

131



Portsmouth  
General Hospital

850 Crawford Parkway  
Portsmouth, Virginia 23704  
Telephone: (804) 398-4000

OCTOBER 31, 1988

U.S. NUCLEAR REGULATORY COMMISSION  
REGION II  
101 MARIETTA STREET, SUITE 2900  
ATLANTA, GEORGIA 30323

RE: RADIOACTIVE MATERIAL LICENSE NO. 45-09102-02

Gentlemen:

Please amend the above referenced license to add Hussein M. Aboulatta, M.D. as an authorized user of radioactive materials. Training and experience for Dr. Aboulatta is enclosed for your review.

If you have any questions or require additional information, please do not hesitate to contact the undersigned.

Sincerely,

*Richard B. Maxwell, III*  
RICHARD B. MAXWELL, III  
CHIEF OPERATING OFFICER

9002010408 881205  
REG2 LIC30  
45-09102-02 PDR

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| Log               | <i>704-4-D</i> |
| Remitter          |                |
| Check No.         | <i>01620</i>   |
| Amount            | <i>120</i>     |
| Fee Category      | <i>7c</i>      |
| Type of Fee       | <i>And</i>     |
| Date Check Rec'd. | <i>11/8/88</i> |
| Date Completed    | <i>11/4/88</i> |
| By:               | <i>Musier</i>  |

OFFICIAL COPY

**TRAINING AND EXPERIENCE  
AUTHORIZED USER OR RADIATION SAFETY OFFICER**

Approved by OMB  
3180-0041  
Expires 6-30-89

|  |   |
|--|---|
| 1. NAME OF AUTHORIZED USER OR RADIATION SAFETY OFFICER<br><br>Hussein M. Aboulatta, M.D. | 2. STATE OR TERRITORY IN WHICH LICENSED TO PRACTICE MEDICINE<br><br>Virginia, |
|--|---|

| 3. CERTIFICATION                       |                 |                               |
|--|-----------------|-------------------------------|
| SPECIALTY BOARD<br>A                   | CATEGORY<br>B   | MONTH AND YEAR CERTIFIED<br>C |
| 1- American Board of Internal Medicine | Board Certified | Sept. 1985                    |
| 2- Cardiovascular Diseases             | Board Certified | Nov. 1987                     |

**4. TRAINING RECEIVED IN BASIC RADIOISOTOPE HANDLING TECHNIQUES**

| FIELD OF TRAINING<br>A  | LOCATION AND DATE(S) OF TRAINING<br>B                | TYPE AND LENGTH OF TRAINING                       |  |
|---|--|---|--|
|   |  | LECTURE/<br>LABORATORY<br>COURSES<br>(Hours)<br>C | SUPERVISED<br>LABORATORY<br>EXPERIENCE<br>(Hours)<br>D |
| a. RADIATION PHYSICS AND INSTRUMENTATION                              | HEALTH PHYSICS SERVICES, INC.<br>ROCKVILLE, MARYLAND | 100   |  |
| b. RADIATION PROTECTION   | HEALTH PHYSICS SERVICES, INC.<br>ROCKVILLE, MARYLAND | 30  |  |
| c. MATHEMATICS PERTAINING TO THE USE AND MEASUREMENT OF RADIOACTIVITY | HEALTH PHYSICS SERVICES, INC.<br>ROCKVILLE, MARYLAND | 20  |  |
| d. RADIATION BIOLOGY  | HEALTH PHYSICS SERVICES, INC.<br>ROCKVILLE, MARYLAND | 20  |  |
| e. RADIOPHARMACEUTICAL CHEMISTRY                                      | HEALTH PHYSICS SERVICES, INC.<br>ROCKVILLE, MARYLAND | 30  |  |

**5. EXPERIENCE WITH RADIATION. (Actual use of Radioisotopes or Equivalent Experience)**

| ISOTOPE | MAXIMUM AMOUNT | WHERE EXPERIENCE WAS GAINED                            | DURATION OF EXPERIENCE   | TYPE OF USE            |
|---------|----------------|--|--|------------------------|
| TC-99   | 20 m ci (1)    | St. Francis Med Ctr.<br>Pittsburgh, PA 15201           | 6 month during<br>2 years Cardiology                               | Diagnostic Fellowship. |
|         |                | (2) Medical College of Georgia. Augusta Georgia 30912. | (2) 2 month during<br>2 years Fellowship<br>training in Cardiology | Diagnostic             |
| Tl-201  | 3 mc           | Same two places as above                               | Same Durations as above  | Diagnostic             |

PRECEPTOR STATEMENT

Supplement B must be completed by the applicant physician's preceptor. If more than one preceptor is necessary to document experience, obtain a separate statement from each.

