Ohio Department of Health
AUTHORIZED USER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION
(for uses defined under OAC 3701:1-58-37)
[OAC 3701:1-58-40, 3701:1-58-41, 3701:1-58-42, and 3701:1-58-104]

Name of Proposed Authorized User _____

Requested Authorization(s):

☐ 3701:1-58-37 Use of unsealed radioactive material for which a written directive is required.

OR

☐ 3701:1-58-37 Oral administration of sodium iodide Iodine-131 requiring a written directive in quantities less than or equal to 1.22 gigabecquerels (33 millicuries)

☐ 3701:1-58-37 Oral administration of sodium iodide Iodine-131 requiring a written directive in quantities greater than 1.22 gigabecquerels (33 millicuries)

☐ 3701:1-58-37 Parenteral administration of any beta-emitter, or photon-emitting radionuclide with a photon energy less than 150 keV for which a written directive is required

☐ 3701:1-58-37 Parenteral administration of any other radionuclide for which a written directive is required

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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. For 3701:1-58-40, provide documentation on supervised clinical case experience. The table in section 3.c. may be used to document this experience.

c. For 3701:1-58-104, provide documentation on classroom and laboratory training, supervised work experience, and supervised clinical case experience. The table in sections 3.a., 3.b., and 3.c. may be used to document this experience.

d. Skip to and complete Part II Preceptor Attestation.

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[OAC 3701:1-58-40, 3701:1-58-41, 3701:1-58-42, and 3701:1-58-104]

☐ 3. **Training and Experience for Proposed Authorized User**

a. Classroom and Laboratory Training

☐OAC 3701:1-58-40 ☐OAC 3701:1-58-41 ☐OAC 3701:1-58-42 ☐OAC 3701:1-58-104

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			
Radiation biology			
Total Hours of Training			

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3. **Training and Experience for Proposed Authorized User (continued)**

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

☐OAC 3701:1-58-40 ☐OAC 3701:1-58-41 ☐OAC 3701:1-58-42 ☐OAC 3701:1-58-104

Supervised Work Experience	**Total Hours of Experience:**	
Description of Experience Must Include:	Location of Experience & License 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		
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		
Supervising Individual	License Number listing supervising individual as an authorized user	

Supervising individual meets the requirements below (check all that apply**):

☐ OAC 3701:1-58-40 ☐OAC 3701:1-58-41 ☐OAC 3701:1-58-42 ☐OAC 3701:1-58-104

With experience administering dosages of :

☐ Oral administration of sodium iodide Iodine-131 requiring a written directive in quantities less than or equal to 1.22 gigabecquerels (33 millicuries)

☐ Oral administration of sodium iodide Iodine-131 requiring a written directive in quantities greater than 1.22 gigabecquerels (33 millicuries)

☐ Parenteral administration of any beta-emitter, or photon-emitting radionuclide with a photon energy less than 150 keV for which a written directive is required

☐ Parenteral administration of any other radionuclide for which a written directive is required

**Supervising Authorized User must have experience in administering dosages in the same dosage category or categories as the - individual requesting authorized user status.

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[OAC 3701:1-58-40, 3701:1-58-41, 3701:1-58-42, and 3701:1-58-104]

3. **Training and Experience for Proposed Authorized User (continued)**

c. Supervised Clinical Case Experience
(If more than one supervising individual is necessary to document supervised work experience, provide multiple copies of this page.)

Description of Experience	Number of Cases Involving Personal Participation	Location of Experience/License Number of Facility	Date of Experience*
Oral administration of sodium iodide Iodine-131 requiring a written directive in quantities less than or equal to 1.22 gigabecquerels (33 millicuries)			
Oral administration of sodium iodide Iodine-131 requiring a written directive in quantities greater than 1.22 gigabecquerels (33 millicuries)			
Parenteral administration of any beta-emitter, or photon-emitting radionuclide with a photon energy less than 150 keV for which a written directive is required			
Parenteral administration of any other radionuclide for which a written directive is required List radionuclides:			
Supervising Individual		License Number listing supervising individual as an authorized user	

Supervising individual meets the requirements below (check all that apply**):

☐ OAC 3701:1-58-40 ☐OAC 3701:1-58-41 ☐OAC 3701:1-58-42 ☐OAC 3701:1-58-104

With experience administering dosages of (check all that apply*):

☐ Oral administration of sodium iodide Iodine-131 requiring a written directive in quantities less than or equal to 1.22 gigabecquerels (33 millicuries)

☐ Oral administration of sodium iodide Iodine-131 requiring a written directive in quantities greater than 1.22 gigabecquerels (33 millicuries)

☐ Parenteral administration of any beta-emitter, or photon-emitting radionuclide with a photon energy less than 150 keV for which a written directive is required

☐ Parenteral administration of any other radionuclide for which a written directive is required

**Supervising Authorized User must have experience in administering dosages in the same dosage category or categories as the individual requesting authorized user status.

d. Provide completed Part II Preceptor Attestation.

