

Mail Control Number 460718

#### EXHIBIT A

FORM NRC-313M U.S. NUCLEAR REGULATORY COMMISSION APPLICATION FOR MATERIALS LICENSE - MEDICAL 10 CFR 35 **GAO R0557** INSTRUCTIONS - Complete I terms 1 shrough 26 if this it an initial application or an application for renewal of a license. Use suppli ONG - Compare from 1 Brough 26 if this is an initial application of an application for renewal of a license. Use supplemental these where necessary. Item 26 must be completed on all applications and signed. Retain one copy. Submit original and one copy of entire application to: Director, Office of Nuclear Materials Sefety and Sefeguards, U.S. Nuclear Regulatory Commission, Washington, D.C. 20555. Upon approval of this application, the applicant will receive a Materials License. An NRC Materials License is issued in accordance with the general requirements contained in Title 10, Code of Federal Regulations, Part 30, and the Licensee is subject to Title 10, Code of Federal Regulations, Parts 19, 20 and 35 and the license fee provision of Title 10, Code of Federal Regulations, Part 170. The license fee category should be stated in I term 26 and the appropriate fee enclosed 1.8. NAME AND MAILING ADDRESS OF APPLICANT (institution, 1.6 STREET ADDRESS(ES) AT WHICH RADIOACTIVE MATERIAL firm, clinic, physician, etc. INCLUDE ZIP CODE WILL BE USED (II different from 1.4) INCLUDE ZIP CODE South Community Hospital 1001 S.W. 44th Oklahoma City, Oklahoma 73109 TELEPHONE NO .: AREA CODE (405) 636 7000 2. PERSON TO CONTACT REGARDING THIS APPLICATION 3. THIS IS AN APPLICATION FOR: (Check appropriate item) Harold C. Hart, R.T. . NEW LICENSE AMENDMENT TO LICENSE NO. 35-13127-01 Manager, Radiologic Services 7339 4. INDIVIDUAL USERS (Name individuals who will use or directly 5. RADIATION SAFETY OFFICER (RSO) (Name of person designated supervise use of radioactive material. Complete Supplements A and B as radiation safety officer. If other than individual user, complete resufor each individual.) me of training and experience as in Supplement A.J. See Attachment John D. Bush, M.D. Radiologist 6. A RADIOACTIVE MATERIAL FOR MEDICAL USE MAXIMUM DESIRED MAXIMUM POSSESSION DESIRED RADIOACTIVE MATERIAL POSSESSION ADDITIONAL ITEMS: LIMITS LISTED IN: LIMITS (In millicuries) (In millicuries) IODINE-131 AS IODIDE FOR TREATMENT 10 CFR 31.11 FOR IN VITRO STUDIES 3.0 OF HYPERTHYROIDISM 10 CFR 35, 100, SCHEDULE A, GROUP I AS NEEDED PHOSPHORUS-32 AS SOLUBLE PHOSPHATE FOR TREATMENT OF POLYCYTHEMIA VERA, LEUKEMIA AND BONE METASTASES 10 CFR 36,100, SCHEDULE A, GROUP II AS NEEDED PHOSPHORUS-32 AS COLLOIDAL CHROMIC PHOSPHATE FOR INTRACAVITARY TREAT-10 CFR 35.100, SCHEDULE A, GROUP III 2000 MENT OF MALIGNANT EFFUSIONS. GOLD-198 AS COLLOID FOR INTRA-10 CFR 35.100, SCHEDULE A, GROUP IV CAVITARY TREATMENT OF MALIGNANT AS NEEDED EFFUSIONS. IODINE-131 AS IODIDE FOR TREATMENT 10 CFR 35.100, SCHEDULE A, GROUP V AS NEEDED OF THYROID CARCINOMA XENON 133 AS GAS OR GAS IN SALINE FOR 16 CFR 35.100, SCHEDULE A, GROUP VI BLOOD FLOW STUDIES AND PULMONARY 1000 FUNCTION STUDIES 6.b. RADIOACTIVE MATERIAL FOR USES NOT LISTED IN ITEM 6.8. (Seeled source up to 3 mCi used for celibration and reference standards are authorized under Section 35.14(d), 10 CFR Part 35, and NEED NOT BE LISTED J CHEMICAL AND/OR PHYSICAL FORM MAXIMUM NUMBER OF MILLICURIES OF EACH FORM ELEMENT AND MASS NUMBER DESCRIBE PURPOSE OF USE 8704280018 861202 REG4 LIC30 35-13127-01 PDI

FORM NRC-313M (8-78

\* The nuclear Medicine Department will use only unit dose vials. Approval is therefore requested for all Group III sources except generators.

PDR

460712

#### INFORMATION REQUIRED FOR ITEMS 7 THROUGH 23

7. 1	MEDICAL ISOTOPES COMMITTEE	15	GENERAL RULES FOR THE SAFE USE OF RADIOACTIVE MATERIAL (Check One)	
X	Names and Specialties Attached; and	X		
X	Duties as in Appendix B; or (Check One)		Equivalent Rules Attached	
	Equivalent Duties Attached	15	. EMERGENCY PROCEDURES (Check One)	
8. 1	FRAINING AND EXPERIENCE	T <sub>x</sub>	Appendix H Procedures Followed; or	
X	Supplements A & B Attached for Each Individual User; and or Previous License Number		Equivalent Procedures Attached	
X	Supplement A Attached for RSO. Or Previous License Number	17. AREA SURVEY PROCEDURES (Check One)		
9. 1	NSTRUMENTATION (Check One)	X	Appendix I Procedures Followed; or	
X	Appendix C Form Attached; or		Equivalent Procedures Attached	
	List by Name and Model Number	18	, WASTE DISPOSAL (Check One)	
10.	CALIBRATION OF INSTRUMENTS	X	Appendix J Form Attached; or	
Χ	Appendix D Procedures Followed for Survey Instruments; or		Equivalent Information Attached	
	Equivalent Procedures Attached; and	19. THERAPEUTIC USE OF RADIOPHARMACEUTICALS		
X	Appendix D Procedures Followed for Dose Calibrator; or (Check One)	X	1	
	Equivalent Procedures Attached		Equivalent Procedures Attached	
11.	FACILITIES AND EQUIPMENT	20.	THERAPEUTIC USE OF SEALED SOURCES	
X	Description and Diagram Attached	X	Detailer Win Attached; and	
2.	PERSONNEL TRAINING PROGRAM		Appendix L Pro and Followed; or (Check One)	
X	Description of Training Attached	X		
	PROCEDURES FOR ORDERING AND RECEIVING RADIOACTIVE MATERIAL	21.	PROCEDURES AND PRECAUTIONS FOR USE OF RADIOACTIVE GASES (e.g., Xenon - 133)	
X	Detailed Information Attached		Detailed Information Attached N/A	
4.	PROCEDURES FOR SAFELY OPENING PACKAGES CONTAINING RADIOACTIVE MATERIALS (Check One)	22.	PROCEDURES AND PRECAUTIONS FOR USE OF RADIOACTIVE MATERIAL IN ANIMALS  Detailed Information Attached N/A	
	Appendix F Procedures Followed; or	23.	PROCEDURES AND PRECAUTIONS FOR USE OF RADIOACTIVE MATERIAL SPECIFIED IN ITEM 6.b.	
у	Equivelent Procedures Attached		Detailed Information Attached N/A	

