

NRC FORM 313 (03-2013) 10 CFR 30, 32, 33, 34, 35, 36, 39, and 40	U.S. NUCLEAR REGULATORY COMMISSION APPLICATION FOR MATERIALS LICENSE	APPROVED BY OMB: NO. 3150-0120 EXPIRES: 05/31/2015 Estimated burden per response to comply with this mandatory collection request: 4.3 hours. Submittal of the application is necessary to determine that the applicant is qualified and that adequate procedures exist to protect the public health and safety. Send comments regarding burden estimate to the Information Services Branch (T-5 F53), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to Infocollects.Resource@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0120), Office of Management and Budget, Washington, DC 20503. If a means used to impose an information collection does not display a currently valid OMB control number, the NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.
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INSTRUCTIONS: SEE THE APPROPRIATE LICENSE APPLICATION GUIDE FOR DETAILED INSTRUCTIONS FOR COMPLETING APPLICATION. SEND TWO COPIES OF THE ENTIRE COMPLETED APPLICATION TO THE NRC OFFICE SPECIFIED BELOW. *AMENDMENTS/RENEWALS THAT INCREASE THE SCOPE OF THE EXISTING LICENSE TO A NEW OR HIGHER FEE CATEGORY WILL REQUIRE A FEE.

APPLICATION FOR DISTRIBUTION OF EXEMPT PRODUCTS FILE APPLICATIONS WITH: OFFICE OF FEDERAL & STATE MATERIALS AND ENVIRONMENTAL MANAGEMENT PROGRAMS DIVISION OF MATERIALS SAFETY AND STATE AGREEMENTS U.S. NUCLEAR REGULATORY COMMISSION WASHINGTON, DC 20555-0001 ALL OTHER PERSONS FILE APPLICATIONS AS FOLLOWS: IF YOU ARE LOCATED IN: ALABAMA, CONNECTICUT, DELAWARE, DISTRICT OF COLUMBIA, FLORIDA, GEORGIA, KENTUCKY, MAINE, MARYLAND, MASSACHUSETTS, NEW HAMPSHIRE, NEW JERSEY, NEW YORK, NORTH CAROLINA, PENNSYLVANIA, PUERTO RICO, RHODE ISLAND, SOUTH CAROLINA, TENNESSEE, VERMONT, VIRGINIA, VIRGIN ISLANDS, OR WEST VIRGINIA, SEND APPLICATIONS TO: LICENSING ASSISTANCE TEAM DIVISION OF NUCLEAR MATERIALS SAFETY U.S. NUCLEAR REGULATORY COMMISSION, REGION I 2100 RENAISSANCE BOULEVARD, SUITE 100 KING OF PRUSSIA, PA 19406-2713	IF YOU ARE LOCATED IN: ILLINOIS, INDIANA, IOWA, MICHIGAN, MINNESOTA, MISSOURI, OHIO, OR WISCONSIN, SEND APPLICATIONS TO: MATERIALS LICENSING BRANCH U.S. NUCLEAR REGULATORY COMMISSION, REGION III 2443 WARRENVILLE ROAD, SUITE 210 LISLE, IL 60532-4352 ALASKA, ARIZONA, ARKANSAS, CALIFORNIA, COLORADO, HAWAII, IDAHO, KANSAS, LOUISIANA, MISSISSIPPI, MONTANA, NEBRASKA, NEVADA, NEW MEXICO, NORTH DAKOTA, OKLAHOMA, OREGON, PACIFIC TRUST TERRITORIES, SOUTH DAKOTA, TEXAS, UTAH, WASHINGTON, OR WYOMING, SEND APPLICATIONS TO: NUCLEAR MATERIALS LICENSING BRANCH U.S. NUCLEAR REGULATORY COMMISSION, REGION IV 1600 E. LAMAR BOULEVARD ARLINGTON, TX 76011-4511
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PERSONS LOCATED IN AGREEMENT STATES SEND APPLICATIONS TO THE U.S. NUCLEAR REGULATORY COMMISSION ONLY IF THEY WISH TO POSSESS AND USE LICENSED MATERIAL IN STATES SUBJECT TO U.S. NUCLEAR REGULATORY COMMISSION JURISDICTIONS.

