



Radioactive Materials Unit
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RADIATION SAFETY OFFICER
TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION

Name of Proposed Radiation Safety Officer	State or Territory Where Licensed
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Requested Authorization(s). The license authorizes the following medical uses. (Check all that apply.)

4731.4432
 4731.4434
 4731.4440
 4731.4450
 4731.4460
 4731.4463 (*remote afterloader*)
 4731.4463 (*teletherapy*)
 4731.4463 (*gamma stereotactic radiosurgery*)
 4731.4404 (_____)

PART I – TRAINING AND EXPERIENCE
(Select one of the four methods below)

* Training and Experience, including board certification, must have been obtained within seven 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. Provides dates, duration, and description of continuing education and experience related to the uses checked above.

- 1. Board Certification**
 - a. Provide a copy of the board certification
 - b. Use Table 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

- 2. Current Radiation Safety Officer Seeking Authorization to Be Recognized as a Radiation Safety Officer for the Additional Medical Uses Checked Above**
 - a. 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 for which recognition as RSO is sought.
 - b. Skip to and complete Part II Preceptor Attestation

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

Description of Experience	Location of Training and 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 radioactive material		
Using administrative controls to avoid mistakes in administration of radioactive material		
Using procedures to prevent or minimize radioactive contamination and using proper decontamination procedures		
Using emergency procedures to control radioactive material		
Disposing of radioactive material		
Licensed material used (e.g., 4731.4432, 4731.4434, etc.)** _____ _____ _____ _____		

** Choose all applicable Section of 4731 to describe radioisotopes and quantities used: 4731.4432, 4731.4434, 4731.4440, 4731.4450, 4731.4460, 4731.4463 (*remote afterloader*), 4731.4463 (*teletherapy*), 4731.4463 (*gamma stereotactic radiosurgery*), 4731.4404 (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 or Permit Number listing the supervising individual as a Radiation Safety Officer
The license authorizes the following medical uses:	
<input type="checkbox"/> 4731.4432 <input type="checkbox"/> 4731.4434 <input type="checkbox"/> 4731.4440 <input type="checkbox"/> 4731.4450 <input type="checkbox"/> 4731.4460 <input type="checkbox"/> 4731.4463 (<i>remote afterloader</i>) <input type="checkbox"/> 4731.4463 (<i>teletherapy</i>) <input type="checkbox"/> 4731.4463 (<i>gamma stereotactic radiosurgery</i>) <input type="checkbox"/> 4731.4404 (_____)	

c. Describe the training in radiation safety, regulatory issues, and emergency procedures for all types of medical use on the license.

Description of Training	Training Provider	Dates of Training*
Radiation safety, regulatory issues, and emergency procedures for 4731.4432, 4731.4434, and 4731.4460 uses		
Radiation safety, regulatory issues, and emergency procedures for 4731.4440 uses		
Radiation safety, regulatory issues, and emergency procedures for 4731.4450 uses		
Radiation safety, regulatory issues, and emergency procedures for 4731.4463 – teletherapy uses		
Radiation safety, regulatory issues, and emergency procedures for 4731.4463 – remote afterloader uses		
Radiation safety, regulatory issues, and emergency procedures for 4731.4463 – gamma stereotactic radiosurgery uses		
Radiation safety, regulatory issues, and emergency procedures for 4731.4404, specify use(s):		

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

3. Structured Educational Program for Proposed Radiation Safety Officer (continued)

d. Training in radiation safety, regulatory issues, and emergency procedures for all types of medical use on the license. (continued)

Supervising Individual If training was provided by supervising RSO, AU, ANP, AMP. (If more than one supervising individual is necessary to document supervised training, provide multiple copies of this page.)	License or Permit Number listing the supervising individual as a Radiation Safety Officer
The license or Permit lists supervising individual as: <input type="checkbox"/> Radiation Safety Officer (RSO) <input type="checkbox"/> Authorized User (AU) <input type="checkbox"/> Authorized Nuclear Pharmacist (ANP) <input type="checkbox"/> Authorized Medical Physicist (AMP)	
Authorized as RSO, AU, ANP, AMP for the following medical uses: <input type="checkbox"/> 4731.4432 <input type="checkbox"/> 4731.4434 <input type="checkbox"/> 4731.4440 <input type="checkbox"/> 4731.4450 <input type="checkbox"/> 4731.4460 <input type="checkbox"/> 4731.4463 (remote afterloader) <input type="checkbox"/> 4731.4463 (teletherapy) <input type="checkbox"/> 4731.4463 (gamma stereotactic radiosurgery) <input type="checkbox"/> 4731.4404 (_____)	

e. Skip to and complete Part II.

OR

4. Authorized User, Authorized, Authorized Medical Physicist, or Authorized Nuclear Pharmacist identified on the licensee's license.

- a. Provide the License Number.
- b. Use the table in Section 3.c. to describe the 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 the 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
 4731.4411 Subpart 2 Item A.(1) and A.(2); or 4731.4411 Subpart 2 Item B.(1) and B.(2); or 4731.4411 Subpart 1.C.