		24. PERSONNEL MONITOR	HING DEVICES	
/Check	TYPE appropriate box)	SUPPLIER		EXCHANGE FREQUENCY
	FILM	R.S. Landauer Jr. &	Company	Monthly
BODY	TLO			
	OTHER (Specify)			
	FILM			
. FINGER	TLO	R.S. Landauer Jr. &	Company	Monthly
	OTHER (Specify)			
	FILM	b		
. WRIST	TLO			
	OTHER (Specify)			
	75	FOR PRIVATE PRACTICE ADDITION	ANTECNUS	
HOSPITAL A	GREEING TO ACCEPT F	FOR PRIVATE PRACTICE APPLIC	ANTS ONLY	
HOSPITAL A	GREEING TO ACCEPT F	FOR PRIVATE PRACTICE APPLIC PATIENTS CONTAINING RADIOACTIVE	MATERIAL LATTACH A COPY	OF THE AGREEMENT LETTER
HOSPITAL A NAME OF HO	GREEING TO ACCEPT F	FOR PRIVATE PRACTICE APPLIC PATIENTS CONTAINING RADIOACTIVE	MATERIAL  ATTACH A COPY  SIGNED BY THE	HOSPITAL ADMINISTRATOR.
NAME OF HO	GREEING TO ACCEPT F	FOR PRIVATE PRACTICE APPLICATIONS CONTAINING RADIOACTIVE	E MATERIAL  L ATTACH A COPY SIGNED BY THE P  C. WHEN REQUESTINATTACH A COPY TIONS TO BE TAK	HOSPITAL ADMINISTRATOR.  OF THERAPY PROCEDURES,  OF RADIATION SAFETY PRECAU EN AND LIST AVAIL ARE
MAILING AD	GREEING TO ACCEPT F	STATE ZIP CODE	E MATERIAL  LATTACH A COPY SIGNED BY THE PARTICLE ATTACH A COPY TIONS TO BE TAK RADIATION DETE	NG THERAPY PROCEDURES,
MAILING AD	GREEING TO ACCEPT F	ATIENTS CONTAINING RADIOACTIV	E MATERIAL  LATTACH A COPY SIGNED BY THE PARTICLE ATTACH A COPY OF TIONS TO BE TAK RADIATION DETERMINED.	HOSPITAL ADMINISTRATOR.  OF THERAPY PROCEDURES,  OF RADIATION SAFETY PRECAU EN AND LIST AVAIL ARE
MAILING AD	GREEING TO ACCEPT F SPITAL  DRESS  and any official executing h Title 10. Code of Fede	STATE ZIP CODE	E MATERIAL  LATTACH A COPY SIGNED BY THE POSITIONS TO BE TAK RADIATION DETERMINED	HOSPITAL ADMINISTRATOR.  NG THERAPY PROCEDURES,  OF RADIATION SAFETY PRECAU EN AND LIST AVAILABLE  CTION INSTRUMENTS.
MAILING AD	GREEING TO ACCEPT F SPITAL  DRESS  and any official executing h Title 10. Code of Fede	STATE ZIP CODE  26. CERTIFICATE (This item must be completed by a lithis certificate on behalf of the applicant ral Regulations, Parts 30 and 35, and that a best of our knowledge and belief.	E MATERIAL  D. ATTACH A COPY SIGNED BY THE POSITION OF THE POS	NG THERAPY PROCEDURES, OF RADIATION SAFETY PRECAU EN AND LIST AVAILABLE COTION INSTRUMENTS.  That this application is prepared in d herein, including any supplements  BAIFYING OF GICIAL (Signature)
MAILING AD  CITY  The applicance a conformity with the three of three of the three of the three of	GREEING TO ACCEPT F SPITAL  DRESS  and any official executing Title 10, Code of Fede , is true and correct to the	STATE ZIP CODE  26. CERTIFICATE (This item must be completed by a lithis certificate on behalf of the applicant ral Regulations, Parts 30 and 35, and that a best of our knowledge and belief.	E MATERIAL  b. ATTACH A COPY SIGNED BY THE POSITION OF THE POS	NG THERAPY PROCEDURES, OF RADIATION SAFETY PRECAU EN AND LIST AVAILABLE COTION INSTRUMENTS.  That this application is prepared in d herein, including any supplements  BAIFYING OF GICIAL (Signature)

#### ITEM 7. MEDICAL ISOTOPES COMMITTEE

NAME

JOHN D. BUSH, M.D.

RALPH J. CRAMER, M.D.

WILLARD ARONSON, M.D.

DAN BARNES, R.PH.

BRAD BRADSHAW

MIKE CEDENO, R.T.

JOAN BOEMISCH, R.N.

HAROLD C. HART, R.T.

JOE NEELEY

ALEXANDER P. TURNER, Ph.D.

SPECIALTY

RADIOLOGIST (CHAIRMAN)

RADIOLOGIST

PATHOLOGIST

PHARMACIST

HOSPITAL SAFETY AND SECURITY

NUCLEAR MEDICINE TECHNOLOGIST

ONCOLOGY NURSE

MANAGER, RADIOLOGIC SERVICES

EXECUTIVE VICE PRESIDENT

RADIOLOGICAL PHYSICIST

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DAVID E. ROGERS, M.D. RADIOLOGIST

JOHN D. BUSH, M.D. RADIOLOGIST

RALPH J. CRAMER, M.D. RADIOLOGIST

WILLIAM C. BRADFORD, M.D. RADIOLOGIST

KEN HARPER, M.D. RADIOLOGIST

RICHARD COOK, M.D. RADIOLOGIST

MORRIS J. WIZENBERG, M.D. RADIOTHERAPIST

JOYCE M. EISENBRAUN, M.D. RADIOLOGIST

ALEXANDER P. TURNER, Ph.D. RADIOLOGICAL PHYSICIST

#### AUTHORIZED USE

GROUPS I, II, III, IV, V and VI IN VITRO STUDIES

GROUPS I, II, III, IV, V and VI IN VITRO STUDIES

GROUPS I, II, III, IV, V and VI IN VITRO STUDIES

GROUPS I, II, III, IV, V and VI IN VITRO STUDIES

GROUPS I, II, III, IV, V and VI IN VITRO STUDIES

GROUPS I, II, III, IV, V and VI IN VITRO STUDIES

GROUP VI

GROUPS I, II, III, IV, V and VI IN VITRO STUDIES

GROUP VI SEALED SOURCES INSTRUMENT CALIBRATION

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## ITEM 8. TRAINING AND EXPERIENCE