1. THIS IS AN APPLICATION FOR (Check appropriate item) <input type="checkbox"/> A. NEW LICENSE <input type="checkbox"/> B. AMENDMENT TO LICENSE NUMBER <input checked="" type="checkbox"/> C. RENEWAL OF LICENSE NUMBER	2. NAME AND MAILING ADDRESS OF APPLICANT (Include ZIP code) Metro Ponce, Inc. d/b/a Hospital Metropolitano Dr. Pila PO Box 331910 Ponce, PR 00733-1910
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3. ADDRESS WHERE LICENSED MATERIAL WILL BE USED OR POSSESSED Hospital Metropolitano Dr. Pila Nuclear Medicine Department PO Box 331910 Ponce, PR 00733-1910	4. NAME OF PERSON TO BE CONTACTED ABOUT THIS APPLICATION Lybette López, CNMT <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:50%;">BUSINESS TELEPHONE NUMBER (787) 848-5600</td> <td style="width:50%;">BUSINESS CELLULAR TELEPHONE NUMBER (787) 645-3623</td> </tr> <tr> <td colspan="2">BUSINESS EMAIL ADDRESS lyzbettelopez@hotmail.com</td> </tr> </table>	BUSINESS TELEPHONE NUMBER (787) 848-5600	BUSINESS CELLULAR TELEPHONE NUMBER (787) 645-3623	BUSINESS EMAIL ADDRESS lyzbettelopez@hotmail.com	
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BUSINESS EMAIL ADDRESS lyzbettelopez@hotmail.com					

SUBMIT ITEMS 5 THROUGH 11 ON 8-1/2 X 11" PAPER. THE TYPE AND SCOPE OF INFORMATION TO BE PROVIDED IS DESCRIBED IN THE LICENSE APPLICATION GUIDE.

5. RADIOACTIVE MATERIAL a. Element and mass number; b. chemical and/or physical form; and c. maximum amount which will be possessed at any one time.	6. PURPOSE(S) FOR WHICH LICENSED MATERIAL WILL BE USED.
8. TRAINING FOR INDIVIDUALS WORKING IN OR FREQUENTING RESTRICTED AREAS.	7. INDIVIDUAL(S) RESPONSIBLE FOR RADIATION SAFETY PROGRAM AND THEIR TRAINING EXPERIENCE.
10. RADIATION SAFETY PROGRAM.	9. FACILITIES AND EQUIPMENT.
12. LICENSE FEES (Fees required only for new applications, with few exceptions*) (See 10 CFR 170 and Section 170.31)	11. WASTE MANAGEMENT.

FEE CATEGORY Medical License	AMOUNT ENCLOSED \$ 0.00
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13. CERTIFICATION. (Must be completed by applicant) THE APPLICANT UNDERSTANDS THAT ALL STATEMENTS AND REPRESENTATIONS MADE IN THIS APPLICATION ARE BINDING UPON THE APPLICANT.
 THE APPLICANT AND ANY OFFICIAL EXECUTING THIS CERTIFICATION ON BEHALF OF THE APPLICANT, NAMED IN ITEM 2, CERTIFY THAT THIS APPLICATION IS PREPARED IN CONFORMITY WITH TITLE 10, CODE OF FEDERAL REGULATIONS, PARTS 30, 32, 33, 34, 35, 36, 39, AND 40, AND THAT ALL INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF THEIR KNOWLEDGE AND BELIEF.
 WARNING: 18 U.S.C. SECTION 1001 ACT OF JUNE 25, 1948 62 STAT. 749 MAKES IT A CRIMINAL OFFENSE TO MAKE A WILLFULLY FALSE STATEMENT OR REPRESENTATION TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES AS TO ANY MATTER WITHIN ITS JURISDICTION.

CERTIFYING OFFICER - TYPED/PRINTED NAME AND TITLE <i>Rafael Alvarado Nariaga, MHA</i> Executive Director	SIGNATURE 	DATE Dec/15/13
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FOR NRC USE ONLY					
TYPE OF FEE	FEE LOG	FEE CATEGORY	AMOUNT RECEIVED	CHECK NUMBER	COMMENTS
APPROVED BY				DATE	

NRC FORM 313 U.S. NUCLEAR REGULATORY COMMISSION
 (03-2013)
 10 CFR 30, 32, 33,
 34, 35, 36, 39, and 40



APPLICATION FOR MATERIALS LICENSE

APPROVED BY OMB: NO. 3150-0120 **EXPIRES: 05/31/2015**

Estimated burden per response to comply with this mandatory collection request: 4.3 hours. Submittal of the application is necessary to determine that the applicant is qualified and that adequate procedures exist to protect the public health and safety. Send comments regarding burden estimate to the Information Services Branch (T-5 F53), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to Infocollects.Resource@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NE08-10202, (3150-0120), Office of Management and Budget, Washington, DC 20503. If a means used to impose an information collection does not display a currently valid OMB control number, the NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.

