

WALTER REED ARMY MEDICAL CENTER
HEALTH PHYSICS OFFICE

6900 GEORGIA AVENUE, NORTHWEST • BUILDING 41, ROOM 38 • WASHINGTON, D.C. 20307-5001 • VOICE: 202-356-0058 • FAX: 202-356-0086

AUTHORIZATION AMENDMENT REVIEW

Date of Amendment Initiation: Jan 4, 2005

Authorization Number: 689

Description of the Amendment:

Termination of the authorization

Mark appropriately.

Required Items	Yes	No	Other	Comments
Disseminated authorization information (Signatures, etc.)			<i>JMB</i>	
Initial/Annual Training Form (WRAMC Form 538)		X		
Training & Experience Form (WRAMC Form 1643)		X		
Protocol Form (WRAMC Form 1644)		X		
Radioisotope changes		X		
Pre-Room Survey conducted		X		
Admin Hold Survey conducted		X		
Final Survey conducted	X		<i>JMB</i>	
Bioassay Program enrollment		X		
Dosimetry Program enrollment		X		DD Form 1952 received? Y or N
Dosimetry Program removal		X		
Instrumentation affected	X		X	<i>irradiator was turned over to the manufacturer</i>

ADDITIONAL INFORMATION

1. Sgt Reyes, HPO, was given a note to final room 4754 in building 2 on 1/4/05

APPROVAL

License and Support Branch Chief:

David W. Bush

Operations Branch Chief:

CO Litcher

27 January 2005

MEMORANDUM FOR Mr. Felizardo Salaveria, Blood Bank
Auth 689

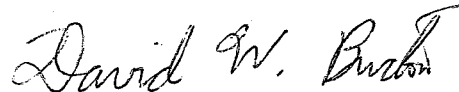
SUBJECT: Radiological Safety Certification: Building 2, WRAMC, Rm. 4754

1. The following room has been inspected, tested and certified by the Health Physics Office to be free of any hazards associated with removable radioactive contamination. Any previous radiological safety restrictions are hereby removed.

Room:

Building	Room
4754	4754

2. If you have any questions regarding this survey, you may contact SFC White at 356-0330.



DAVID BURTON
Chief, Radioactive Material Control

APPLICATION FOR AUTHORIZATION TO USE RADIOACTIVE MATERIAL -- NON-HUMAN USE

(TYPE OR PRINT LEGIBLY)

A. GENERAL INFORMATION

APPLICATION FOR: ☐ NEW AUTHORIZATION ☒ RENEWAL OF AUTHORIZATION ☐ AMENDMENT TO AUTHORIZATION

NUMBER: 689

NUMBER _____

APPLICANT'S NAME (LAST, FIRST, MI)

Salaveria, Felizardo

APPLICANT MAILING ADDRESS (INCLUDE ORGANIZATION)

Blood Bank
Department of Pathology
WRAMC
Building 2, Room 4E01
Washington, D.C. 20307-5001

TELEPHONE NUMBER: 202-782-6989

FAX NUMBER: 202-782-4985

B. AUTHORIZED USERS (PLEASE LIST ON PAGE 2)

C. RADIOACTIVITY USAGE LOCATION

LOCATIONS WHERE MATERIALS WILL BE USED (BUILDING AND ASSOCIATED ROOMS):

WRAMC, Building 2, Room 4754

LOCATIONS WHERE MATERIALS WILL BE STORED (BUILDING AND ASSOCIATED ROOMS):

N/A

D. RADIOACTIVE MATERIAL DATA

RADIOISOTOPE	CHEMICAL AND/OR PHYSICAL FORM (SEALED AND/OR UNSEALED)	POSSESSION LIMIT	USE
Cs-137	Sealed 4 capsules (J.L. Shepherd Model 143) Irradiator	3000 Ci	POSSESSION ONLY (was used to irradiate blood products of transfusion or research)
The Health Physics Office is granting interim approval to this application until the next scheduled RCC Meeting on <u>2/2002</u> Date		APPROVED BY RCC On <u>FEB 28 2002</u> DATE	

E. CERTIFICATE (THIS SECTION MUST BE COMPLETED BY APPLICANT)

I CERTIFY THAT THIS APPLICATION IS PREPARED IN CONFORMITY WITH WRAMC REGULATIONS AND THAT ALL CONTAINED HEREIN, INCLUDING ANY SUPPLEMENTS ATTACHED HERETO, IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF.

I ACKNOWLEDGE MY RESPONSIBILITY AS **PRINCIPAL INVESTIGATOR** AS DEFINED IN WRAMC REGULATIONS.

ADMINISTRATIVE APPROVAL - CHIEF, DEPT. OR DIVISION OF THE PRINCIPAL INVESTIGATOR.

SIGNATURE OF PRINCIPAL INVESTIGATOR

DATE

SIGNATURE OF CHIEF, DEPT. OR DIV.

DATE

F. WRAMC RADIATION CONTROL COMMITTEE APPROVAL

APPROVED:

APPROVED:

AUTHORIZATION NO.:

HEALTH PHYSICS OFFICER, WRAMC

WILLIAM B. JOHNSON

COL, MS

CHIEF, HEALTH PHYSICS OFFICE

CHAIRMAN, RADIATION CONTROL COMMITTEE, WRAMC

USE: RADIATION CONTROL COMMITTEE, WRAMC

JAN 25 2002

EXPIRATION DATE:

689

Jan 05

B. AUTHORIZED USERS		
LIST ALL CO-INVESTIGATORS	LIST ALL TRAINEES	LIST ALL STAFF WORKERS
NO USERS	POSSESSION ONLY	AUTHORIZATION

DEFINITIONS FOR USERS

A "Co-Investigator" is an individual who possesses adequate training and experience with radioactive material to qualify as a Principle User. The individual works under the direction of and is responsible to the Principal User for the safe and proper use of the materials specified in the application. List all Co-Investigators alphabetically by last name. Each Co-Investigator should be identified as follows: last name, first name, middle initial and rank/grade. Attach a completed Training and Experience Form for each Co-Investigator, if a **current** copy is not on file with the Health Physics Office.

A "Trainee" is an individual who works under the direct supervision of a Principal User or Co-Investigator for the purpose of obtaining the necessary training and experience to qualify for either status. List all Trainees alphabetically by last name. Each Trainee should be identified as follows: last name, first name, middle initial and rank/grade.

A "Staff Worker" is an individual who works under the direct supervision of a Principal User or Co-Investigator for the purpose of performing certain routine duties associated with the use of radioactive materials specified in the application. The individual does not possess suitable training and experience to be classified as Principal User or Co-Investigator and is not undergoing training that would qualify the individual to attain either status. List all Staff Workers alphabetically by last name. Each Staff Worker should be identified as follows: last name, first name, middle initial and rank/grade.

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AUTHORIZATION REVIEW PROCESS

Authorization Number: 689

Date: 14 January 2002

RMC BRANCH

	Initials		Comments
	Pending	Complete	
TRAVELER'S LOG		<i>[initials]</i>	
WELFARE FORMS		<i>[initials]</i>	
Authorization or Amendments		<i>[initials]</i>	Renewal
Protocol		<i>[initials]</i>	N/A
Isotopes		<i>[initials]</i>	

OPERATIONS BRANCH

Pre-Room Survey		DKM	N/A
Admin Hold Survey		DKM	N/A
Final Survey		DKM	N/A
Bioassay Program		DKM	N/A
Dosimetry Program		DKM	N/A
Instrumentation		DKM	N/A

GENERAL COMMENTS

Changes:

Delete all users, possession only