



THE QUEEN'S MEDICAL CENTER

1301 Punchbowl Street ▪ Honolulu, Hawaii 96813 ▪ Phone (808) 538-9011 ▪ FAX: (808) 547-4646

May 9, 2013

Nuclear Materials Licensing Branch
USNRC Region IV
1600 E. Lamar Blvd
Arlington, TX 76011-4511

Docket: 030-38265
License: 53-16533-04MD



RE: Amendment Request to add new Authorized Nuclear Pharmacist (ANP)

Greetings:

Please amend The Queen's Medical Center PET Radiopharmacy materials license to add **Maryanne Wong, Pharm.D.** as an Authorized Nuclear Pharmacist. Form 313A(ANP) is enclosed for Maryanne Wong's documented training and experience and the preceptor's attestation.

Please contact the RSO, Brian Oyadomari, at (808) 691-4884 or email at boyado@queens.org if any additional information is needed. Thank you.

Sincerely,

Darlena Chadwick
Vice President, Patient Care

PUBLIC

- Immediate Release
 Normal Release

NON-PUBLIC

- A.3 Sensitive-Security Related
 A.7 Sensitive Internal
 Other:

Reviewer: JAC Date: 6/4/13

Attached:

1. Form 313A for Maryanne Wong, Pharm.D.
2. Purdue University Nuclear Pharmacy certification for Maryanne Wong
3. State of Hawaii Pharmacist License for Maryanne Wong

580726

**AUTHORIZED NUCLEAR PHARMACIST TRAINING AND
EXPERIENCE AND PRECEPTOR ATTESTATION
[10 CFR 35.55]**

APPROVED BY OMB: NO. 3160-0120
EXPIRES: (05/31/2015)

Name of Proposed Authorized Nuclear Pharmacist

Maryanne L Wong

State or Territory Where Licensed

Hawaii

PART I -- TRAINING AND EXPERIENCE
(Select one of the two 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 nuclear pharmacy uses.

1. **Board Certification**

- a. Provide a copy of the board certification.
- b. Skip to and complete Part II Preceptor Attestation.

2. **Structured Educational Program for Proposed Authorized Nuclear Pharmacist**

- a. Classroom and Laboratory Training.

Description of Training	Location of Training	Clock Hours	Dates of Training*
Radiation physics and instrumentation	DVD Workbook	51	March 2011 - December 2012 August 2011
	On-Site Purdue University Nuclear Pharmacy Program	34 total: 85	
Radiation protection	DVD Workbook	33	March 2011 - December 2012 August 2011
	On-Site Purdue University Nuclear Pharmacy Program	13 total: 46	
Mathematics pertaining to the use and measurement of radioactivity	DVD Workbook	13	March 2011 - December 2012 August 2011
	On-Site Purdue University Nuclear Pharmacy Program	10 total:23	
Chemistry of byproduct material for medical use	DVD Workbook	32	March 2011 - December 2012 August 2011
	On-Site Purdue University Nuclear Pharmacy Program	8 total:40	
Radiation biology	DVD Workbook	21	March 2011 - December 2012 August 2011
	On-Site Purdue University Nuclear Pharmacy Program	0 total:21	

Total Hours of Training: 215

**AUTHORIZED NUCLEAR PHARMACIST TRAINING AND EXPERIENCE
AND PRECEPTOR ATTESTATION (continued)**

2. Structured Educational Program for Proposed Authorized Nuclear Pharmacist (continued)

b. Supervised Practical Experience in a Nuclear Pharmacy.