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APPLICATION FOR DISTRIBUTION OF EXEMPT PRODUCTS FILE APPLICATIONS WITH:

OFFICE OF FEDERAL & STATE MATERIALS AND ENVIRONMENTAL MANAGEMENT PROGRAMS
 DIVISION OF MATERIALS SAFETY AND STATE AGREEMENTS
 U.S. NUCLEAR REGULATORY COMMISSION
 WASHINGTON, DC 20555-0001

ALL OTHER PERSONS FILE APPLICATIONS AS FOLLOWS:

IF YOU ARE LOCATED IN:

ALABAMA, CONNECTICUT, DELAWARE, DISTRICT OF COLUMBIA, FLORIDA, GEORGIA, KENTUCKY, MAINE, MARYLAND, MASSACHUSETTS, NEW HAMPSHIRE, NEW JERSEY, NEW YORK, NORTH CAROLINA, PENNSYLVANIA, PUERTO RICO, RHODE ISLAND, SOUTH CAROLINA, TENNESSEE, VERMONT, VIRGINIA, VIRGIN ISLANDS, OR WEST VIRGINIA,

SEND APPLICATIONS TO:

LICENSING ASSISTANCE TEAM
 DIVISION OF NUCLEAR MATERIALS SAFETY
 U.S. NUCLEAR REGULATORY COMMISSION, REGION I
 2100 RENAISSANCE BOULEVARD, SUITE 100
 KING OF PRUSSIA, PA 19406-2713

IF YOU ARE LOCATED IN:

ILLINOIS, INDIANA, IOWA, MICHIGAN, MINNESOTA, MISSOURI, OHIO, OR WISCONSIN,
SEND APPLICATIONS TO:

MATERIALS LICENSING BRANCH
 U.S. NUCLEAR REGULATORY COMMISSION, REGION III
 2443 WARRENVILLE ROAD, SUITE 210
 LISLE, IL 60532-4352

SEND APPLICATIONS TO:

NUCLEAR MATERIALS LICENSING BRANCH
 U.S. NUCLEAR REGULATORY COMMISSION, REGION IV
 1600 E. LAMAR BOULEVARD
 ARLINGTON, TX 76011-4511

PERSONS LOCATED IN AGREEMENT STATES SEND APPLICATIONS TO THE U.S. NUCLEAR REGULATORY COMMISSION ONLY IF THEY WISH TO POSSESS AND USE LICENSED MATERIAL IN STATES SUBJECT TO U.S. NUCLEAR REGULATORY COMMISSION JURISDICTIONS.

1. THIS IS AN APPLICATION FOR (Check appropriate item)

A. NEW LICENSE

B. AMENDMENT TO LICENSE NUMBER

C. RENEWAL OF LICENSE NUMBER 52-25255-01

2. NAME AND MAILING ADDRESS OF APPLICANT (Include ZIP code)

Metro Ponce, Inc.
 d/b/a Hospital Metropolitano Dr. Pila
 PO Box 331910
 Ponce, PR 00733-1910

3. ADDRESS WHERE LICENSED MATERIAL WILL BE USED OR POSSESSED

Hospital Metropolitano Dr. Pila
 Nuclear Medicine Department
 PO Box 331910
 Ponce, PR 00733-1910

4. NAME OF PERSON TO BE CONTACTED ABOUT THIS APPLICATION

Lybette López, CNMT

BUSINESS TELEPHONE NUMBER (787) 848-5600	BUSINESS CELLULAR TELEPHONE NUMBER (787) 645-3623
BUSINESS EMAIL ADDRESS lyzbettelopez@hotmail.com	

SUBMIT ITEMS 5 THROUGH 11 ON 8-1/2 X 11" PAPER. THE TYPE AND SCOPE OF INFORMATION TO BE PROVIDED IS DESCRIBED IN THE LICENSE APPLICATION GUIDE.

