

**CONSULTING CARDIOLOGISTS, P. C.**

85 Seymour St., Suite 719, Hartford, CT 06106  
Tel. 860-522-0604, 860-659-2439

To: USNRC Region I  
2100 Renaissance Blvd, Suite 100  
King of Prussia, PA 19406-2713

January 21, 2016

RE: Amendment request for Materials License No. 06-28274-01.  
Docket No. 030-30786.

REC RGN1 01 27 16 AM 07:02

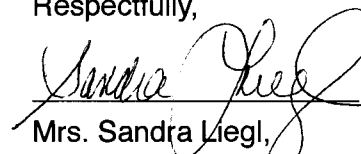
Dear Sir or Madam:

Our nuclear cardiac patient imaging service is seeking to add Andrew D. Feingold, MD, as an authorized user for materials in 10CFR 35.200. Enclosed you will find the documents from the preceptor, copy of the NRC-approved certification board, and additional documents for his continued education in the specialty.

If you have any questions or desire additional information, please contact me at 860-522-0604, or, 860-659-2439. We appreciate your efforts to process this amendment and we look forward to a continued safe and effective materials program. Thank you.

Br. 1  
03030786

Respectfully,

  
Mrs. Sandra Liegl,  
Practice Manager

590075

NMSS/RGN1 MATERIALS-002

**AUTHORIZED USER TRAINING AND EXPERIENCE  
AND PRECEPTOR ATTESTATION**  
(for uses defined under 35.100, 35.200, and 35.500)  
[10 CFR 35.190, 35.290, and 35.590]

APPROVED BY OMB: NO. 3150-0120  
EXPIRES: 3/31/2012

Name of Proposed Authorized User

Andrew D. Feingold, MD

State or Territory Where Licensed

Connecticut

Requested Authorization(s) (check all that apply)

35.100 Uptake, dilution, and excretion studies

35.200 Imaging and localization studies

35.500 Sealed sources for diagnosis (specify device \_\_\_\_\_ )

**PART I -- TRAINING AND EXPERIENCE**  
(Select one of the three 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. If using only 35.500 materials, stop here. If using 35.100 and 35.200 materials, skip to and complete Part II Preceptor Attestation.

**2. Current 35.390 Authorized User Seeking Additional 35.290 Authorization**

- a. Authorized user on Materials License meeting 10 CFR 35.390 or equivalent Agreement State requirements seeking authorization for 35.290.
- b. Supervised Work 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 Experience/License or Permit Number of Facility	Clock Hours	Dates of Experience*
Eluting generator systems appropriate for the preparation of radioactive drugs for imaging and localization studies, measuring and testing the eluate for radionuclidic purity, and processing the eluate with reagent kits to prepare labeled radioactive drugs			

**Total Hours of Experience:**

Supervising Individual

License/Permit Number listing supervising individual as an authorized user

Supervisor meets the requirements below, or equivalent Agreement State requirements (check all that apply).

35.290

35.390 + generator experience in 32.290(c)(1)(ii)(G)

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

**3. Training and Experience for Proposed Authorized User**

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			
Chemistry of byproduct material for medical use <i>(not required for 35.590)</i>			
Radiation biology			
<b>Total Hours of Training:</b>			

b. Supervised Work Experience (completion of this table is not required for 35.590).  
*(If more than one supervising individual is necessary to document supervised work experience, provide multiple copies of this section.)*

Supervised Work Experience		Total Hours of Experience:	
Description of Experience Must Include:	Location of Experience/License or Permit Number of Facility	Confirm	Dates of Experience*
Ordering, receiving, and unpacking radioactive materials safely and performing the related radiation surveys		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Performing quality control procedures on instruments used to determine the activity of dosages and performing checks for proper operation of survey meters		<input type="checkbox"/> Yes <input type="checkbox"/> No	

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

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

b. Supervised Work Experience. (continued)

Description of Experience Must Include:	Location of Experience/License or Permit Number of Facility	Confirm	Dates of Experience*
Calculating, measuring, and safely preparing patient or human research subject dosages		Yes No	
Using administrative controls to prevent a medical event involving the use of unsealed byproduct material		Yes No	
Using procedures to contain spilled byproduct material safely and using proper decontamination procedures		Yes No	
Administering dosages of radioactive drugs to patients or human research subjects		Yes No	
Eluting generator systems appropriate for the preparation of radioactive drugs for imaging and localization studies, measuring and testing the eluate for radionuclidic purity, and processing the eluate with reagent kits to prepare labeled radioactive drugs		Yes No	

Supervising Individual

License/Permit Number listing supervising individual as an authorized user

Supervisor meets the requirements below, or equivalent Agreement State requirements (*check one*).