### PREVIOUS LICENSE

NAME	AGENCY	NUMBER
DAVID E. ROGERS, M.D.	USNRC	35-13127-01
JOHN D. BUSH, M.D.	USNRC	35-13127-01
RALPH J. CRAMER, M.D.	USNRC	35-13127-01
WILLIAM C. BRADFORD, M.D.	SEE SUPPLEMENTS A&B	
KEN HARPER, M.D.	USNRC	35-07018-02
RICHARD COOK, M.D.	SEE SUPPLEMENTS A&B	
MORRIS J. WIZENBERG, M.D.	USNRC	35-13127-01
JOYCE M. EISENBRAUN, M.D.	USNRC	35-07018-02
ALEXANDER P. TURNER, Ph.D.	USNRC	35-07018-02

Item 8. 8-28-86

8-28-86

(8-78)

## TRAINING AND EXPERIENCE

	AUTHOR		SER OR RADIATION S		R	
1. NAME	DF AUTHORIZED USER O			2. STATE OR TERRITORY IN WHICH LICENSED TO PRACTICE MEDICINE Oklahoma		
			3. CERTIFICATION		OKTAHOM	d
	SPECIALTY BOARD		CATEGO	RY	MONTH AND Y	YEAR CERTIFIED
American College of Radiology		Diagnostic Radiology		1982		
	4. TRAININ	IG RECEN	VED IN BASIC RADIOISOT	OPE HANDLING TE	CHNIQUES	
					TYPE AND LEN	GTH OF TRAINING
	FIELD OF TRAINING		LOCATION AND DATE	S) OF TRAINING	LECTURE/ LABORATORY COURSES (Hours)	SUPERVISED
a. RADIATION PHYSICS AND INSTRUMENTATION		Univ. Okla. Health Sciences Center Radiology Residency		30	86	
b. RA	b. RADIATION PROTECTION		July 1978 - June 1982 Nuclear Medicine October 1 - December 3 1978		5	35
TH	THEMATICS PERTAINING E USE AND MEASUREMEN RADIOACTIVITY	S TO NT	"	"	10	15
d. RA	DIATION BIOLOGY		"	и	15	30 .
e. RA CH	DIOPHARMACEUTICAL EMISTRY		"	"	10	25
	5, EXPERIENCE	E WITH RA	ADIATION. (Actual use of Re	adioisotopes or Equi	ivalent Experienc	e)
ISOTOPE	MAXIMUM AMOUNT		EXPERIENCE WAS GAINED	DURATION OF EX		TYPE OF USE
99MO 99mTc 131 I 201 T1 133 Xe 32 P	2 Curies 1.7 Curies 200mCi 3mCi 20mCi 15mCi	Cente Hospi Okla.	Okla. Health Sci r, Okla. Memorial tal, V.A.H., Okla Childrens Hospit Nuclear Pharmacy	ences Three City Nucle	weeks ar Med.	Diagnostic & Therapeutic
						arm o

## U. S. NUCLEAR REGULATORY COMMISSION

### 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.

experience, obtain a separate sta	Tement Trom cach.	TO COLUMN C
1. APPLICANT PHYSICIAN'S NA	ME AND ADDRESS	KEY TO COLUMN C PERSONAL PARTICIPATION SHOULD CONSIST OF:
FULL NAME William C. Bradf		<ol> <li>Supervised examination of patients to determine the suitability for radioisotope diagnosis and/or treatment and recommendation for prescribed dosage.</li> </ol>
Mercy Hospital, Der 4300 West Memorial	ot. of Radiology	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.
Okalhoma City	OK 73120	3-Adequate period of training to enable physician patients and follow patients through diagnosis and/or course of treatment.

	2. CLINICAL TRAINING AND		3072111111111111111111111111111111111111
SOTOPE	CONDITIONS DIAGNOSED OR TREATED	NUMBER OF CASES INVOLVING PERSONAL PARTICIPATION C	(Additional information or comments may be submitted in duplicate on separate sheets.)
	DIAGNOSIS OF THYROID FUNCTION	35	
	DETERMINATION OF BLOOD AND BLOOD PLASMA VOLUME	4	
1-131	LIVER FUNCTION STUDIES	0	
or 1-125	FAT ABSORPTION STUDIES	0	
	KIDNEY FUNCTION STUDIES	47	
	IN VITRO STUDIES	1950	
OTHER			
1-125	DETECTION OF THROMBOSIS	0	
1-131	THYROID IMAGING	52	
P-32	EYE TUMOR LOCALIZATION	0	
Se- 75	PANCREAS IMAGING	0	
Yb-169	CISTERNOGRAPHY	2	
Xe-133	BLOOD FLOW STUDIES AND PULMONARY FUNCTION STUDIES	7	
ОТНЕЯ			
	BRAIN IMAGING	47	
	CARDIAC IMAGING	25	
	THYROID IMAGING	7	
	SALIVARY GLAND IMAGING	1	
Tc-99m	BLOOD POOL IMAGING	47	
	PLACENTA LOCALIZATION	0	
	LIVER AND SPLEEN IMAGING	, 148	
	LUNG IMAGING	45	-
1	BONE IMAGING	81	Ikm 8 8-2 <b>8</b> -86

#### PRECEPTOR STATEMENT (Continued)

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

STOPE	CONDITIONS DIAGNOSED OR TREATED	NUMBER OF CASES INVOLVING PERSONAL PARTICIPATION	COMMENTS [Additional information or comments may be submitted in duplicate on separate sheets,]
A	8	c '	D
P-32 (Sahu 24)	TREATMENT OF POLYCYTHEMIA VERA, LEUKEMIA, AND BONE METASTASES	1	
P.32 (Coloidal)	INTRACAVITARY TREATMENT	3	
1-131	TREATMENT OF THYROID CARCINOMA	3	
1-131	TREATMENT OF HYPERTHYROIDISM	8	
Au-193	INTRACAVITARY TREATMENT		
C 0-60	INTERSTITIAL TREATMENT	0	
Or C+137	INTRACAVITARY TREATMENT	0	
1-125 or 1r-192	INTERSTITIAL TREATMENT	0	
C>50 or C+137	TELETHERAPY TREATMENT	0	
5-90	TREATMENT OF EYE DISEASE	0	
	RADIOPHARMACEUTICAL PREPARATION		
Mo-99/ Tc-99m	GENERATOR	0.4Ci	
Sn-113/ In-113m	GENERATOR	0	
To-99m	REAGENT KITS	5 kits	
0501			

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

October 1 - December 31, 1978 540 hours

4. THE TRAINING AND EXPERIENCE INDICATED WAS OBTAINED UNDER THE SUPERVISION OF	
E. William Allen, M.D.	gamalla mo
University of Olka. Health So	
P.O.Box 26901	E. William Allen, M.D.
Oklahoma City, OK. 73190	8. DATE
35-16329-01, 35-16329-02	8/17/82

PONY NAC-313M-SUPPLEMENT B

Paper!