5. RADIOACTIVE MATERIAL

a. Element and mass number, b. chemical and/or physical form, and c. maximum amount which will be possessed at any one time.

8. TRAINING FOR INDIVIDUALS WORKING IN OR FREQUENTING RESTRICTED AREAS.

10. RADIATION SAFETY PROGRAM.

6. PURPOSE(S) FOR WHICH LICENSED MATERIAL WILL BE USED.

7. INDIVIDUAL(S) RESPONSIBLE FOR RADIATION SAFETY PROGRAM AND THEIR TRAINING EXPERIENCE.

9. FACILITIES AND EQUIPMENT.

11. WASTE MANAGEMENT.

12. LICENSE FEES (Fees required only for new applications, with few exceptions*) (See 10 CFR 170 and Section 170.31)

FEE CATEGORY	AMOUNT ENCLOSED \$
Medical License	0.00

13. CERTIFICATION. (Must be completed by applicant) THE APPLICANT UNDERSTANDS THAT ALL STATEMENTS AND REPRESENTATIONS MADE IN THIS APPLICATION ARE BINDING UPON THE APPLICANT.

THE APPLICANT AND ANY OFFICIAL EXECUTING THIS CERTIFICATION ON BEHALF OF THE APPLICANT, NAMED IN ITEM 2, CERTIFY THAT THIS APPLICATION IS PREPARED IN CONFORMITY WITH TITLE 10, CODE OF FEDERAL REGULATIONS, PARTS 30, 32, 33, 34, 35, 36, 39, AND 40, AND THAT ALL INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF THEIR KNOWLEDGE AND BELIEF.

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CERTIFYING OFFICER - TYPED/PRINTED NAME AND TITLE

Rafael Alvarado Navega, MHA
 Executive Director

SIGNATURE

Rafael A Navega

DATE

FOR NRC USE ONLY					
TYPE OF FEE	FEE LOG	FEE CATEGORY	AMOUNT RECEIVED	CHECK NUMBER	COMMENTS
APPROVED BY				DATE	

Renewal 52-25255-01 Hospital Metropolitan Dr. Pila | 2013

Item 5: Radioactive Material

Element and Mass Number	Chemical or Physical Form	Maximum Amount
I 131	Sodium Iodide	300 mCi
Tc 99m	Pertechnetate	As needed
Tc 99m MAA	Labeled aggregated Human Serum Albumin	As needed
Tc 99m SC	Labeled Sulfur Colloid	As needed
Tc 99m PYP	Labeled Pyrophosphate	As needed
Tc MDP	Labeled Medronate	As needed
Tc 99m DTPA	Labeled DTPA tin complex/aerosol	As needed
Tc 99m DMSA	Labeled DMSA	As needed
Tc 99m HIDA	Labeled Disofenin	As needed
Tc 99m	Labeled Mebrofenin	As needed
Tc 99m	Labeled Etidronate	As needed
Tc 99m	Labeled Polyphosphate	As needed
Tc 99m	Labeled commercial approved byproducts for diagnostic imaging	As needed
Tc 99m	Labeled commercial kits for myocardial and cerebral perfusion	As needed
Molybdenum 99m	Mo 99/ Tc 99m Generator	2000 mCi
Gallium 67	Gallium Citrate	As needed
Thallium 201	Thallium 201	As needed
Indium 111	Labelled commercial products approved for diagnostic imaging	As needed

Renewal 52-25255-01 Hospital Metropolitan Dr. Pila | 2013

Item 6: Purpose(s) for Which Licensed Material Will Be Used

Licensed Material	Amount	Purpose
I. Unsealed Byproduct Material for which written directive is not required under 10 CFR 35.100 supplied or prepared according to statement 35.100 (a) to (d)	As needed	Any Uptake, Dilution, and Excretion Study permitted by 10 CFR 35.100
II. Used unsealed byproduct material for which a written directive is not require under 10 CFR 35.200 supplied or prepared according to 35.200 (a) to (d).	As needed	Any imaging localization study permitted by 10 CFR 35.200. All reagent kits on all product materials and procedures approved by FDA.
III. Use of unsealed byproduct material for which a written directive is required under 10 CFR 35.300 obtained or prepared according to statements 35.300 (a) to (d).	As needed	Any radiopharmaceutical therapy procedure permitted by 35.300
I 131 Sodium Iodide	Up to 30 mCi	Treatment of hyperthyroidism or thyroid ablation
I 131 Sodium Iodide	≤ 30uCi	Diagnostic
I 131 Sodium Iodide	Up to 300 mCi	Treatment of Thyroid Carcinoma