35.190

35.290

35.390

35.390 + generator experience in 35.290(c)(1)(ii)(G)

c. For 35.590 only, provide documentation of training on use of the device.

Device	Type of Training	Location and Dates

d. For 35.500 uses only, stop here. For 35.100 and 35.200 uses, skip to and complete Part II Preceptor Attestation.

**AUTHORIZED USER 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. (Not required to meet training requirements in 35.590)

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 use requested:

For 35.190

Board Certification

I attest that \_\_\_\_\_ has satisfactorily completed the requirements in  
Name of Proposed Authorized User

10 CFR 35.190(a)(1) and has achieved a level of competency sufficient to function independently as an authorized user for the medical uses authorized under 10 CFR 35.100.

**OR**

Training and Experience

I attest that \_\_\_\_\_ has satisfactorily completed the 60 hours of training and  
Name of Proposed Authorized User

experience, including a minimum of 8 hours of classroom and laboratory training, required by 10 CFR 35.190(c)(1), and has achieved a level of competency sufficient to function independently as an authorized user for the medical uses authorized under 10 CFR 35.100.

For 35.290

Board Certification

I attest that **Andrew D. Feingold, MD** has satisfactorily completed the requirements in  
Name of Proposed Authorized User

10 CFR 35.290(a)(1) and has achieved a level of competency sufficient to function independently as an authorized user for the medical uses authorized under 10 CFR 35.100 and 35.200.

**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 80 hours of classroom and laboratory training, required by 10 CFR 35.290(c)(1), and has achieved a level of competency sufficient to function independently as an authorized user for the medical uses authorized under 10 CFR 35.100 and 35.200.

**Second Section**

Complete the following for preceptor attestation and signature:

I meet the requirements below, or equivalent Agreement State requirements, as an authorized user for:

35.190     35.290     35.390     35.390 + generator experience

Name of Preceptor

Seth T. Dahlberg, M.D.

Signature

*Seth T. Dahlberg*

Telephone Number

508-856-2210

Date

12/30/15

License/Permit Number/Facility Name

Mass. DPH 60-0096 UMass Memorial Medical Ctr, Worcester, MA

# Certification Board of Nuclear Cardiology

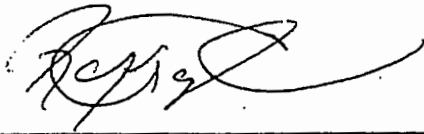
Incorporated 1996

Certifies That

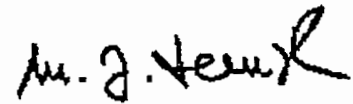
## Andrew D. Feingold, MD

HAVING MET THE REQUIREMENTS PRESCRIBED BY THIS BOARD  
FOR PHYSICIANS TRAINED IN THE UNITED STATES  
AND HAVING SATISFACTORILY PASSED THE REQUIRED EXAMINATION,  
IS HEREBY DESIGNATED  
A DIPLOMATE CERTIFIED IN THE SUBSPECIALTY OF  
**NUCLEAR CARDIOLOGY**

FOR THE PERIOD 2006 - 2016



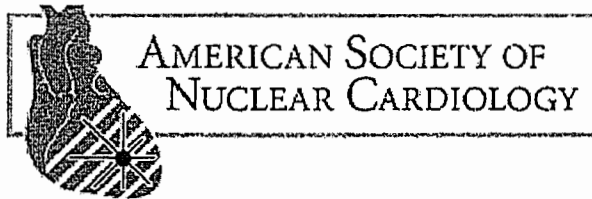
President



Secretary



CERTIFICATE NUMBER: 4626



# CERTIFICATE OF PARTICIPATION

American Society of Nuclear Cardiology

Certifies that

**Andrew Feingold**

Has participated in the live educational activity

**Nuclear Cardiology Today: Clinical Innovations and Practice Integration**

**April 13-15, 2012**

**Philadelphia, PA**

**Completed: 4/22/2012**

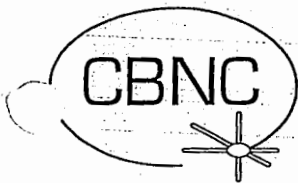
and is awarded 16.5 AMA PRA Category 1 Credits™

The American Society of Nuclear Cardiology designates this live activity activity for a maximum of 18 AMA PRA Category 1 Credit(s)™. Physicians should only claim credit commensurate with the extent of their participation in the activity.