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#### FORM NRC-313M-SUPPLEMENT A

U.S. NUCLEAR REGULATORY COMMISSION

(8-78)

## TRAINING AND EXPERIENCE AUTHORIZED USER OR RADIATION SAFETY OFFICER

1. NAME OF AUTHORIZED USER OR RADIATION SAFETY OFFICER
Richard Cook, M.D.

2. STATE OR TERRITORY IN WHICH LICENSED TO PRACTICE MEDICINE

SPECIALTY BOARD	CATEGORY	MONTH AND YEAR CERTIFIED
American College of Radiology	General Radiology	June 1986

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

		TYPE AND LENGTH OF TRAINING		
FIELD OF TRAINING	LOCATION AND DATE(S) OF TRAINING	LECTURE/ LABORATORY COURSES (Hours) C	SUPERVISEC LABORATORY EXPERIENCE (Hours)	
RADIATION PHYSICS AND INSTRUMENTATION	Univ of Oklahoma Health Sciences Center Dept of Radiolgoical	60	50	
b. RADIATION PROTECTION	Sciences	8	30	
c. MATHEMATICS PERTAINING TO THE USE AND MEASUREMENT OF RADIOACTIVITY	п	10	10	
d. RADIATION BIOLOGY	п	12	20	
e. RADIOPHARMACEUTICAL CHEMISTRY	п	10	20	

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

ISOTOPE	MAXIMUM AMOUNT	WHERE EXPERIENCE WAS GAINED	DURATION OF EXPERIENCE	TYPE OF USE
99mTc 99Mo 131 I 201 Tl 133 Xe	1.7 Ci 2.0 Ci 200 mCi 3 mCi 20 mCi	University of OK Health Sciences Ctr V.A. Medical Center OK Teaching Hospital & Nuclear Pharmacy	Six months	Diagnostic & Therapeutic
32 P 169 Yb 67 Ga	15 mCi 0.5 mCi 5 mCi			Item & 8-28-86

#### 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

Richard Cook, M.D. Radiology Associates

STREET ADDRESS

Mercy Health Center 4300 West Memorial Rd

Oklahoma City

OK 73120

#### 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

SOTOPE	CONDITIONS DIAGNOSED OR TREATED	NUMBER OF CASES IN VOLVING PERSONAL PARTICIPATION C	COMMENTS (Additional information or comments (nay be submitted in duplicate on separate sheets.)
	DIAGNOSIS OF THYROID FUNCTION	21	
	DETERMINATION OF BLOOD AND BLOOD PLASMA VOLUME	2	
I-131	LIVER FUNCTION STUDIES	-	
or I-125	FAT ABSORPTION STUDIES	-	
	KIDNEY FUNCTION STUDIES	24	
	IN VITRO STUDIES	-	
OTHER		-	
1-125	DETECTION OF THROMBOSIS	-	
I-131	THYROID IMAGING	18	
P-32	EYE TUMOR LOCALIZATION	-	
Se-75	PANCREAS IMAGING	-	
Yb-169	CISTERNOGRAPHY	3	
Xe-133	BLOOD FLOW STUDIES AND PULMONARY FUNCTION STUDIES	0	
OTHER			
	BRAIN IMAGING	5	
	CARDIAC IMAGING	142	
	THYROID IMAGING	15	
	SALIVARY GLAND IMAGING		
Tc-99m	BLOOD POOL IMAGING	53	
	PLACENTA LOCALIZATION	-	
	LIVER AND SPLEEN IMAGING	39	
	LUNG IMAGING	30	
	BONE IMAGING	117	Item 8 8-28-8
OTHER	201 Tl Myocardial Perfu	sion 8	0-28-80

#### PRECEPTOR STATEMENT (Continued)

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

ISOTOPE	CONDITIONS DIAGNOSED OR TREATED	NUMBER OF CASES INVOLVING PERSONAL PARTICIPATION	COMMENTS  (Additional information or comments may be submitted in duplicate on separate sheets,)		
A	8	C	0		
P-32 (Soluble)	TREATMENT OF POLYCYTHEMIA VERA, LEUKEMIA, AND BONE METASTASES	2	#1. A 99mTc generator was		
P-32 (Colloidal)	INTRACAVITARY TREATMENT	1	eluted 10 times and on each elution the eluate		
1-131	TREATMENT OF THYROID CARCINOMA	7	was measured for 99mTc activity and 99Mo contam-		
. , , ,	TREATMENT OF HYPERTHYROIDISM	5	ination.		
Au-198	INTRACAVITARY TREATMENT				
Co-60	INTERSTITIAL TREATMENT		40 5.		
Cs-137	INTRACAVITARY TREATMENT		#2. Five types of kits were prepared including, MDP.		
1-125 or 1r-192	INTERSTITIAL TREATMENT		Tc <sub>2</sub> -S <sub>7</sub> , MAA, Pyrophosphat and DTPA. For each kit		
Co-60 or Cs-137	TELETHERAPY TREATMENT		the amount of activity was measured and the		
Sr-90	TREATMENT OF EYE DISEASE		Q.C. for each preparation		
	RADIOPHARMACEUTICAL PREPARATION		was evaluated.		
Mo-99/ Tc-99m	GENERATOR	See #1			
Sn-113/ In-113m	GENERATOR				
Tc-99m	REAGENT KITS	See #2			
Other					

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

Nuclear Medicine Training occurred from January 1, 1984 to May 31, 1985 and from December 1, 1985 through March 31, 1986 and was part of Radiology Residence from July 1, 1982 to June 30, 198 Total number of hours in excess of 1000 hours.

4.	THE	TRAINING	AND	EX	PERI	ENCE	INDICAT	ED	ABOVE
	WAS	OBTAINED	UND	ER	THE	SUPE	RVISION	OF:	

A NAME OF SUPERVISOR

E. W. Allen, M.D.

A NAME OF INSTITUTION

University of OK H.S.C.

c. MAILING ADDRESS

p.o. Box 26901

d CITY

Oklahoma City, OK 73190

5. MATERIALS LICENSE NUMBERIS

35-21395-01 OK Teaching Hospitals

& PRECEPTOR'S SIGNATURE

Coll allen 81 K

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

E. W. Allen, M.D.

8. DATE

19 August 1986

FORM NRC 313M-SUPPLEMENT 8

119-

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3.