Renewal 52-25255-01 Hospital Metropolitano Dr. Pila | 2013

**Item 7: Individual (s) Responsible for Radiation Safety Program and
their Training Experience**

Name	Training Experience
Adrián Alvarez de la Campa, MD <ul style="list-style-type: none">• Autorized User• Radiation Safety Officer	Certified by American Society of Nuclear Medicine 2005. Certification Number 07462

Item 8: Training for Individuals Working In or Frequenting Restricted Areas

Workshop/Training	Individuals
Training and Review in Radiation Protection <ul style="list-style-type: none">• On the job training• Lectures• Outside Seminars or Conferences	<ul style="list-style-type: none">• Nuclear Medicine Technologists• Nurse working in Nuclear Medicine Department• Housekeeping Personnel working in Nuclear Medicine Department• Secretary of Nuclear Medicine Department• Nurses of Clinical Departments in charge of hospitalized patient who has received radioactive dosage.

Item 9: Facilities and Equipment

Equipment:	Used For:
Gamma Cameras: <ul style="list-style-type: none"> • Toshiba GCA 7100 • GE Hawkeye 	Imaging /Nuclear Scans
Survey Instruments: <ul style="list-style-type: none"> • Biodex 051-014 S/N 101796/099491 Range: 0.1 to 1000 • Biodex 069-310 (Surface Monitor) S/N 37506 Range: 1 to 100 	<ul style="list-style-type: none"> • Measure radiation levels, radioactive contamination and radioactive products. • Instruments will be available for use when byproduct material is in use • Radiation Monitoring Instruments will be calibrated by a person qualified to perform survey meters calibrations.
Dose Calibration/Other Equipment use to measure dosages of unsealed byproduct material: <ul style="list-style-type: none"> • Capintec CRC 15 R S/N 151068 • Printer S/N 954200 • Capintec Captus 600 S/N 600006 (Thyroid Uptake System) • Deluxe Wipe Test Counter Victoreen (Model 05578) 	<ul style="list-style-type: none"> • Dose Calibration • Thyroid Uptake System • Wipe Test Counter
Other Equipment for Safe Receive, Use, Storage and Dispose of Radioactive Material: <ul style="list-style-type: none"> • Hot Room • Fume Hood Biodex 102038 • Lead Barriers • Decay Room 	<ul style="list-style-type: none"> • Radioactive Material will be Kept at Hot Room. • Radioiodine Dosages will be opened in Fume Hood. • This Equipment is Available in Hot Room • The Decay Room is localized

Renewal 52-25255-01 Hospital Metropolitan Dr. Pila | 2013

	in the Basement of the Building.
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Item 10: Radiation Safety Program

Radiation material will be handle and used only by appropriately trained personnel, so as to maintain the occupational exposure ALARA and to protect other workers and members of the public.

Radioactive material as unit dosages will be delivered by the Radiopharmacy to the Hot Room where it is received by the Nuclear Medicine Technologist. Dosages are sent in individual lead containers within a lead box. A lead nest is available in the hot room.

When a written directive is required: written procedures are available in order to provide high confidence that license material is administrated as directed by the authorized user, as to the correct patient, correct dosage, correct form of radioactive product, correct diagnostic and or therapy procedure.

Hospitalized patients who have received unsealed licensed material may be released from confinement with written radiation safety instructions in accordance to 10CFR 35.75

ANNUAL AUDIT

We will review annually the content and implementation of the radioactive protection programs as to:

- Compliance with NRC regulations, terms and conditions fo the License.
- Occupational dosage and exposure to the members of the public are ALARA.

OCCUPATIONAL DOSE

Dosimeter will be used by personnel to measure personnel radiation exposure. Whole Body and Ring Dosimeters are supplied monthly by Landauer, Inc.

AREA SURVEYS

We have developed and will implement and maintain written procedures for areas surveys in accordance with 10 CFR 20.1101 that meet the requirements of 10 CFR 20.1501 and 10 CFR 35.70.

SAFE USE AND UNSEALED LICENSED MATERIALS:

We have developed and will implement and maintain procedures for safe use of unsealed byproduct materials that meet the requirements of 10 CFR.20.1101 and 10 CFR 20.1301.