Description of Experience	Location of Experience/License or Permit Number of Facility	Clock Hours	Dates of Experience*
Shipping, receiving, and performing related radiation surveys	PharmaRx Hawaii, LLC 98-021 Kamehameha Hwy #319 Aiea, HI 96701 53-29217-01 MD	100	July 2011 to April 2013
Using and performing checks for proper operation of instruments used to determine the activity of dosages, survey meters, and, if appropriate, instruments used to measure alpha- or beta-emitting radionuclides	PharmaRx Hawaii, LLC 98-021 Kamehameha Hwy #319 Aiea, HI 96701 53-29217-01 MD	50	July 2011 to April 2013
Calculating, assaying, and safely preparing dosages for patients or human research subjects	PharmaRx Hawaii, LLC 98-021 Kamehameha Hwy #319 Aiea, HI 96701 53-29217-01 MD	200	July 2011 to April 2013
Using administrative controls to avoid medical events in administration of byproduct material	PharmaRx Hawaii, LLC 98-021 Kamehameha Hwy #319 Aiea, HI 96701 53-29217-01 MD	200	July 2011 to April 2013
Using procedures to prevent or minimize radioactive contamination and using proper decontamination procedures	PharmaRx Hawaii, LLC 98-021 Kamehameha Hwy #319 Aiea, HI 96701 53-29217-01 MD	200	July 2011 to April 2013
Total Hours of Experience:		500	
Supervising Individual			
Blaine Ikeda			

c. Go to and complete Part II Preceptor Attestation.

AUTHORIZED NUCLEAR PHARMACIST TRAINING AND EXPERIENCE
AND PRECEPTOR ATTESTATION (continued)

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:

Board Certification

I attest that _____ has satisfactorily completed the requirements in
Name of Proposed Authorized Nuclear Pharmacist

10 CFR 35.55(a)(1), (a)(2), and (a)(3) and has achieved a level of competency sufficient to function independently as an authorized nuclear pharmacist.

OR

Structured Educational Program

I attest that Maryanne L Wong has satisfactorily completed a 700-hour structured
Name of Proposed Authorized Nuclear Pharmacist

educational program consisting of both 200 hours of classroom and laboratory training, and practical experience in nuclear pharmacy, as required by 10 CFR 35.66(b)(1) and has achieved a level of competency sufficient to function independently as an authorized nuclear pharmacist.

Second Section

Complete the following for preceptor attestation and signature:

I am an Authorized Nuclear Pharmacist for PharmaRx Hawaii
Nuclear Pharmacy or Medical Facility

53-29217-01 MB
License/Permit Number

Name of Preceptor	Signature	Telephone Number	Date
Blaine Ikeda	<i>Blaine Ikeda</i>	(808) 487-0814	4/29/2013

PURDUE UNIVERSITY

WEST LAFAYETTE, INDIANA

COLLEGE OF PHARMACY
DEPARTMENT OF PHARMACY PRACTICE
NUCLEAR PHARMACY PROGRAMS

THIS CERTIFICATE IS AWARDED TO

Maryanne Wong

AS EVIDENCE OF COMPLETION OF THE

NUCLEAR PHARMACY CERTIFICATE PROGRAM

January 2, 2013

Kara D Weatherman

Director of Nuclear Pharmacy Training Programs

Nuclear Pharmacy Certificate Program Outline:

Contents:

1. Program Concept :
2. Synopsis of Clock Hours of Training :
3. DVD and Workbook (Self-Study Portion) Clock Hours :
4. Campus Portion Laboratory and Lecture Clock Hours
5. Instructional Staff

Abbreviations Used:

RPI:	Radiation Physics / Instrumentation
RP:	Radiation Physics
MA:	Math
RB:	Radiation Biology
RC:	Radiochemistry

Form Updated 08/11

TRAINING RECEIVED IN BASIC RADIOISOTOPE HANDLING TECHNIQUES*

Trainee: Maryanne Wong
Date issued: January 2, 2013

Location of Training	Date(s) of Attendance	Nuclear Pharmacy Certificate Program	Total Clock Hours of Course	Breakdown of Course Content in Clock Hours				
				Radiation Physics & Instrumentation	Radiation Protection	Math Pertaining to Radioactivity	Radiation Biology	Radio-pharmaceutical Chemistry
Purdue University	May 2012 - January 2013	DVD-Workbook	150	51	33	13	21	32
	August 2012	On-Site	65	34	13	10	0	8
Total Hours Received			215					
Hourly breakdown by topic				85	46	23	21	40

* This form is representative of that which is used to apply for an NRC license amendment for an authorized user.