#### APPENDIX C

#### INSTRUMENTATION

a. 1	Manufacturer's name: Nuclear (	Chicago			
,	Manufacturer's model number: 265	50			
,	Number of instruments available: 1				
	Minimum range: mR	/hr to	mR/hr		
- 4	Maximum range: 0 mR,	/hr to	mR/hr		
b. A	Manufacturer's name: _ Fherline				
	Manufacturer's model number: ESP-	1 (Probes: HP-	270; HP-2	10 AL)	
	lumber of instruments available: 1				
	linimum range: 0 (background)		mR/hr	Probe HP	-270
	faximum range: 0 (background)			Probe HP	210 41
Dose ca	librator				
Manufac	cturer's name: Syncor (Car	pintec)			
Manufac	cturer's name: Syncor (Cap			Line was a second of the second	
Manufac	Syncor (Cap			Line was a second of the second	
Manufac Manufac Number	cturer's name: Syncor (Cap			Line was a second of the second	
Manufac Manufac Number	cturer's name: Syncor (Capeturer's model number: CRC-7 of instruments available: 1	Manufacturer'		Line was a second of the second	
Manufac Manufac Number Instrume	cturer's name: Syncor (Cap cturer's model number: CRC-7 of instruments available: 1 ents used for diagnostic procedures	Manufacturer' Name		Line was a second or the second	Model No.
Manufac Manufac Number Instrume Type of Analy	cturer's name: Syncor (Cap cturer's model number: CRC-7 of instruments available: 1 ents used for diagnostic procedures Instrument vzer/Scaler	Manufacturer'		Line was a second or the second	
Manuface Number Instrument Type of Anally Dual	cturer's name: Syncor (Cap cturer's model number: CRC-7 of instruments available: 1 ents used for diagnostic procedures	Manufacturer' Name Searle		Line was a second or the second	Model No. 8725
Manuface Number Instrume Type of Analy Dual Renal Scint	cturer's name: Syncor (Cap cturer's model number: CRC-7  of instruments available: 1  ents used for diagnostic procedures  Instrument // Zer/Scaler Scintillation Probe with tron IV  cillation Well	Manufacturer' Name Searle Searle		Line was a second or the second	Model No. 8725 1710
Manuface Number Instrume Type of Analy Dual Renal Scint Recti	cturer's name: Syncor (Cap cturer's model number: CRC-7  of instruments available: 1  ents used for diagnostic procedures  Instrument vzer/Scaler Scintillation Probe with tron IV illation Well nlinear Scanner	Manufacturer' Name Searle		Line was a second or the second	Model No. 8725 1710 D S 202(V)
Manuface Number Instrume Type of Analy Dual Renal Scint Recti Scint	cturer's name: Syncor (Cap cturer's model number: CRC-7  of instruments available: 1  ents used for diagnostic procedures  Instrument vzer/Scaler Scintillation Probe with tron IV  cillation Well nlinear Scanner cillation Camera	Manufacturer' Name Searle Searle Searle		Line was a second or the second	Model No. 8725 1710 D S 202(V) 1746
Manuface Number Instrume Type of Analy Dual Renal Scint Recti Scint Scint	cturer's name: Syncor (Cap cturer's model number: CRC-7  of instruments available: 1  ents used for diagnostic procedures  Instrument vzer/Scaler Scintillation Probe with tron IV illation Well nlinear Scanner	Manufacturer' Name Searle Searle Searle Searle Searle Searle General El	•	Line was a second or the second	Model No. 8725 1710 D S 202(V)

## APPENDIX D CALIBRATION OF DOSE CALIBRATOR

First elutio	n from new Mo-99/Tc-99m genera	ntor	
	or		
X Other* (spe	cify) Unit Dose Tc-99m	Vial (∽100mCi)	
ources Used for Instrume	nt Accuracy and Constancy Tests		
adionuclide	Suggested Activity (mCi)	Activity (mCi)	Accuracy
Co-57	3-5	5.41 (4-28-86)	-3.9%
Ba-133	0.1-0.5	0.284 (8-1-85)	±5.0%
Cs-137	0.1-0.2	0.161 (4-28-86)	±3.9%
Ra-226	1-2		
X The proced	ures described in Section 2 of App	pendix D will be used for calibration	on of the dose cali
	or		
Equivalent	procedures are attached.		

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<sup>\*</sup>For licensees who are not authorized for Mo-99/Tc-99m generators, activity must be equivalent to the highest activity used.

#### APPENDIX D

#### CALIBRATION OF SURVEY INSTRUMENTS

Check appro	priate items.	
_X1.	Survey instrument	ts will be calibrated at least annually and following repair.
_X 2.	Calibration will be to 1 R/hr.	performed at two points on each scale used for radiation protection purposes, i.e., at least up
	calibrated when the checked. Readings is prepared, attach	Il be approximately 1/3 and 2/3 of full scale. A survey instrument may be considered properly the instrument readings are within ± 10 percent of the calculated or known values for each point to within ± 20 percent are considered acceptable if a calibration chart, graph, or response factor need to the instrument, and used to interpret readings to within ± 10 percent. Also, when higher ecked or calibrated, an appropriate precautionary note will be posted on the instrument.
3.	Survey instrument	s will be calibrated
	a. By the manu	facturer
X	b. At the licens	ee's facility
	(1) Calibra	ation source
	Model	no. SM 6B6G-LI  y in millicuries 114,2 mg.Ra.eq. Cs-137 Total (2-24-77)
	Exposi	or ure rate at a specified distance
	Tracea	bility to primary standard Yes
X	(2) The ca	libration procedures in Section I of Appendix D will be used
	(3) The ste	ep-by-step procedures, including radiation safety procedures, are attached.
	c. By a consulta	ant or outside firm
	(1) Name	
	(2) Location	on
	(3) Proced	ures and sources
		have been approved by NRC and are on file in License No.
	-	have been approved by an Agreement State; a copy of the Agreement State license, the procedures, and a description of the sources are attached, and the consultant's report will contain the information on
		the attached "Certificate of Instrument Calibration."the consultant's reporting form as attached.
		are described in the attachment, and the consultant's report will contain the information on
		the attached "Certificate of Instrument Calibration." the consultant's reporting form as attached.
4.	Calibration o	f survey instruments will be performed by, or under the super-
5.	Calibration o sealed source	xander P. Tuner, Ph.D.  f survey instruments will be performed in the brachytherapy storage safe room within the Radiation Therapy Department. This
6.	is a concruit	r calibrating leak test instruments are attached. Item 10.

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#### ITEM 10. LEAK TESTS OF SEALED SOURCES

#### 1. Instrumentation

- a. Eberline: Meter- Model ESP-1

  Thin window pancake GM detector-Model HP 210 AL Sample holder- Model SH-4A
- c. Range: Beta and gamma range-background to 100,000 cps with 5% or better standard deviation over 14 cps to 100,000 cps range.
- d. Detectable activity: greater than lx10-4 uCi
- 2. Calibrating and standardizing procedures
  - a. Bkg.- A background reading will be determined for the instrument.
  - b. Inst. Rdg. Std.- A calibrated check source will be used to calibrate the instrument prior to each leak test measurement. The activity of the check source (ACi Std.) will be decay corrected to the day of use. The check source will be placed in the sample holder and a reading taken.
  - c. Inst. Rdg. Swipe- The swipe will be placed in the sample holder and a reading taken.
  - d. Activity of swipe (uCi Swipe) Calculated by the following

#### 3. Smear Tests

- a. Nuclear Associates Decon Swipes Model 03-204 will be used for taking smears.
- b. Long forceps will be used to hold Swipe and rub it against the surface of the source, or on the nearest accessible surface to the source.
- c. Tweezers will be used to transfer the swipe from the end of the forceps to an aluminum planchet for counting.

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- d. In the event a Swipe contains an activity which cannot be disposed of as normal trash, the Swipe will be held in the hot lab for disposal as radioactive waste.
- 4. Person leak testing sealed sources.

Alexander P. Turner, Ph.D., will take and evaluate smear tests. His training and experience is listed in Item 4 of this application.