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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.

By checking the boxes below, the preceptor is attesting that the individual has knowledge to fulfill the duties of the position sought and not attesting to the individuals "general clinical competency"

Part II – Section I – (check one of the following for each requested authorization):

For 3701:1-58-40

Board Certification

I attest that (name of proposed Authorized User) _____ has satisfactorily completed the training and experience requirements in OAC 3701:1-58-40(A)(1).

OR

Training and Experience

I attest that (name of proposed Authorized User) _____ has satisfactorily completed 700 hours of training and experience, including a minimum of 200 hours of classroom and laboratory training, required by OAC 3701:1-58-40(B)(1).

For 3701:1-58-41 (Identical Attestation Statement Regardless of Training and Experience Pathway):

☐ I attest that (name of proposed Authorized User) _____ has satisfactorily completed the 80 hours of classroom and laboratory training as required by OAC 3701:1-58-41(C)(1) and the supervised work and clinical case experience required in OAC 3701:1-58-41(C)(2).

For 3701:1-58-42 (Identical Attestation Statement Regardless of Training and Experience Pathway):

☐ I attest that (name of proposed Authorized User) _____ has satisfactorily completed the 80 hours of classroom and laboratory training as required by OAC 3701:1-58-42(C)(1) and the supervised work and clinical case experience required in OAC 3701:1-58-42(C)(2).

Part II- Section II

☐ I attest that (name of proposed Authorized User) _____ has satisfactorily completed required clinical case experience required in OAC 3701:1-58-40(B)(1)(b)(vi) listed below.

- ☐ Oral administration of sodium iodide Iodine-131 requiring a written directive in quantities less than or equal to 1.22 gigabecquerels (33 millicuries)
- ☐ Oral administration of sodium iodide Iodine-131 requiring a written directive in quantities greater than 1.22 gigabecquerels (33 millicuries)
- ☐ Parenteral administration of any beta-emitter, or photon-emitting radionuclide with a photon energy less than 150 keV for which a written directive is required
- ☐ Parenteral administration of any other radionuclide for which a written directive is required

Part II – Section III

☐ I attest that (name of proposed Authorized User) _____ has satisfactorily achieved a level of competency to function independently as an authorized user for:

- ☐ Oral administration of sodium iodide Iodine-131 requiring a written directive in quantities less than or equal to 1.22 gigabecquerels (33 millicuries)
- ☐ Oral administration of sodium iodide Iodine-131 requiring a written directive in quantities greater than 1.22 gigabecquerels (33 millicuries)
- ☐ Parenteral administration of any beta-emitter, or photon-emitting radionuclide with a photon energy less than 150 keV for which a written directive is required
- ☐ Parenteral administration of any other radionuclide for which a written directive is required

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[OAC 3701:1-58-40, 3701:1-58-41, 3701:1-58-42, and 3701:1-58-104]

Part II- Section V

Complete the following for preceptor attestation and signature:

☐ I am an authorized user for, and meet the requirements of the below (check all that apply):

☐OAC 3701:1-58-40 ☐OAC 3701:1-58-41 ☐OAC 3701:1-58-42 ☐OAC 3701:1-58-104

☐ I have experience administering dosages in the following categories for which the proposed Authorized User is requesting authorization (check all that apply):

- ☐ Oral administration of sodium iodide Iodine-131 requiring a written directive in quantities less than or equal to 1.22 gigabecquerels (33 millicuries)
- ☐ Oral administration of sodium iodide Iodine-131 requiring a written directive in quantities greater than 1.22 gigabecquerels (33 millicuries)
- ☐ Parenteral administration of any beta-emitter, or photon-emitting radionuclide with a photon energy less than 150 keV for which a written directive is required
- ☐ Parenteral administration of any other radionuclide for which a written directive is required

Name of Preceptor	Signature	Telephone Number	Date
License Number/Facility Name			