OR

2. Structured Educational Program for Proposed Radiation Safety Officers

I attest that _____ has satisfactorily completed a structured 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 4731.4411 Subpart 1 Item B.(1).

OR

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

Preceptor Attestation (continued)

First Section (continued)

3. Additional Authorization as Radiation Safety Officer

I attest that _____ is one of the following:
Name of Proposed Radiation Safety Officer

- Authorized User (AU) Authorized Nuclear Pharmacist (ANP) Authorized Medical Physicist

Identified on the licensee's radioactive materials license and has experience with the radiation safety aspects of similar types(s) of use of radioactive material for which the individual has Radiation Safety Officer responsibilities.

AND

Second Section

Complete for all. (Check all that apply.)

I attest that _____ has training in the radiation safety, regulatory issues,
Name of Proposed Radiation Safety Officer
and emergency procedures for the following types of use:

- 4731.4432
- 4731.4434
- 4731.4440 oral administration of less than or equal to 33 millicuries of sodium iodine I-131, for which a written directive is required
- 4731.4440 oral administration of greater than 33 millicuries of sodium iodine I-131
- 4731.4440 parenteral administration of any beta-emitter, or a photon-emitting radionuclide with a photon energy of less than 150 keV for which a written directive is required
- 4731.4440 parenteral administration of any other radionuclide for which a written directive is required
- 4731.4450
- 4731.4460
- 4731.4463 (remote afterloader)
- 4731.4463 (teletherapy)
- 4731.4463 (gamma stereotactic radiosurgery)
- 4731.4404 emerging technologies, including:

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

AND

**Third Section
Complete for ALL**

I attest that _____ 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 a Radiation Safety Officer for: _____
Name of Facility

License or Permit Number: _____

Name of Preceptor	Signature	Date
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Telephone Number	License or Permit Number and Facility Name
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RADIATION SAFETY OFFICER

General Instructions and Guidance for Completing MDH Form 313 Series

Recentness of Training

The required training and experience, including board certification, must be obtained within the seven years preceding the date of the application, or the individual must document having had related continuing education, retraining, and experience since obtaining the required training and experience. Examples of acceptable continuing education and experience include the following:

1. Successful completion of classroom and laboratory review courses that include radiation safety practices relative to the proposed type of authorized medical use;
2. Practical and laboratory experience with patient procedures using radioactive material for the same use(s) for which the applicant is requesting authorization;
3. Practical and laboratory experience under the supervision of an AU at the same or another licensed facility that is authorized for the same use(s) for which the applicant is requesting authorization; and
4. For therapy devices, experience with the therapy unit and/or comparable linear accelerator experience and completion of an in-service review of operating and emergency procedures relative to the therapy unit to be used by the applicant.

If the applicant is proposing an individual for more than one type of authorization, the applicant may need to either submit multiple MDH Form 313 series forms or fill out some sections more than once. Also, if the applicant requests a physician be authorized for both high dose rate remote afterloading and gamma stereotactic radiosurgery in accordance with 4731.4463, only one form, MDH Form 313 (AUS) needs to be completed, but one part (i.e., "Supervised Work and Clinical Experience") must be filled out twice.

If you need to identify a license and it is an NRC or Agreement State license not issued by MDH, provide a copy of the license. If you need to identify an NRC Master Materials License permit, provide a copy of the permit.

If you need to identify an individual (i.e., supervising individual or preceptor) who is authorized under a broad scope license or broad scope permit, provide a copy of the permit issued by the broad scope licensee/permittee.

Name of individual

Provide the individual's complete name so that MDH can distinguish the training and experience received from that received by others with a similar name.

Note: Do not include personal or private information (e.g., date of birth, social security number, home address, personal phone number) as part of your qualification documentation.

State or territory where licensed

Physicians, dentists, podiatrists, and pharmacists are required to be licensed by a state or territory of the United States, the District of Columbia, or the Commonwealth of Puerto Rico to prescribe drugs in the practice of medicine, practice of dentistry, practice of podiatry, or practice of pharmacy, respectively.

Requested Authorization(s)

Check all authorizations that apply and fill in the blanks as provided.

Part I. Training and Experience

There are always multiple pathways provided for each training and experience section. Select the applicable one.

Item 1. Board Certification

The applicant or licensee may use this pathway if the proposed new authorized individual is certified by a board recognized by MDH. To confirm that MDH recognizes that boards certifications see NRC's web page <http://www.nrc.gov/materials/miau/med-use-toolkit.html>.

Note: An individual that is board eligible will not be considered for this pathway until the individual is actually board certified. Further, individuals holding other board certifications will also not be considered for this pathway.

The applicant or licensee will need to provide a copy of the board certification and other training, experience, or clinical casework as indicated on the specific form of the MDH Form 313 series.

All applicants under this pathway (except for 4731.4460 uses) must submit a completed Part II Preceptor Attestation.

Item 2. Current Authorized Individuals Seeking Additional Authorizations

Provide the information requested for training, experience, or clinical casework as indicated on the specific form of the MDH Form 313 series. (**Note:** This section does not include individuals who are authorized only on foreign licenses.)

All applicants under this pathway must submit a completed Part II Preceptor Attestation.