### ITEM 11. FACILITIES AND EQUIPMENT

Nuclear Medicine Room #1 (864)

Searle Pho Gamma IV Scintillation Camera Exhaust vent available for Tc-99 ventillation studies

Nuclear Medicine Room #2 (867)

G.E. Model 440 Scintillation Camera

Nuclear Medicine Room #3 (868)

Searle Model 1710 Dual Scintillation Probe with Renaltron IV Searle Model 1746 Rectilinear Scanner

Laboratory (870)

Low level lab and storage for short half life waste (behind lead bricks) Refrigerator for storage of radiopharmaceuticals

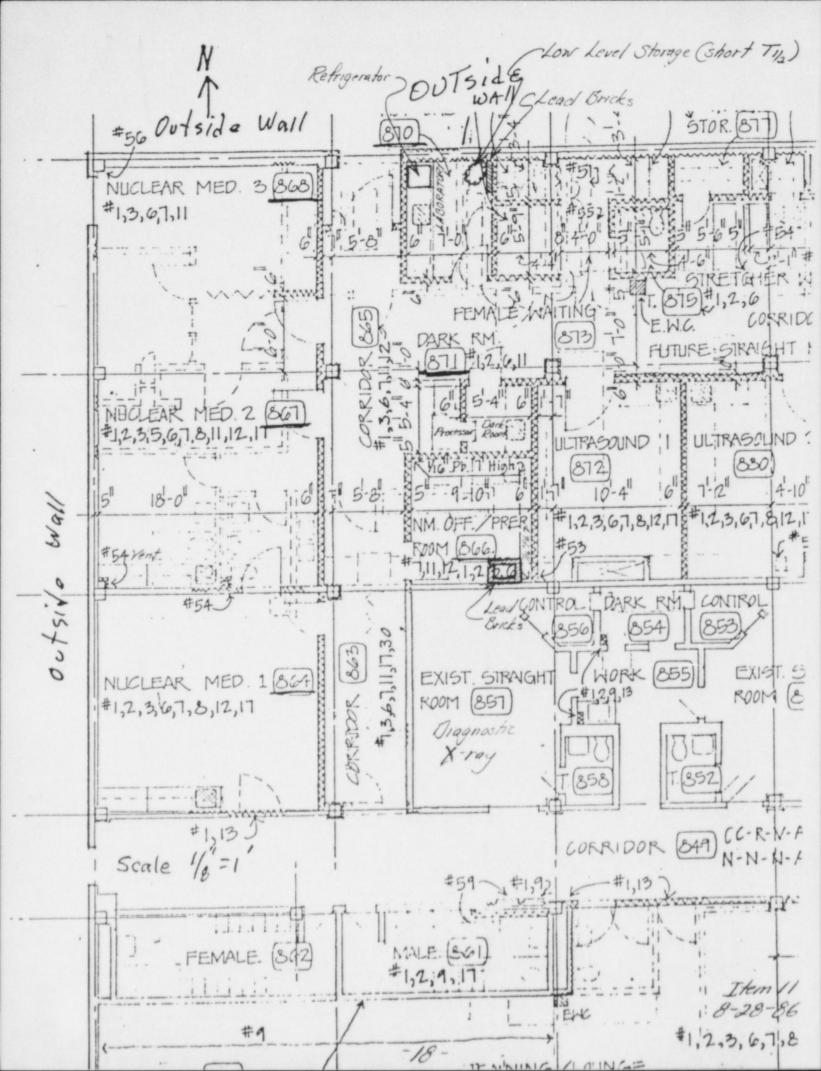
Nuclear Medicine Office/Prep. (866)

Syncor Dose Calibrator
Storage of non-refrigerated radiopharmaceutical and dose calibrator
Calibration sources (behind lead bricks)
Preparation and dispensing of Group III radiopharmaceuticals (behind lead bricks)

Brachytherapy Source Storage (WO-13)

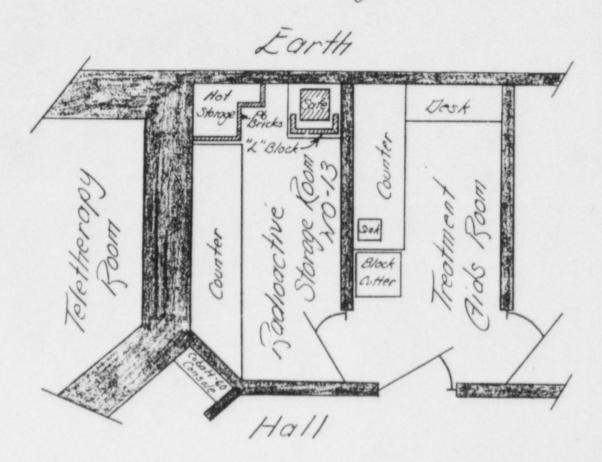
Radioactive waste storage (behind lead bricks) Brachytherapy source storage (in safe)

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Brachytheropy Source Storage

Basement Level - South Community Hospital
in Radiotheropy Department



Scale 14"=1"

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### ITEM 12. PERSONNEL TRAINING PROGRAM

We will establish and implement the training program that was published in Item 12 beginning on page 6 of Regulatory Guide 10.8, Revision 1.

Personnel	Method of Training	Frequency	Subject Matter
Technologists Oncology Nurses Housekeeping Security Clerical **	Written and / or lecture *	Note #1 Note #1 Note #1 Note #1	Note #1 Note #1 Note #1 Note #1

<sup>\*</sup> Video tape and / or lectures

Note #1 Refer to Regulatory Guide 10.8, Revision 1.

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<sup>\*\*</sup> If work requires access to restricted areas

#### ITEM 13. PROCEDURES FOR ORDERING AND RECEIVING RADIOACTIVE MATERIAL

- The Nuclear Medicine Technologist will place all orders for radioactive materials and will ensure that the requested materials and quantities are authorized by the license and that possession limits are not exceeded.
- 2. The system for ordering and receiving radioactive materials will consist minimally of the following:
  - a. Ordering of routinely used materials (diagnostic quantities)
    - (1) Unit dose vials will be ordered from the Nuclear Pharmacy.
    - (2) Written records that identify the isotope, compound, activity and supplier will be kept on all shipments.
  - b. Ordering of specially used materials (therapeutic quantities)
    - (1) A written request will be obtained from the physician who will perform the procedure.
    - (2) The physician's request will indicate isotope, compound and activity.
    - (3) Written records that identify the isotope, compound, activity and supplier will be kept on all shipments.
    - (4) Unit dose vials will be ordered from the Nuclear Pharmacy.
- All unit dose vials will be delivered during working hours and will be delivered directly to the Nuclear Medicine Department.

