



Heartland Health

HEARTLAND REGIONAL MEDICAL CENTER

Radiology Department
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Extraordinary technology. Exceptional care.



April 4, 2012

Materials Licensing Section
U.S. Nuclear Regulatory Commission, Region III
2443 Warrensville Road, Suite 210
Lisle, IL 60432-4352

REF: License Number: 24-18287-01
Control No.: 576192

Dear Colleen Carol Casey:

In a letter dated April 19, 2011 we submitted a request for amendment to our Radioactive Materials License No. 24-18287-01 to designate Dr. Jack Bridges as the RSO.

In response to your concerns (FAX Dated July 25, 2011) that he is not an authorized user for 10 CFR 35.400 and your request that we submit evidence of training as specified in 10 CFR 35.50(e) for the manual brachytherapy program, we are attaching a completed NRC Form 313A (RSO) signed by Dr. Ed Stevens, the current RSO on this license.

Thank you for your help with this. If you have any further questions or require additional information, please contact Andrew Martin by phone at (816) 271-6471, (816) 617-1973, or by email to andrew.martin@heartland-health.com.

Sincerely,

R. A. Preston, M.D., J.D.
HRMC Administrator

RECEIVED APR 10 2012

**RADIATION SAFETY OFFICER TRAINING AND EXPERIENCE
AND PRECEPTOR ATTESTATION**
[10 CFR 35.50]APPROVED BY OMB: NO. 3150-0120
EXPIRES: 3/31/2012

Name of Proposed Radiation Safety Officer

Jack L. Bridges, M.D.

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**

- Provide a copy of the board certification.
- Use Table 3.c. to describe training in radiation safety, regulatory issues, and emergency procedures for all types of medical use on the license.
- 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**

- 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.
- 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			
Radiation protection			
Mathematics pertaining to the use and measurement of radioactivity			
Radiation biology			
Radiation dosimetry			
Total Hours of Training:			

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		
Using and performing checks for proper operation of instruments used to determine the activity of dosages, survey meters, and instruments used to measure radionuclides		
Securing and controlling byproduct material		
Using administrative controls to avoid mistakes in administration of byproduct material		
Using procedures to prevent or minimize radioactive contamination and using proper decontamination procedures		
Using emergency procedures to control byproduct material		
Disposing of byproduct material		
Licensed Material Used (e.g., 35.100, 35.200, etc.)+ _____ _____ _____		

+ 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).

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
<p>This license authorizes the following medical uses:</p> <div style="display: flex; flex-wrap: wrap;"> <div style="width: 50%;"><input type="checkbox"/> 35.100</div> <div style="width: 50%;"><input type="checkbox"/> 35.200</div> <div style="width: 50%;"><input type="checkbox"/> 35.300</div> <div style="width: 50%;"><input type="checkbox"/> 35.400</div> <div style="width: 50%;"><input type="checkbox"/> 35.500</div> <div style="width: 50%;"><input type="checkbox"/> 35.600 (remote afterloader)</div> <div style="width: 50%;"><input type="checkbox"/> 35.600 (teletherapy)</div> <div style="width: 50%;"><input type="checkbox"/> 35.600 (gamma stereotactic radiosurgery)</div> <div style="width: 50%;"><input type="checkbox"/> 35.1000 (_____)</div> </div>	

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	RSO on NRC Material License No. 24-32027-01	
Radiation safety, regulatory issues, and emergency procedures for 35.300 uses	RSO on NRC Material License No. 24-32027-01	
Radiation safety, regulatory issues, and emergency procedures for 35.400 uses	Robert C. Johnson, M.D.	08/12/2011 - 08/15/2011
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):		

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)

<p>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></p> <p>Robert C. Johnson, M.D.</p>	<p>License/Permit Number listing supervising individual</p> <p style="text-align: center;">24-18287-01</p>												
<p>License/Permit lists supervising individual as:</p> <p> <input type="checkbox"/> Radiation Safety Officer <input checked="" type="checkbox"/> Authorized User <input type="checkbox"/> Authorized Nuclear Pharmacist <input type="checkbox"/> Authorized Medical Physicist </p> <p>Authorized as RSO, AU, ANP, or AMP for the following medical uses:</p> <table style="width: 100%;"> <tr> <td><input type="checkbox"/> 35.100</td> <td><input type="checkbox"/> 35.200</td> <td><input checked="" type="checkbox"/> 35.300</td> <td><input checked="" type="checkbox"/> 35.400</td> </tr> <tr> <td><input checked="" type="checkbox"/> 35.500</td> <td><input type="checkbox"/> 35.600 (remote afterloader)</td> <td colspan="2"><input type="checkbox"/> 35.600 (teletherapy)</td> </tr> <tr> <td colspan="2"><input type="checkbox"/> 35.600 (gamma stereotactic radiosurgery)</td> <td colspan="2"><input type="checkbox"/> 35.1000 (_____)</td> </tr> </table>		<input type="checkbox"/> 35.100	<input type="checkbox"/> 35.200	<input checked="" type="checkbox"/> 35.300	<input checked="" type="checkbox"/> 35.400	<input checked="" 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 (_____)	
<input type="checkbox"/> 35.100	<input type="checkbox"/> 35.200	<input checked="" type="checkbox"/> 35.300	<input checked="" type="checkbox"/> 35.400										
<input checked="" 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 _____ 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

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 Jack L. Bridges, M.D. 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 Jack L. Bridges, M.D. 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:

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

AND

**Third Section
Complete for ALL**

☒ I attest that Jack L. Bridges, M.D. 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.

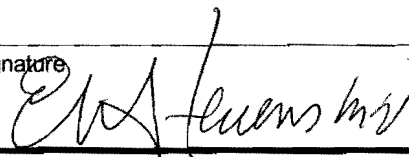
**Fourth Section
Complete the following for Preceptor Attestation and signature**

I am the Radiation Safety Officer for Heartland Regional Medical Center
Name of Facility

License/Permit Number: 24-18287-01

Name of Preceptor
Edward M. Stevens, M.D.

Signature



Telephone Number
(816) 271-6575

Date
02/29/2012



Heartland Health

5325 Faraon Street
St. Joseph, Missouri 64506-3398

Return Service Requested

APR 06 2012

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