AUTHORIZED USER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (for uses defined under OAC 3701:1-58-32, 3701:1-58-34, 3701:1-58-53, and 3701:1-58-72 RSL)

[OAC 3701:1-58-33, 3701:1-58-36, and 3701:1-58-54]

Name of Proposed Au	thorized User
Requested Authoriza	ation(s):
□ 3701:1-58-32	Use of unsealed radioactive material for uptake, dilution, and excretion studies for which a written directive is not required.
□ 3701:1-58-34	Use of unsealed radioactive material for imaging and localization studies for which a written directive is not required.
□ 3701:1-58-53	Use of Sealed Sources for Diagnosis.
□ 3701:1-58-72	Use of Iodine-125 (I-125) Low Dose Brachytherapy Seeds for Localization.

PART I – TRAINING AND EXPERIENCE

(select one of the four methods below)

- *In accordance with OAC 3701:1-58-22 the training and experience, including board certification, must have been obtained within seven years preceding the date of the 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** [3701:1-58-33(A)(1)(2), 3701:1-58-36(A)(1)(2), or 3701:1-58-54(A)]
 - a. Provide a copy of the board certification. (A list of approved board certifications is located at http://www.nrc.gov/materials/miau/med-use-toolkit/spec-board-cert.html)
 - b. If using only 3701:1-58-53 materials, stop here.

If using 3701:1-58-32 and 3701:1-58-34 materials, skip to and complete Part II Preceptor Attestation.

c. If using 3701:1-58-72, skip to and complete Part II Preceptor Attestation and Page 6 "HEA-0124 Supplement for the use of I-125 low dose brachytherapy seeds for localization.

AUTHORIZED USER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (for uses defined under OAC 3701:1-58-32, 3701:1-58-34, 3701:1-58-53, and 3701:1-58-72 RSL)

[OAC 3701:1-58-33, 3701:1-58-36, and 3701:1-58-54]

\square 3. Training and Experience for Proposed Authorized Use
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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				
Chemistry of radioactive material for medical use (not required for 3701:1-58-53)				
Radiation biology				
Total Hours of Training				

b. Supervised Work Experience (if more than one supervising individual is necessary to document supervised work experience, provide multiple copies of this section)

Supervised Work Experience		Hours of Experience:		
Description of Experience Must Include:		on of Experience & e Number of Facility	Dates of Experience*	
Ordering, receiving, and unpacking radioactive materials safely and performing the related radiation surveys				
Performing quality control procedures on instruments used to determine the activity of dosages and performing checks for proper operation of survey meters				
Calculating, measuring, and safely preparing patient or human research subject dosages				

AUTHORIZED USER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (for uses defined under OAC 3701:1-58-32, 3701:1-58-34, 3701:1-58-53, and 3701:1-58-72 RSL)

[OAC 3701:1-58-33, 3701:1-58-36, and 3701:1-58-54]

Using administrative controls to prevent a medical event involving the use of unsealed radioactive material.			
Using procedures to contain spilled radioactive material safely and using proper decontamination procedures			
Administering dosages of radioactive drugs to patients or human research subjects			
Eluting generator systems appropriate for preparation of radioactive drugs for imaging and localization studies, measuring and testing the eluate for radionuclidic purity, and processing the eluate with reagent kits to prepare labeled radioactive drugs			
Supervising Individual		License Number listing supervising individual as an authorized user:	
Supervisor meets the OAC requirements below (check all that apply)			
\square 3701:1-58-33 \square 3701:1-58-36 \square 3701:1-58-40 \square 3701:1-58-40 + generator experience in 3701:1-58-36(C)(1)(b)(vii)			
c. For 3701:1-58-54 only, provide documentation	n of training	g on use of the device.	

Device	Type of Training	Location and Dates

d. For 3701:1-58-53 uses only, stop here. For 3701:1-58-32, 3701:1-58-34, and 3701:1-58-72 (RSL) uses, skip to and complete Part II Preceptor Attestation.

AUTHORIZED USER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (for uses defined under OAC 3701:1-58-32, 3701:1-58-34, 3701:1-58-53, and 3701:1-58-72 RSL) [OAC 3701:1-58-33, 3701:1-58-36, and 3701:1-58-54]

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, and verifies the training and experience required. If more than one preceptor is necessary to document experience, obtain a separate preceptor statement from each.		
<u>Part II</u>	- Section I – (check one of the following for each request)		
For 37	01:1-58-33		
	Board Certification		
	☐ I attest that (name of proposed Authorized User) has satisfactorily completed the requirements in OAC 3701:1-58-33(A)(1) and has achieved a level of competency sufficient to function independently as an authorized user for the medical uses authorized under OAC 3701:1-58-32.		
	OR		
	Training and Experience		
	☐ I attest that (name of proposed Authorized User) has satisfactorily completed 60 hour of training and experience, including a minimum of 8 hours of classroom and laboratory training, required by OAC 3701:1-58-33(C)(1), and has achieved a level of competency sufficient to function independently as an authorized user for the medical uses authorized under OAC 3701:1-58-32.		
<u>For 37</u>	<u>01:1-58-36</u>		
	Board Certification		
	□ I attest that (name of proposed Authorized User) has satisfactorily completed the requirements in OAC 3701:1-58-36(A)(1) and has achieved a level of competency sufficient to function independently as an authorized user for the medical uses authorized under OAC 3701:1-58-32 and 3701:1-58-34.		
	OR		
	Training and Experience		
	□ I attest that (name of proposed Authorized User) hours of training and experience, including a minimum of 80 hours of classroom and laboratory training, required by OAC 3701:1-58-36(C)(1), and has achieved a level of competency sufficient to function independently as an authorized user for the medical uses authorized under OAC 3701:1-58-32 and OAC 3701:1-58-34.		

AUTHORIZED USER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (for uses defined under OAC 3701:1-58-32, 3701:1-58-34, 3701:1-58-53, and 3701:1-58-72 RSL)

[OAC 3701:1-58-33, 3701:1-58-36, and 3701:1-58-54]

PART II – PRECEPTOR ATTESTATION (continued)

	AND		
Part II – Section II			
Complete the following pre-	ceptor attestation and signature:		
I am an authorized user for a	and meet the requirements of:		
□ OAC 3701:1-58-33	Training for uptake, dilution, and excretion studies		
□ OAC 3701:1-58-36	Training for imaging and localization studies		
□ OAC 3701:1-58-54	Training for use of sealed sources for diagnosis		
□ OAC 3701:1-58-72	Training for the use of Use of I-125 Low Dose Brachytherapy Seeds for Localization		
Name of Preceptor	Signature	Telephone Number	Date

HEA-0124 SUPPLEMENT – FOR 3701:1-58-72 RSL

Name of Proposed Authorized User:				
Supervised Work Experience:				
	Location of Experience	Dates of Experience		
Performing related radiation surveys using the appropriate instrumentation				
Preparing, implanting, and removing RSL sources safely				
Use of remote handling tools to manipulate seeds and the proper use of shields				
Routine monitoring before, during, and after all uses of the seeds to ensure rapid identification and remediation of a broken or leaking source				
Use of emergency procedures such as procedures regarding broken or leaking seeds				
Reviewing and understanding the administrative controls in place to prevent a medical event				
Performing inventories of radioactive material on hand				
Supervising Individual:	Signature:			
License Number Listing Supervising Individual as	an AU:			
Supervising Individual Meets the OAC R Brachytherapy Seeds for Localization	equirements for 3701:1-58-72 Use of I-	-125 Low Dose Rate		