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## PROCEDURES FOR SAFELY OPENING PACKAGES CONTAINING RADIOACTIVE MATERIAL

- Special requirements will be followed for packages containing quantities of radioactive material in excess of the Type A quantity limits as specified in paragraphs 20, 205(a)(1) and (c)(1) of 10 CFR Part 20 (more than 20 Ci for Mo-99 and Tc-99m). They will be monitored for surface contamination and external radiation levels within 3 hours after receipt if received during working hours or within 18 hours if received after working hours, in accordance with the requirements of paragraphs 20, 205(a) through (c). All shipments of liquids greater than exempt quantities will be tested for leakage. The NRC Regional Office will be notified in accordance with the regulations if removable contamination exceeds 0.01 µCi/100 cm2 or if external radiation levels exceed 200 mR/hr at the package surface or 10 mR/hr at 3 feet (or 1 m).
- For all packages, the following additional procedures for opening packages will be carried out:
  - a. Put on gloves to prevent hand contamination.
  - Visually inspect package for any sign of damage (e.g., wetness, crushed). If damage is noted, stop procedure and notify Radiation Safety Officer.
  - c. Measure exposure rate at 3 feet (or 1 m) from package surface and record. If >10 mR/hr, stop procedure and notify Radiation Safety Officer.
  - Measure surface exposure rate and record. If > 200 mR/hr, stop procedure and notify Radiation Safety Officer.
  - e. Open the package with the following precautionary steps:
    - Open the outer package (following manufacturer's directions, if supplied) and remove packing slip.

- (2) Open inner package and verify that contents agree with those on packing slip. Compare requisition, packing slip, and label on bottle.
- (3) Check integrity of final source container (i.e., inspect for breakage of seals or vials, loss of liquid, and discoloration of packaging material).
- (4) Check also that shipment does not exceed possession limits.
- f. Wipe external surface of final source container and remove wipe to low background area. Assay the wipe and record amount of removable radioactivity (e.g., μCi/100 cm², etc.). Check wipes with a thin-end-window G-M survey meter, and take precautions against the spread of contamination as necessary.
- g. Monitor the packing material and packages for contamination before discarding.
  - (1) If contaminated, treat as radioactive waste.
  - (2) If not contaminated, obliterate radiation labels before discarding in regular trash.
- Maintain records of the results of checking each package, using "Radioactive Shipment Receipt Record" (see next page) or a form containing the same information.

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In the case of special orders (e.g., therapy doses), also compare with physician's written request.

<sup>4.</sup> Unit dose vials received from a local radiopharmacy will be surveyed the day of receipt and before use. The surface exposure rate will be measured in mR/hr (action level: ➤ 200 mR/hr). A wipe of the outer package and of the source container will be made to determine removable activity (action level: 22 dpm/cm² net). If either action level is exceeded, or the shipment appears damaged, the Radiation Safety Officer will be immediately notified. The dose slips will be checked for patient name, radiopharmaceutical, and activity. Gloves will be used to prevent hand contamination. A record will be maintained of the exposure rate and wipe tests.

#### ITEM 17. AREA SURVEY PROCEDURES

- Laboratory areas where only small quantities of radioactive material are used (less than 200 μCi) will be surveyed monthly.
- Waste storage, elution, preparation and injection areas will be surveyed weekly.
- 3. The weekly and monthly surveys will consist of:
  - a. Measurement of radiation levels with a survey meter
  - b. Wipe tests to measure contamination levels.
- 4. A permanent record will be kept of survey results. The record will include:
  - a. Date, area surveyed and initials of technologist conducting the survey.
  - b. Exposure rates measured with survey meter in areas identified in 4 (a).
  - c. Detected contamination levels in areas identified in 4 (a).
  - d. Corrective actiontaken in case of contamination or excessive exposure rates, reduced contamination levels or exposure rates after corrective action, and any appropriate comments.
- 5. Corrective action will be initiated if contamination levels exceeds 200 dpm / 100cm<sup>2</sup> and/or if exposure rate levels exceeds 2 m R/hr.

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#### APPENDIX J

#### WASTE DISPOSAL

Note: In view of the recent problems with shallow-land burial sites used by commercial waste disposal firms, NRC is encouraging its licensees to reduce the volume of wastes sent to these facilities. Important steps in volume reduction are to segregate radioactive from nonradioactive waste, to hold short-lived radioactive waste for decay in storage, and to release certain materials in the sanitary sewer in accordance with § 20.303 of 10 CFR Part 20.

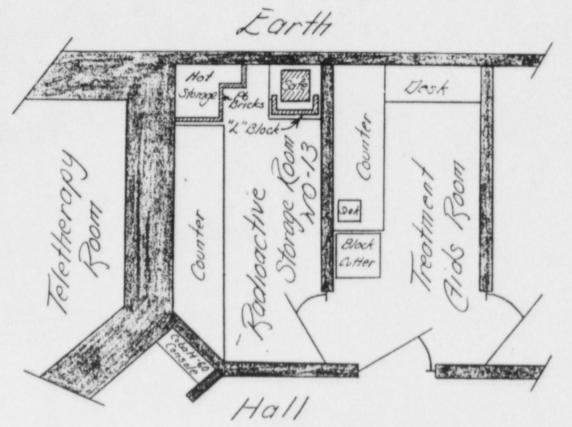
1.	Liquid waste will be disposed of (check as appropriate)		Disposed of by commercial waste disposal serv-
	In the sanitary sewer system in accordance with		ice (see also Item 4 below).
	§ 20.303 of 10 CFR Part 20.	_	Other(specify): Not applicable
_	By commercial waste disposal service (see also Item 4 below).		
	Other (specify):	* 3. Othe	er solid waste will be (check as appropriate)
		X	Held for decay* until radiation levels, as measured in a low background area with a low-level
2.	Mo-99/Tc-99m generators will be (check as appropriate)		survey meter and with all shielding removed, have reached background levels. All radiation labels will be removed or obliterated, and the waste
_	Returned to the manufacturer for disposal.		will be disposed of in normal trash.
	Held for decay* until radiation levels, as mea- sured in a low background area with a low-level		Disposed of by commercial waste disposal service (see also Item 4 below).
	survey meter and with all shielding removed, have reached background levels. All radiation labels		Other (specify):
	will be removed or obliterated, and the generators will be disposed of as normal trash.**		
that	Se sure that waste storage areas were described in Item 11 and hey are surveyed periodically (Item 17).		commercial waste disposal service used will be
			pplicable
nants.	hese generators may contain long-lived radioisotopic contami- Therefore, the generator columns will be segregated so that may be monitored separately to ensure decay to background	(Name)	(City, State)
tevels	prior to disposal.	NRC/Agree	ment State License No.

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a. Brachytheropy Source Storage

Basement Level - South Community Hospital
in Rodrotheropy Department



Teletheropy Room and Radioactive Storage Rooms are Restricted All other areas are Unrestricted. Radioactive Storage Room is locked when not in use.