SPILL PROCEDURES:

We have developed and will implement and maintain written procedures for safe response to spills of licensed materials in accordance with 10 CFR 20.1101.

MINIMIZATIONS OF CONTAMINATIONS:

Leak Tests of Seals Radioactive Standards used in quality control are performed every 6 months.

Item 11: Waste Management

For Unit Doses Received From the Radiopharmacy: All radioactive contaminated vials, syringes, needles from administered radioactive dosages given to patients are returned to the radiopharmacy in the same lead syringe containers and lead box that will received.

Radiopharmacy Personnel transport back to Radiopharmacy.

All radiation contaminated medical waste is placed in labeled red box and allowed to decay, then discarded as regular biomedical waste, when background levels are reach.

Radioactive Standards and Flood Sources not in used are taken to Decay Room and kept in Storage.



December 16, 2013

Dear NRC Official:

This letter is a request to change the Radiation Safety Officer at Hospital Metropolitano Dr. Pila, Ponce, PR (License number 52-25255-01).

Actual RSO is Dr. Adrián Alvarez de la Campa, MD, the proposed RSO is Lyzlette López Castellar, CNMT.

We are including form 313 A: Radiation Safety Officer Training and Experience and Preceptor Attestation, in order to proceed with the amending process.

Telephone number and email address of the proposed RSO

Phone: (787) 645-3623

Email: lyzbettelopez@hotmail.com

Thank you for your help.

A handwritten signature in black ink, appearing to read "Rafael Alvarado".

Rafael Alvarado, MHSA
Hospital Metropolitano Dr. Pila
Ponce, PR

NRC FORM 313A (RSO) (05-2012)	U.S. NUCLEAR REGULATORY COMMISSION	APPROVED BY OMB: NO. 3150-0120 EXPIRES: (05/31/2015)
RADIATION SAFETY OFFICER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION [10 CFR 35.50]		

Name of Proposed Radiation Safety Officer
 Lyzette López Castellar, BSNMT, CNMT

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	University of Puerto Rico Medical Sciences Campus - B.S.N.M.T.	40.0	Aug 1, 1991- Dec 20, 1991
Radiation protection	University of Puerto Rico- B.S.N.M.T. Medical Sciences Campus	40.0	Aug 1, 1991- Dec 20, 1991
Mathematics pertaining to the use and measurement of radioactivity	University of Puerto Rico- B.S.N.M.T. Medical Sciences Campus	40.0	Aug 1, 1991- Dec 20, 1991
Radiation biology	University of Puerto Rico- B.S.N.M.T. Medical Sciences Campus	40.0	Aug 1, 1991- Dec 20, 1991
Radiation dosimetry	University of Puerto Rico- B.S.N.M.T. Medical Sciences Campus	40.0	Aug 1, 1991- Dec 20, 1991
Total Hours of Training:		200	

NRC FORM 313A (RSO)

(05-2012)

U.S. NUCLEAR REGULATORY COMMISSION

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	52-25255-01 Metro Ponce Inc d/b/a Hospital Metropolitan Dr. Pila PO Box 331910, Ponce, PR 00733-1910	May 3, 2010 to Aug 23, 2013
Using and performing checks for proper operation of instruments used to determine the activity of dosages, survey meters, and instruments used to measure radionuclides	52-25255-01 Metro Ponce Inc d/b/a Hospital Metropolitan Dr. Pila PO Box 331910, Ponce, PR 00733-1910	May 3, 2010 to Aug 23, 2013
Securing and controlling byproduct material	52-25255-01 Metro Ponce Inc d/b/a Hospital Metropolitan Dr. Pila	May 3, 2010 to Aug 23, 2013
Using administrative controls to avoid mistakes in administration of byproduct material	52-25255-01 Metro Ponce Inc d/b/a Hospital Metropolitan Dr. Pila PO Box 331910, Ponce, PR 00733-1910	May 3, 2010 to Aug 23, 2013
Using procedures to prevent or minimize radioactive contamination and using proper decontamination procedures	52-25255-01 Metro Ponce Inc d/b/a Hospital Metropolitan Dr. Pila PO Box 331910, Ponce, PR 00733-1910	May 3, 2010 to Aug 23, 2013
Using emergency procedures to control byproduct material	52-25255-01 Metro Ponce Inc d/b/a Hospital Metropolitan Dr. Pila PO Box 331910, Ponce, PR 00733-1910	May 3, 2010 to Aug 23, 2013
Disposing of byproduct material	52-25255-01 Metro Ponce Inc d/b/a Hospital Metropolitan Dr. Pila PO Box 331910, Ponce, PR 00733-1910	May 3, 2010 to Aug 23, 2013
Licensed Material Used (e.g., 35.100, 35.200, etc.)+ 35.300	52-25255-01 Metro Ponce Inc d/b/a Hospital Metropolitan Dr. Pila PO Box 331910, Ponce, PR 00733-1910	May 3, 2010 to Aug 23, 2013