**1. APPLICANT PHYSICIAN'S NAME AND ADDRESS**

FULL NAME  
Hussein M. Aboulatta, M.D.

STREET ADDRESS  
3315 County Street

CITY | STATE | ZIP CODE  
Portsmouth | Va. | 23707

**KEY TO COLUMN C**

**PERSONAL PARTICIPATION SHOULD CONSIST OF:**

1. Supervised examination of patients to determine the suitability for each isotope diagnosis and/or treatment and recommendation for prescribed dosage.
2. Collaboration in dose calibration and actual administration of dose to the patient including calculation of the radiation dose, related measurements and plotting of data.
3. Adequate period of training to enable physician to manage radioactive patients and follow patients through diagnosis and/or course of treatment.

**2. CLINICAL TRAINING AND EXPERIENCE OF ABOVE NAMED PHYSICIAN**

| ISOTOPE<br>A         | CONDITIONS DIAGNOSED OR TREATED<br>B              | NUMBER OF CASES INVOLVING PERSONAL PARTICIPATION<br>C | COMMENTS<br>(Additional information or comments may be submitted in duplicate on separate sheets.)<br>D |
|----------------------|---|---|---|
| I-131<br>or<br>I-125 | DIAGNOSIS OF THYROID FUNCTION                     |   |   |
|                      | DETERMINATION OF BLOOD AND BLOOD PLASMA VOLUME    |   |   |
|                      | LIVER FUNCTION STUDIES                            |   |   |
|                      | FAT ABSORPTION STUDIES                            |   |   |
|                      | KIDNEY FUNCTION STUDIES                           |   |   |
|                      | IN VITRO STUDIES                                  |   |   |
| OTHER                |   |   |   |
| I-125                | DETECTION OF THROMBOSIS                           |   |   |
| I-131                | THYROID IMAGING                                   |   |   |
| P-32                 | EYE TUMOR LOCALIZATION                            |   |   |
| Sr-75                | PANCREAS IMAGING                                  |   |   |
| Yb-169               | CISTERNOGRAPHY                                    |   |   |
| Xe-133               | BLOOD FLOW STUDIES AND PULMONARY FUNCTION STUDIES |   |   |
| OTHER                |   |   |   |
| Tc-99m               | BRAIN IMAGING                                     |   |   |
|                      | CARDIAC IMAGING                                   | 35  |   |
|                      | THYROID IMAGING                                   |   |   |
|                      | SALIVARY GLAND IMAGING                            |   |   |
|                      | BLOOD POOL IMAGING                                |   |   |
|                      | PLACENTA LOCALIZATION                             |   |   |
|                      | LIVER AND SPLEEN IMAGING                          |   |   |
|                      | LUNG IMAGING                                      |   |   |
|                      | BONE IMAGING                                      |   |   |
| OTHER                |   |   |   |



**PRECEPTOR STATEMENT (Continued)**

**2. CLINICAL TRAINING AND EXPERIENCE OF ABOVE NAMED PHYSICIAN (Continued)**

| ISOTOPE<br>A          | CONDITIONS DIAGNOSED OR TREATED<br>B  | NUMBER OF CASES INVOLVING PERSONAL PARTICIPATION<br>C | COMMENTS<br>(Additional information or comments may be submitted in duplicate on separate sheets.)<br>D |
|-----------------------|---|---|---|
| P-32<br>(Sodium)      | TREATMENT OF POLYCYTHEMIA VERA, LEUKEMIA, AND BONE METASTASES                         |   |   |
| P-32<br>(Colloid)     | INTRACAVITARY TREATMENT   |   |   |
| I-131                 | TREATMENT OF THYROID CARCINOMA  |   |   |
|                       | TREATMENT OF HYPERTHYROIDISM  |   |   |
| Au-198                | INTRACAVITARY TREATMENT   |   |   |
| Co-60<br>or<br>Co-137 | INTERSTITIAL TREATMENT  |   |   |
|                       | INTRACAVITARY TREATMENT   |   |   |
| I-125<br>or<br>Ir-192 | INTERSTITIAL TREATMENT  |   |   |
| Co-60<br>or<br>Co-137 | TELETHERAPY TREATMENT   |   |   |
| Sr-90                 | TREATMENT OF EYE DISEASE  |   |   |
|                       | RADIOPHARMACEUTICAL PREPARATION   |   |   |
| Mo-99/<br>Tc-99m      | GENERATOR   |   |   |
| Sr-113/<br>In-113m    | GENERATOR   |   |   |
| Tc-99m                | REAGENT KITS  | 5   |   |
| Other                 |   |   |   |
| Tl-201<br>chloride    | Cardiac perfusion<br>Studies with Thallium<br>201 chloride<br>( Resting and Exercise) | 121   |   |