3. Teletheropy Room =0.1 mR/hr

4. Treatment Gids Room O. \_ mR/hr

5. Hall (Co-60 Console) =0.1 mR/hr Wedander

Survey Mekr: Eberline ESP-1, # 686 GM Dekelor HP-270, #604698

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## THERAPEUTIC USE OF SEALED SOURCES (continued)

- b. Sealed sources are handled with long forceps. Personnel handling sources stand behind the "L" block shield and view the sources through the shielded window in the "L" block.
- c. Radiation doses to the extemities of personnel handling sealed sources are monitored with a finger TLD badge.
- d. Sealed sources are transported between the storage site and place of use in a lead pig designed for this purpose.
- e. & f. An inventory book is maintained for source accountability. The following are included: list of sources in inventory, dates of source removal and return, initials of person(s) removing and returning sources, sources removed, patient name, type of implant, inventory source count after source removal, inventory source count after source return, and record of patient's room survey during and upon completion of implant. An inventory of all sealed sources will be done quarterly. Record of inventory will be made in the inventory book.

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## g.) RADIATION SAFETY PROCEDURES FOR THERAPEUTIC USE OF SEALED SOURCES.

- All patients treated with brachytherapy sources will be placed in a private room that has a toilet.
- The patient's room will be properly posted or attended in accordance with §§ 20, 203 or 20, 204 of 10 CFR Part 20.
- 3. Surveys of the patient's room and surrounding areas will be conducted as soon as practicable after sources are implanted. Exposure rate measurements will be taken at 3 feet (or 1 m) from the patient with sources implanted, at the patient's bedside, at 3 feet (or 1 m) from the bed, and at the entrance to the room. The Radiation Safety Officer or his designee will then determine how long a person may remain at these positions and will post these times and the exposure rate at 3 feet (or 1 m) from the patient on the patient's chart.
- Immediately after sources are implanted, the form "Nursing Instructions for Patients Treated with Brachytherapy Sources" will be completed and attached to the patient's chart.
- Radiation levels in unrestricted areas will be maintained less than the limits specified in paragraphs 20.105(b)(1) and (b)(2) of 10 CFR Part 20.
- 6. Nurses caring for brachytherapy patients nay be assigned film or TLD hadges. TLD finger badges mayalso be assigned to nurses who must provide extended personal care to the patient. Pocket dosimeters may be assigned in addition to a film or TLD badge.
- 7. At the conclusion of treatment, a survey will be performed in accordance with paragraph 35.14(b)(5)(vii) of 10 CFR Part 35 to ensure that all sources other than permanent implants have been removed from the patient and that no sources remain in the patient's room or in any other area occupied by the patient. At the same time, all radiation signs will be removed and all film and TLD badges assigned to nurses will be collected. If the patient is to be discharged, the final survey will also include a notation on the patient's chart that the activity remaining in the patient meets conditions for release from the hospital.
- 8. Instructions to Nurses
  - a. Special restrictions may be noted on the precaution sheet on the patient's chart. Nurses should read these instructions before administering to the patient. The Radiation Safety Officer should

De sure to submit complete responses to Items 20s through 20f in addition to referencing procedures in Appendix L.

- be contacted to answer any questions about the care of these patients in regard to radiation safety precautions.
- b. Nurses should spend only the minimum time necessary near a patient for routine nursing care. Obtain and wear a film or TLD badge or a pocket chamber as instructed by the Radiation Safety Officer.
- c. When a nurse is assigned to a therapy patient, a film or TLD badge should be obtained (if indicated) from the Radiation Safety Officer or his designee. The badge shall be worn only by the nurse to whom it is issued and shall not be exchanged among nurses.
- Pregnant nurses should not be assigned to the personal care of these patients.
- e. Never touch needles, capsules, or containers holding brachytherapy sources. If a source becomes
  dislodged, use long forceps and put it in the
  corner of the room or in the shielded container
  provided; contact Radiation Therapy, the Radiation Safety Officer, or the Nuclear Medicine
  Department at once.
- Bed bath given by the nurse should be omitted while the sources are in place.
- g. Perineal care is not given during gynecologic treatment; the perineal pad may be changed when necessary unless orders to the contrary have been written.
- h. Surgical dressings and bandages used to cover the area of needle insertion may be changed only by the attending physician or radiologist and MAY NOT BE DISCARDED until directed by the radiologist. Dressings should be kept in a basin until checked by the Radiation Safety Officer or his designee.
  - Special orders will be written for oral hygiene for patients with oral implants.
- No special precautions are needed for sputum, urine, vomitus, stools, dishes, instruments, or utensils unless specifically ordered, but these items should be saved for a check with a radiation survey meter to ensure that no sources have been inadvertently displaced into them.

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- All bed linens must be checked with a radiation survey meter before being removed from the patient's room to ensure that no dislodged sources are inadvertently removed.
- k. These patients must stay in bed unless orders to the contrary are written. In any event, patients will remain in their assigned rooms during the treatment period.
- Visitors will be limited to those 18 years of age or over unless other instructions are noted on the precaution sheet on the patient's chart.
- m. Visitors should sit at least 3 feet (or 1 m) from the patient and should remain no longer than the time specified on the form posted on the patient's door and on his chart.
- n. No nurse, visitor, or attendant who is pregnant should be permitted in the room of a patient while brachytherapy sources are implanted in the patient. Female visitors should be asked whether they are pregnant.

- o. Emergency Procedures
  - (1) If an implanted source becomes loose or separated from the patient, or
  - (2) If the patient dies, or

3)	If the patient requires emergency immediately call	surgery,
	Telephone No. (days)	

(nights)

p. At the conclusion of treatment, call the Radiation Safety Officer to (1) survey the patient and room, (2) count the radiation sources to be sure that all temporary implants have been removed prior to discharging the patient, and (3) record a summary of the final survey results on the patient's chart. If any permanent implants are to remain in the patient, the Radiation Safety Officer will brief the patient on precautions for minimizing radiation exposure to others after discharge from the hospital.

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# NURSING INSTRUCTIONS FOR PATIENTS TREATED WITH BRACHYTHERAPY SOURCES

Patient's Nam	e:
	r: Physician's Name:
Isotope and A	ctivity'
Date and Time	of Administration :
	Sources Are To Be Removed: Isotope:
	Exposure Rates in mR/hr
Bedside	3 feet from bed 10 feet from bed
	ell checked items.)
1.	Wear film or TLD badge.
2.	Wear pocket chambers for supplementary personnel monitoring of individual tasks.
3.	Wear rubber gloves.
4.	Tag the following objects and fill out the tag:
	doorchart
	bedwrist
5.	Place laundry in linen bag and save.
6.	Housekeeping may not enter the room.
7.	Visiting time permitted:
R.	Visitors must remain from patient.
9.	Patient may not leave the room.
10.	Patient may not have visitors.
11.	Patient may not have pregnant visitors.
12.	Patient may not have visitors under 18 years of age.
13.	Patient must have a private room.
14.	A dismissal survey must be performed before the patient is discharged.

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Name	On-duty/Off-duty Telephone Numbers
RSO	
18.	Other instructions.
17.	Contact the Radiation Safety Office when the patient is discharged to survey the room prior to its assignment to another patient.
. 16.	Contact the Radiation Safety Office when temporary sources (nonpermanent implants) are removed to perform a survey to be sure all sources are removed from the patient, to do a physical source count, and to be sure no sources remain in the room.
15.	All items must remain in the room until approved for disposal by the Radiation Safety Officer or his designee.

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