+ Choose all applicable sections of 10 CFR Part 35 to describe radiolotopes 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).

NRC FORM 313A (RSO)
(05-2012)

U.S. NUCLEAR REGULATORY COMMISSION

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
Dr. Adrián Alvarez de la Campa	52-25255-01
This license authorizes the following medical uses:	
<input checked="" type="checkbox"/> 35.100	<input checked="" type="checkbox"/> 35.200
<input checked="" 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 (gamma stereotactic radiosurgery)	<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	Dr. Adrián Alvarez de la Campa RSO Licence 52-25255-01	May 3, 2010 to Aug 23, 2013
Radiation safety, regulatory issues, and emergency procedures for 35.300 uses	Dr. Adrián Alvarez de la Campa RSO Licence 52-25255-01	May 3, 2010 to Aug 23, 2013
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):		

NRC FORM 313A (RSO)
(05-2012)

U.S. NUCLEAR REGULATORY COMMISSION

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
Dr. Adrián Alvarez de la Campa	52-25255-01
License/Permit lists supervising individual as:	
<input checked="" type="checkbox"/> Radiation Safety Officer <input checked="" 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 checked="" type="checkbox"/> 35.100 <input checked="" type="checkbox"/> 35.200 <input checked="" 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.
 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 Lyzbette López Castellar 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

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(05-2012)

U.S. NUCLEAR REGULATORY COMMISSION

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 Lyzbette Lopez Castellar 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:

NRC FORM 313A (RSO)
(05-2012)

U.S. NUCLEAR REGULATORY COMMISSION

RADIATION SAFETY OFFICER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)

AND

**Third Section
Complete for ALL**

I attest that Lyzbette López Castellar 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**

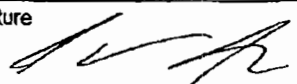
I am the Radiation Safety Officer for Metro Ponce, Inc. d/b/a Hospital Metropolitano Dr. Pila
Name of Facility

License/Permit Number: 52-25255-01

Name of Preceptor

Dr. Adrián Alvarez de la Campa

Signature



Telephone Number

(787) 613-4622

Date

Sept 6, 2013

NRC FORM 313A (RSO) (05-2012)	U.S. NUCLEAR REGULATORY COMMISSION	APPROVED BY OMB: NO. 3150-0120 EXPIRES: (05/31/2015)	
RADIATION SAFETY OFFICER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION [10 CFR 35.50]			
Name of Proposed Radiation Safety Officer Lyzette López Castellar, BSNMT, CNMT			
Requested Authorization(s) <i>The license authorizes the following medical uses (check all that apply):</i>			
<input checked="" type="checkbox"/> 35.100 <input checked="" type="checkbox"/> 35.200 <input checked="" 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 (_____)			
PART I – TRAINING AND EXPERIENCE <i>(Select one of the four methods below)</i>			
*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.			
<input type="checkbox"/> 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			
<input type="checkbox"/> 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			
<input checked="" type="checkbox"/> 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	University of Puerto Rico Medical Sciences Campus - B.S.N.M.T.	40.0	Aug 1, 1991- Dec 20, 1991
Radiation protection	University of Puerto Rico- B.S.N.M.T. Medical Sciences Campus	40.0	Aug 1, 1991- Dec 20, 1991
Mathematics pertaining to the use and measurement of radioactivity	University of Puerto Rico- B.S.N.M.T. Medical Sciences Campus	40.0	Aug 1, 1991- Dec 20, 1991
Radiation biology	University of Puerto Rico- B.S.N.M.T. Medical Sciences Campus	40.0	Aug 1, 1991- Dec 20, 1991
Radiation dosimetry	University of Puerto Rico- B.S.N.M.T. Medical Sciences Campus	40.0	Aug 1, 1991- Dec 20, 1991
Total Hours of Training:		200	