The American Society of Nuclear Cardiology is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

A handwritten signature in cursive script, appearing to read "Brian G. Abbott".

**Brian G. Abbott**  
Chairman, ASNC Education Committee



# Certification Board of Nuclear Cardiology

19562 Club House Road • Montgomery Village, MD 20886  
Ph: +240.631.8151 • F: +240.631.8152 • Email: [administration@cbnc.org](mailto:administration@cbnc.org) • Website: [www.cbnc.org](http://www.cbnc.org)

For Immediate Release  
December 2006

## BOARD OF DIRECTORS

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Dawn M. Edgerton, MA  
Executive Director

## ANDREW D. FEINGOLD MD ACHIEVES BOARD CERTIFICATION IN NUCLEAR CARDIOLOGY

Montgomery Village, Maryland, USA - The Certification Board of Nuclear Cardiology (CBNC), a not-for-profit corporation established to develop and administer practice-related examinations in the field of Nuclear Cardiology, is pleased to announce that Andrew D. Feingold MD, of West Hartford, CT USA passed the certification examination in October 2006. Dr. Feingold is now entitled to designate him/herself as "Diplomate of the Certification Board of Nuclear Cardiology".

<< *Diplomate to add his/her biographical information here* >>

The purposes of the CBNC Certification Program are to establish the domain of the practice of Nuclear Cardiology for certification; to assess the level of knowledge demonstrated by Nuclear Cardiology specialists in a valid manner; to encourage professional growth in, and enhance the quality of, the practice of Nuclear Cardiology; to recognize formally individuals who meet the requirements set by CBNC; and to serve the public by encouraging quality patient care in the practice of Nuclear Cardiology.

CBNC has been recognized by the Nuclear Regulatory Commission (NRC) as meeting the requirements for the specialty board certification pathway under 10 CFR Part 35, Section 35.290.

## About CBNC

The Certification Board of Nuclear Cardiology, a not-for-profit corporation established in 1996, is a fully autonomous entity, independent of any other association, society, or academy. This independence allows the CBNC to maintain integrity concerning policy matters related to certification. Since 2003, CBNC has collaborated with the European Council of Nuclear Cardiology (ECNC) to offer the examination in a European venue. ECNC has representation on the CBNC's Examination Committee.

To date, 5,038 physicians have been certified in nuclear cardiology.

## For further information contact:

Dawn M. Edgerton  
Executive Director  
Certification Board of Nuclear Cardiology  
19562 Club House Road  
Montgomery Village, MD 20886 USA  
Tel: +240.631.8151 • Fax: +240.631.8152  
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AMERICAN SOCIETY OF  
NUCLEAR CARDIOLOGY

**Continuing Education Credit Certificate For Physicians**

**American Society of Nuclear Cardiology**

*certifies that*

***Andrew D. Feingold***

Has participated in the live educational activity:

ASNC 2014 Annual Meeting

September 18 - 21, 2014

Boston, MA

and is awarded 16 *AMA PRA Category 1 Credit(s)*<sup>TM</sup>.

September 21, 2014

Date Completed

The American Society of Nuclear Cardiology is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

The American Society of Nuclear Cardiology designates this live activity for a maximum of 28 *AMA PRA Category 1 Credit(s)*<sup>TM</sup>. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Donna Polk, MD

Chairman, ASNC Education Committee

Distributed on September 23, 2014

This is to acknowledge the receipt of your letter application dated

1-21-16, and to inform you that the initial processing which includes an administrative review has been performed.

Amend: 06-28274-01  
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 590075.  
When calling to inquire about this action, please refer to this control number.  
You may call us on (610) 337-5398, or 337-5260.

NRC FORM 532 (R1)  
(6-96)

Sincerely,  
Licensing Assistance Team Leader