Director of Nuclear Pharmacy Training Programs: *Kara D. Weatherman*
 Kara Duncan Weatherman, PharmD, BCNP, FAPhA
 Clinical Assistant Professor of Pharmacy Practice
 Purdue University
 Nuclear Pharmacy Programs

KA 580726

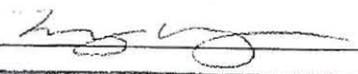
LICENSE NUMBER
PH

EXPIRATION DATE
12/31/2013

STATE OF HAWAII DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
PHARMACIST

MARYANNE L WONG

(SIGNATURE
OF LICENSEE)



Pendaflex
Esselle



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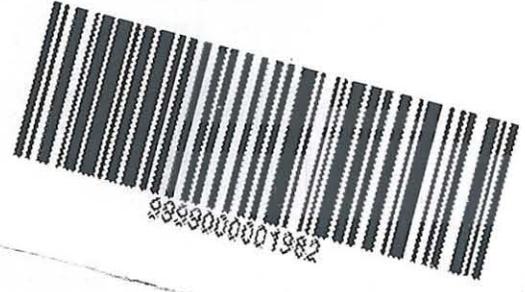
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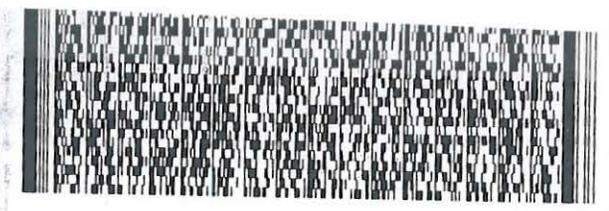
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RECEIVED
 MAY 13 2013
 NMS

delivered On Time.

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Align bottom of Peel and Stick Airbill or Pouch here.

BETWEEN:

Accounts Receivable/Payable
and
Regional Licensing Branches

[FOR ARPB USE]
INFORMATION FROM WBL

Program Code: 02500
Status Code: Pending Amendment
Fee Category: 3C
Exp. Date: 06/30/2020
Fee Comments:
Decom Fin Assur Reqd: N

License Fee Worksheet - License Fee Transmittal

A. REGION

1. APPLICATION ATTACHED

Applicant/Licensee: QUEEN'S MEDICAL CENTER, THE
Received Date: 05/13/2013
Docket Number: 3038265
Mail Control Number: 580726
License Number: 53-16533-04MD
Action Type: Amendment

2. FEE ATTACHED

Amount: _____

Check No.: _____

3. COMMENTS

Signed: _____

Colleen Murnahan

Date: _____

5-15-13

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: _____



DATE
06/05/2013

NAME AND ADDRESS OF APPLICANT AND/OR LICENSEE

The Queen's Medical Center
ATTN: Brian Oyadomari
Radiation Safety Officer
1301 Punchbowl Street
Honolulu, (Oahu) HI 96813

LICENSE NUMBER

53-16533-04MD

MAIL CONTROL NUMBER

580726

LICENSING AND/OR TECHNICAL REVIEWER

cmurnahan *cm*

This is to acknowledge the receipt of your:

LETTER and/or APPLICATION DATED: 05/09/2013

The initial processing, which included an administrative review, has been performed.

AMENDMENT TERMINATION NEW LICENSE RENEWAL

- There were no administrative omissions identified during our initial review.
- This is to acknowledge receipt of your application for renewal of the material(s) license identified above. Your application is deemed timely filed, and accordingly, the license will not expire until final action has been taken by this office.
- Your application for a new NRC license did not include your taxpayer identification number. Please fill out NRC Form 531, located at the following link:

<http://www.nrc.gov/reading-rm/doc-collections/forms/nrc531.pdf>

Send the completed NRC Form 531, by facsimile, to the following number: (301) 415-5387

A copy of your action has been emailed to our License Fee and Accounts Receivable Branch, in our Headquarters office in Rockville, MD. You will be contacted separately if there is a fee issue involved.

Your application has been assigned the above listed **MAIL CONTROL NUMBER**. When calling to inquire about this action, please refer to this control number. Your application has been forwarded to a technical reviewer. Please note that the technical review, which is normally completed within 180 days for a renewal application (90 days for all other requests), may identify additional omissions or require additional information. If you have any questions concerning the processing of your application, our contact information is listed below:

Region IV
U. S. Nuclear Regulatory Commission
DNMS/NMSB - B
1600 E. Lamar Blvd.
Arlington, TX 76011-4511
(817) 200-1103 or (817) 200-1140

*emailed to licensee
6-5-2013 cm*