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(05-2012)

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	52-25255-01 Hospital Dr. Pila PO Box 331910, Ponce, PR 00733-1910	October 1993 to June 30, 2005
Using and performing checks for proper operation of instruments used to determine the activity of dosages, survey meters, and instruments used to measure radionuclides	52-25255-01 Hospital Dr. Pila PO Box 331910, Ponce, PR 00733-1910	October 1993 to June 30, 2005
Securing and controlling byproduct material	52-25255-01 Hospital Dr. Pila PO Box 331910, Ponce, PR 00733-1910	October 1993 to June 30, 2005
Using administrative controls to avoid mistakes in administration of byproduct material	52-25255-01 Hospital Dr. Pila PO Box 331910, Ponce, PR 00733-1910	October 1993 to June 30, 2005
Using procedures to prevent or minimize radioactive contamination and using proper decontamination procedures	52-25255-01 Hospital Dr. Pila PO Box 331910, Ponce, PR 00733-1910	October 1993 to June 30, 2005
Using emergency procedures to control byproduct material	52-25255-01 Hospital Dr. Pila PO Box 331910, Ponce, PR 00733-1910	October 1993 to June 30, 2005
Disposing of byproduct material	52-25255-01 Hospital Dr. Pila PO Box 331910, Ponce, PR 00733-1910	October 1993 to June 30, 2005
Licensed Material Used (e.g., 35.100, 35.200, etc.)+ <u>35.300</u>	52-25255-01 Hospital Dr. Pila PO Box 331910, Ponce, PR 00733-1910	October 1993 to June 30, 2005

+ 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).

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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
Dra. Evelyn Cintrón Ruiz	52-25255-01
This license authorizes the following medical uses:	
<input checked="" type="checkbox"/> 35.100	<input checked="" type="checkbox"/> 35.200
<input checked="" 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 (gamma stereotactic radiosurgery)	<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	Dra. Evelyn Cintrón Ruiz AU & RSO Licence 52-25255-01	October 1993 to June 30, 2005
Radiation safety, regulatory issues, and emergency procedures for 35.300 uses	Dra. Evelyn Cintrón Ruiz AU & RSO Licence 52-25255-01	October 1993 to June 30, 2005
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):		

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(05-2012)

U.S. NUCLEAR REGULATORY COMMISSION

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
Dra. Evelyn Cintrón Ruiz	52-25255-01

License/Permit lists supervising individual as:

Radiation Safety Officer Authorized User Authorized Nuclear Pharmacist
 Authorized Medical Physicist

Authorized as RSO, AU, ANP, or AMP for 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 (_____)

- 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 _____ 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 Lyzbette López Castellar 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

NRC FORM 313A (RSO)
(05-2012)

U.S. NUCLEAR REGULATORY COMMISSION

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 Lyzbette Lopez Castellar 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:

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(05-2012)

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RADIATION SAFETY OFFICER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)

AND

**Third Section
Complete for ALL**

I attest that Lyzbette López Castellar 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 I was the RSO for Hospital Dr. Pila (October 1993-2005)
Name of Facility

License/Permit Number: 52-25255-01

Name of Preceptor	Signature	Telephone Number	Date
Dra. Evelyn Cintrón Ruiz		(787) 484-2694	Sept 6, 2013

Lyzbette Lopez

Has successfully completed the 40 hour technical short course entitled

Radiation Safety Officer

August 26, 2013 – August 30, 2013

This certificate presented in Orlando, Florida, August 30, 2013

By Nevada Technical Associates, Inc.

Approval codes for C.E. units are: ASRT 30.5 units: NVZ0146001, AAHP 32 units: 2008-00-005, ABIH 4.5 units: 08-1362



Hermon Rao

Instructor

Certificate Number: 1377500414

This is to acknowledge the receipt of your letter/application dated

12/15/13, and to inform you that the initial processing which includes an administrative review has been performed.

Renew (52-25255-01)
There were no administrative omissions. Your application was assigned to a technical reviewer. Please note that the technical review may identify additional omissions or require additional information.

Please provide to this office within 30 days of your receipt of this card

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** 582738.
When calling to inquire about this action, please refer to this control number.
You may call us on (610) 337-5398, or 337-5260.