**3. DATES AND TOTAL NUMBER OF HOURS RECEIVED IN CLINICAL RADIOISOTOPE TRAINING**

January, 1, 1988 to January 31, 1988  
 May 1, 1988 to May 31, 1988  
 624 Hours of Clinical Radioisotope Training.  
 During a 2 two years Cardiology Fellowship from 7/86 to 7/88

**4. THE TRAINING AND EXPERIENCE INDICATED ABOVE WAS OBTAINED UNDER THE SUPERVISION OF:**

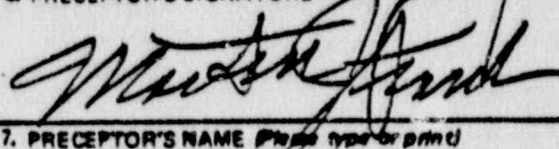
a. NAME OF SUPERVISOR  
 Martin Frank, M.D.

b. NAME OF INSTITUTION  
 Medical College of Georgia

c. MAILING ADDRESS  
 1120 15th St.

d. CITY  
 Augusta, Georgia 30912

**6. PRECEPTOR'S SIGNATURE**



**7. PRECEPTOR'S NAME (Please type or print)**

Martin J. Frank, M.D.

**8. DATE**

June 9, 1988

**5. MATERIALS LICENSE NUMBER(S)**

GA 7-1

PRECEPTOR STATEMENT

Supplement B must be completed by the applicant physician's preceptor. If more than one preceptor is necessary to document experience, obtain a separate statement from each.

1. APPLICANT PHYSICIAN'S NAME AND ADDRESS

FULL NAME

Hussein M. Aboulatta, M.D.

STREET ADDRESS

300 County St.

CITY

Portsmouth

STATE

Va.

ZIP CODE

23707

KEY TO COLUMN C

PERSONAL PARTICIPATION SHOULD CONSIST OF:

- 1-Supervised examination of patients to determine the suitability for radioisotope diagnosis and/or treatment and recommendation for prescribed dosage.
- 2-Collaboration in dose calibration and actual administration of dose to the patient including calculation of the radiation dose, related measurements and plotting of data.
- 3-Adequate period of training to enable physician to manage radioactive patients and follow patients through diagnosis and/or course of treatment.

2. CLINICAL TRAINING AND EXPERIENCE OF ABOVE NAMED PHYSICIAN

| ISOTOPE<br>A         | CONDITIONS DIAGNOSED OR TREATED<br>B              | NUMBER OF CASES INVOLVING PERSONAL PARTICIPATION<br>C | COMMENTS<br>(Additional information or comments may be submitted in duplicate on separate sheets.)<br>D |
|----------------------|---|---|---|
| I-131<br>or<br>I-125 | DIAGNOSIS OF THYROID FUNCTION                     |   |   |
|                      | DETERMINATION OF BLOOD AND BLOOD PLASMA VOLUME    |   |   |
|                      | LIVER FUNCTION STUDIES                            |   |   |
|                      | FAT ABSORPTION STUDIES                            |   |   |
|                      | KIDNEY FUNCTION STUDIES                           |   |   |
| IN VITRO STUDIES     |   |   |   |
| OTHER                |   |   |   |
| I-125                | DETECTION OF THROMBOSIS                           |   |   |
| I-131                | THYROID IMAGING                                   |   |   |
| P-32                 | EYE TUMOR LOCALIZATION                            |   |   |
| Sr-75                | PANCREAS IMAGING                                  |   |   |
| Yb-169               | CISTERNOGRAPHY                                    |   |   |
| Xe-133               | BLOOD FLOW STUDIES AND PULMONARY FUNCTION STUDIES |   |   |
| OTHER                |   |   |   |
| Tc-99m               | BRAIN IMAGING                                     |   |   |
|                      | CARDIAC IMAGING                                   | 147   |   |
|                      | THYROID IMAGING                                   |   |   |
|                      | SALIVARY GLAND IMAGING                            |   |   |
|                      | BLOOD POOL IMAGING                                |   |   |
|                      | PLACENTA LOCALIZATION                             |   |   |
|                      | LIVER AND SPLEEN IMAGING                          |   |   |
|                      | LUNG IMAGING                                      |   |   |
| BONE IMAGING         |   |   |   |
| OTHER                |   |   |   |

