..

Nate Johnson

# The American Board of Radiology

*Organized through the cooperation of the  
American College of Radiology, the American Roentgen Ray Society,  
the American Radium Society, the Radiological Society of North America,  
the Section on Radiology of the American Medical Association,  
the American Society for Radiation Oncology, the Association of  
University Radiologists, and the American Association of Physicists in Medicine*  
Henceby certifies that

**Nathan Samuel Johnson, MD**

*Has pursued an accepted course of graduate study and clinical work; has met certain standards  
and qualifications, including passing the examinations conducted under the authority of  
The American Board of Radiology, demonstrating to the satisfaction of the Board qualification  
to practice, and is therefore awarded the Board's certification in the specialty of*

**Diagnostic Radiology**

AB Eligible

DABR

*July 01, 2011*

*This diplomate of the American Board of Radiology  
is now permitted to use the DABR mark to signify this certification.*



Certificate No. 59578

*Eric J. Harris*  
President

*Richard T. Monin*  
Secretary-Treasurer

*Hayden B. Berman*  
Executive Director

Valid through 2021

## AUTHORIZED USER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)

## 3. Training and Experience for Proposed Authorized User (continued)

## c. Supervised Clinical Case Experience (continued)

Supervising Individual

VASEEM CHANBARI

License/Permit Number listing supervising individual as an authorized user

URMC LICENCE

Supervising individual meets the requirements below, or equivalent Agreement State requirements (check all that apply):

- ☒ 35.390 With experience administering dosages of:
- ☒ 35.392 ☒ Oral NaI-131 requiring a written directive in quantities less than or equal to 1.22 gigabecquerels (33 millicuries)
- ☒ 35.394 ☒ Oral NaI-131 in quantities greater than 1.22 gigabecquerels (33 millicuries)
- ☒ 35.396 ☒ Parenteral administration of beta-emitter, or photon-emitting radionuclide with a photon energy less than 150 keV requiring a written directive is required
- ☒ Parenteral administration of any other radionuclide requiring a written directive

\*\* Supervising Authorized User must have experience in administering dosages in the same dosage category or categories as the individual requesting authorized user status.

## d. Provide completed 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.

By checking the boxes below, the preceptor is attesting that the individual has knowledge to fulfill the duties of the position sought and not attesting to the individual's "general clinical competency."

## First Section

Check one of the following for each requested authorization:

For 35.390:Board Certification

☒ I attest that NATE JOHNSON has satisfactorily completed the training and experience

Name of Proposed Authorized User

requirements in 35.390(a)(1).

OR

Training and Experience

I attest that \_\_\_\_\_ has satisfactorily completed the 700 hours of training

Name of Proposed Authorized User

and experience, including a minimum of 200 hours of classroom and laboratory training, as required by 10 CFR 35.390 (b)(1).

## AUTHORIZED USER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)

## 3. Training and Experience for Proposed Authorized User (continued)

## b. Supervised Work Experience (continued)

Supervising Individual <b>VASEEM QADIRAZI</b>	License/Permit Number listing supervising individual as an authorized user <b>URMC LICENSE</b>
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Supervising individual meets the requirements below, or equivalent Agreement State requirements (check all that apply)\*\*:

<input checked="" type="checkbox"/> 35.390	With experience administering dosages of:
<input checked="" type="checkbox"/> 35.392	<input checked="" type="checkbox"/> Oral NaI-131 requiring a written directive in quantities less than or equal to 1.22 gigabecquerels (33 millicuries)
<input checked="" type="checkbox"/> 35.394	<input checked="" type="checkbox"/> Oral NaI-131 in quantities greater than 1.22 gigabecquerels (33 millicuries)
<input checked="" type="checkbox"/> 35.396	<input checked="" type="checkbox"/> Parenteral administration of beta-emitter, or photon-emitting radionuclide with a photon energy less than 150 keV requiring a written directive is required
	<input checked="" type="checkbox"/> Parenteral administration of any other radionuclide requiring a written directive

\*\* Supervising Authorized User must have experience in administering dosages in the same dosage category or categories as the individual requesting authorized user status.

## c. Supervised Clinical Case Experience

If more than one supervising individual is necessary to document supervised work experience, provide multiple copies of this page.

Description of Experience	Number of Cases Involving Personal Participation	Location of Experience/License or Permit Number of Facility	Dates of Experience*
Oral administration of sodium iodide I-131 requiring a written directive in quantities less than or equal to 1.22 gigabecquerels (33 millicuries)	> TEN	URMC MEDICAL CENTER	NUCLEAR MEDICINE ROTATIONS
Oral administration of sodium iodide I-131 requiring a written directive in quantities greater than 1.22 gigabecquerels (33 millicuries)	> THREE	URMC MEDICAL CENTER	DURING RESIDENCY FROM
Parenteral administration of any beta-emitter, or photon-emitting radionuclide with a photon energy less than 150 keV for which a written directive is required	> FIFTY	URMC MEDICAL CENTER	2007 to 2011
Parenteral administration of any other radionuclide for which a written directive is required <sup>99m</sup> Tc, I-123 (List radionuclides)	> FIFTY	URMC MEDICAL CENTER	@ URMC