

Washington  
Hospital Center

Washington  
Cancer Institute



Department of Radiation Oncology

P-6

08-03604-05  
03035985

## FAX TRANSMISSION

To: PENNY LANZISERA

Institution: NRC

Fax number: 610-337-5269

From: ROSANNA CHAN

Department: Radiation Oncology

Date: 4/8/05

Fax number: (202) 877-3147

Phone number: 202-877-3900

Number of pages: (including this page) 5

Message: Supplement for licence amendment

RE:

NRC form 313A

MedStar Health

110 Irving Street, NW, Washington, DC 20010-2975  
phone: 202 877 3925 • fax: 202 877 3147

136729

NMSS/RGNI MATERIALS-002

## APPENDIX

NRC FORM 313A (10-2002)		U.S. NUCLEAR REGULATORY COMMISSION		APPROVED BY OMB: NO. 3160-0120 EXPIRES: 10/31/2005	
<b>TRAINING AND EXPERIENCE AND PRECEPTOR STATEMENT</b>					
<b>PART I -- TRAINING AND EXPERIENCE</b>					
<b>Note:</b> Descriptions of training and experience must contain sufficient detail to match the training and experience criteria in the applicable regulations.					
1. Name of Individual, Proposed Authorization (e.g., Radiation Safety Officer), and Applicable Training Requirements (e.g., 10 CFR 35.50) <b>Qingyun Zhang</b>					
2. For Physicians, Podiatrists, Dentists, Pharmacists -- State or Territory Where Licensed					
<b>3. CERTIFICATION</b>					
Specialty Board		Category		Month and Year Certified	
Stop here when using Board Certification to meet 10 CFR Part 35 training and experience requirements.					
<b>4. DIDACTIC OR CLASSROOM AND LABORATORY TRAINING (optional for Medical Physicists)</b>					
Description of Training	Location	Clock Hours	Dates of Training		
Radiation Physics and Instrumentation	JCRT/LROC, Harvard Medical School	100	Spring, 2000		
Radiation Protection	JCRT/LROC, Harvard Medical School	50	Fall, 1999 - Spring, 2000		
Mathematics Pertaining to the Use and Measurement of Radioactivity					
Radiation Biology					
Chemistry of Byproduct Material for Medical Use					
Clinical oncology OTHER	LROC, Harvard Medical School	50	Fall, 2000		

## APPENDIX B

NRC FORM 313A (10-2002)			U.S. NUCLEAR REGULATORY COMMISSION		
TRAINING AND EXPERIENCE AND PRECEPTOR STATEMENT (continued)					
5a. WORK EXPERIENCE WITH RADIATION					
Description of Experience	Name of Supervising Individual(s)	Location and Corresponding Materials License Number	Dates and Clock Hours of Experience		
Computer skills: Familiar with PC, Unix, Data/Image Acquisition and analysis; programming in Java, C, Fortran	Dr. Lee chin	LROC, Harvard Medical school	11/99-06/03		
Calibration of LDR sources Ir192, Ir25, Sr90, and HDR source Ir192	Dr. Lee chin Dr. Rosanna chan	LROC, Harvard Medical school Washington Hospital Center	11/99-06/03 06/03-present		
Gamma Knife Calibration: - observed annual cali - observed and performed monthly cali	Dr. Rosanna chan	Washington Hospital Center	06/03-present		
Linear accelerator monthly cali; Annual cali; TBI Calibration; Superficial unit calibration	Dr. Lee chin Dr. Rosanna chan	LROC, Harvard Medical school Washington Hospital Center	1/98-06/03 06/03-present		
Radiation Source room Survey; treatment Room Survey; shielding survey	Dr. Lee chin	LROC, Harvard Medical school	11/99-6/03		
5b. SUPERVISED CLINICAL CASE EXPERIENCE					
Radionuclide	Type of Use	No. of Cases Involving Personal Participation	Name of Supervising Individual	Location and Corresponding Materials License Number	Dates and Clock Hours of Experience
Ir192	LDR - GYN, Bronchos	~20	Dr. Lee chin		11/99-6/03
Sr90	intravascular	~200	Dr. Lee chin Dr. Rosanna chan		11/99-6/03 6/03-present
Ir25	prostate	~200	Dr. Lee chin		11/99-6/03
Cs137	GYN (P40, Cylinder)	~50	Dr. Lee chin Dr. Rosanna chan		11/99-6/03 6/03-present
Ir192	HDR	~50	Dr. Lee chin Dr. Rosanna chan		11/99-6/03 6/03-present

## APPENDIX B

PAGE 3

NRC FORM 313A (10-2002)		U.S. NUCLEAR REGULATORY COMMISSION	
TRAINING AND EXPERIENCE AND PRECEPTOR STATEMENT (continued)			
6. FORMAL TRAINING (applies to Medical Physicists and Therapy Physicians)			
Degree, Area of Study or Residency Program	Name of Program and Location with Corresponding Materials License Numbers	Dates	Name of Organization that Approved the Program (e.g., Accreditation Council for Graduate Medical Education) and the Applicable Regulation (e.g., 10 CFR 35.490)
PHD Mechanical Engineering		8/92-8/97	Worcester Polytechnic Institute
Ms. Nuclear and Accelerator physics		7/84-7/87	Peking University, Beijing China
7. RADIATION SAFETY OFFICER -- ONE-YEAR FULL-TIME TRAINING			
<input type="checkbox"/> YES Completed 1-year of full-time radiation safety experience (in areas identified in item 5a) under supervision			
<input type="checkbox"/> N/A of _____ the RSO for License No. _____			
8. MEDICAL PHYSICIST -- ONE YEAR FULL-TIME TRAINING/WORK EXPERIENCE			
<input checked="" type="checkbox"/> YES Completed 1-year of full-time training in therapeutic radiological physics under the supervision of			
<input type="checkbox"/> N/A <u>Dr. Lee Chin</u> who meets requirements for Authorized Medical Physicists; and			
<input checked="" type="checkbox"/> YES Completed 1-year of full-time work experience (for areas identified in item 5a) for <u>external beam and Brachytherapy</u>			
<input type="checkbox"/> N/A modality(ies) under the supervision of <u>Dr. Lee Chin</u> who meets requirements for Authorized Medical Physicists for <u>external beam and brachytherapy</u> modality(ies).			
9. SUPERVISING INDIVIDUAL -- IDENTIFICATION AND QUALIFICATIONS			
The training and experience indicated above was obtained under the supervision of (if more than one supervising individual is needed to meet requirements in 10 CFR 35, provide the following information for each):			
A. Name of Supervisor <u>Dr. Lee chin</u>		B. Supervisor is: <input type="checkbox"/> Authorized User <input type="checkbox"/> Radiation Safety Officer <input checked="" type="checkbox"/> Authorized Medical Physicists <input type="checkbox"/> Authorized Nuclear Pharmacists	
C. Supervisor meets requirements of Part 35, Section(s) _____ for medical uses in Part 35, Section(s) _____			
D. Address Department of Radiation Oncology, BWH 75 Francis St. Boston, MA 02115		E. Materials License Number X <u>44-000 4</u> <u>Massachusetts</u>	

**PAGE 4**

PAGE 4