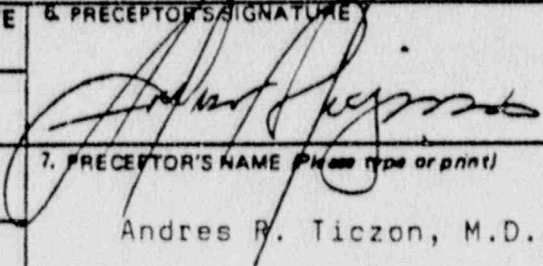


2. CLINICAL TRAINING AND EXPERIENCE OF ABOVE NAMED PHYSICIAN (Continued)

| ISOTOPE<br>A     | CONDITIONS DIAGNOSED OR TREATED<br>B  | NUMBER OF CASES INVOLVING PERSONAL PARTICIPATION<br>C | COMMENTS<br>(Additional information or comments may be submitted in duplicate on separate sheets.)<br>D |
|------------------|---|---|---|
| P-32 (Soluble)   | TREATMENT OF POLYCYTHEMIA VERA, LEUKEMIA, AND BONE METASTASES               |   |   |
| P-32 (Colloidal) | INTRACAVITARY TREATMENT   |   |   |
| I-131            | TREATMENT OF THYROID CARCINOMA  |   |   |
|                  | TREATMENT OF HYPERTHYROIDISM  |   |   |
| Au-198           | INTRACAVITARY TREATMENT   |   |   |
| Co-60 or Co-137  | INTERSTITIAL TREATMENT  |   |   |
|                  | INTRACAVITARY TREATMENT   |   |   |
| I-125 or Ir-192  | INTERSTITIAL TREATMENT  |   |   |
|                  | TELETHERAPY TREATMENT   |   |   |
| Co-60 or Co-137  | TELETHERAPY TREATMENT   |   |   |
|                  | TELETHERAPY TREATMENT   |   |   |
| Sr-90            | TREATMENT OF EYE DISEASE  |   |   |
|                  | RADIOPHARMACEUTICAL PREPARATION   |   |   |
| Mo-99/Tc-99m     | GENERATOR   |   |   |
| Sr-113/In-113m   | GENERATOR   |   |   |
| Tc-99m           | REAGENT KITS  | 11  |   |
| Other            |   |   |   |
| Tl-201 chloride  | Cardiac Perfusion studies with Thallium 201 Chloride (Resting and Exercise) | 203   |   |

3. DATES AND TOTAL NUMBER OF HOURS RECEIVED IN CLINICAL RADIOISOTOPE TRAINING  
 January 1, 1985 till Feb 28 1985  
 Nov. 1, 1985 till Dec. 31, 1985  
 March 1, 1986 till April 30, 1986  
 600 hours of Clinical Radioisotope Training.  
 Durin a 2 Years Cardiology Fellowship from 7/84 till 7/86

4. THE TRAINING AND EXPERIENCE INDICATED ABOVE WAS OBTAINED UNDER THE SUPERVISION OF:

|   |   |
|---|---|
| a. NAME OF SUPERVISOR<br>Andres R. Ticzon, M.D.,      | & PRECEPTOR'S SIGNATURE<br><br>7. PRECEPTOR'S NAME (Please type or print)<br>Andres R. Ticzon, M.D., FACP., FACC<br>8. DATE<br>September 12, 1988 |
| b. NAME OF INSTITUTION<br>St. Francis Med. Ctr.       |   |
| c. MAILING ADDRESS<br>45 <sup>th</sup> St. & Penn Ave |   |
| d. CITY<br>Pittsburgh, PA 15201                       |   |

5. MATERIALS LICENSE NUMBER(S)  
 SMMH 37-14014-01

# Health Physics Services, Inc.

Hereby certifies that

HUSSEIN M. ABOULATTA, M.D.

has satisfactorily completed the 200-hour Physician  
Training Program in Basic Radioisotope Handling

*Billy G. Bass*

Billy G. Bass, Ph.D.  
Course Director

*Larry W. Camper*

Larry W. Camper, M.S.  
Executive Vice President



AUGUST, 1988