Item 3. Training and Experience for Proposed New Authorized Individuals

This pathway is used for those individuals not listed on the license as an authorized individual, who cannot meet requirements for the board certification pathway.

The proposed authorized individual is not required to receive the classroom and laboratory training, supervised work experience, or clinical casework at any one location or at one time, therefore space is provided to identify each location and date of training or experience. The date should be provided in the month/day/year format. The clock hours must be indicated for those individuals that must meet a minimum number of training and work experience hours. The specific number of hours needed for each training element will depend upon the type of approval sought.

Note: Classroom and Laboratory Training or Didactic Training may be provided at medical teaching/university institutions. In some cases, a course may be provided for that particular need and taught in consecutive days; in others, the period may be a semester or quarter as part of the formal curriculum. The required "structural educational programs" or "training" may be obtained in any number of settings, locations, and educational situations.

MDH expects that clinical laboratory hours credited toward meeting the requirements for classroom and laboratory training will involve training in radiation safety aspects of the medical use of byproduct material. MDH recognizes, for example, that physicians in training may not dedicate all of their clinical laboratory time specifically to the subject areas covered in these subparts and will be attending to other clinical matters involving the medical use of the material under the supervision of an AU (e.g., reviewing case histories or interpreting scans). However, those hours spent on other duties, not related to radiation safety, should not be counted toward the minimum number of hours of required classroom and laboratory training in radiation safety.

This type of supervised work experience, even though not specifically required by the MDH, may be counted toward the supervised work experience to obtain the required total hours of training.

Similarly, the MDH recognizes that clinicians will not dedicate all of their time in training specifically to the subject areas described and will be attending to other clinical matters. The MDH will broadly interpret "classroom training" to include various types of instruction received by candidates for approval, including online training, as long as the subject matter relates to radiation safety and safe handling of byproduct material.

Note: If the proposed new authorized individual had more than one supervisor, provide the information requested for each supervising individual.

Part II. Preceptor Attestation

MDH defines the term "preceptor" to mean "an individual who provides, directs, or verifies training and experience required for an individual to become an authorized user, an authorized medical physicist, an authorized nuclear pharmacist, or a Radiation Safety Officer." While the supervising individual for the work experience may also be the preceptor, the preceptor does not have to be the supervising individual as long as the preceptor directs or verifies the training and experience required. The preceptor must attest in writing regarding the training and experience of any individual to serve as an authorized individual and attest that the individual has satisfactorily completed the appropriate training and experience criteria and has achieved a level of competency or a level of radiation safety knowledge sufficient to function independently. This preceptor also has to meet specific requirements.

MDH may require supervised work experience conducted under the supervision of an authorized individual in a licensed material use program. In this case, a supervisor is an individual who provides frequent direction, instruction, and direct oversight of the student as the student completes the required work experience in the use of byproduct material.

Supervision may occur at various licensed facilities, from a large teaching university hospital to a small private practice.

MDH Form 313 series Part II - Preceptor Attestation pages have multiple sections. The preceptor must complete an attestation of the proposed user's training, experience, and competency to function independently, as well as provide information concerning his/her own qualifications and sign the attestation. Because there are a number of different pathways to obtain the required training and experience for different authorized individuals, specific instructions are provided below for each MDH 313 series form.

Specific Instructions and Guidance for Completing MDH Form 313A (RSO)

Part I. Training and Experience - select one of four methods below:

Item 1. Board Certification

Provide the requested information, i.e., a copy of the board certification, documentation of specific radiation safety training for all types of use on the license, and completed preceptor attestation. As indicated on the form, additional information is needed if the board certification or radiation safety training was greater than seven years ago.

Specific radiation safety training for each type of use on the license may be supervised by a Radiation Safety Officer, an authorized medical physicist, authorized nuclear pharmacist, or authorized user who is authorized for that type of use. The applicant only has to identify the supervising individual in the table in 3.c and his/her qualifications if the source of this training was a Radiation Safety Officer, an authorized medical physicist, authorized nuclear pharmacist, or authorized user. If more than one supervising

individual provided the training, identify each supervising individual by name and provide their qualifications.

Item 2. Current Radiation Safety Officer Seeking Authorization to Be Recognized as a Radiation Safety Officer for the Additional Medical Use(s) Checked above.

Provide the requested information, i.e., documentation of specific radiation safety training (complete the table in 3.c) and completed preceptor attestation in Part II. As indicated on the form, additional information is needed if the specific radiation safety training was greater than seven years ago.

Specific radiation safety training for each type of use on the license may be supervised by a Radiation Safety Officer, an authorized medical physicist, authorized nuclear pharmacist, or authorized user who is authorized for that type of use. The applicant only has to identify the supervising individual in the table in 3.c and his/her qualifications if the source of this training was a Radiation Safety Officer, an authorized medical physicist, authorized nuclear pharmacist, or authorized user. If more than one supervising individual provided the training, identify each supervising individual by name and provide their qualifications.

Item 3. Structured Educational Program for Proposed New Radiation Safety Officer

As indicated on the form, additional information is needed if the training, supervised radiation safety experience, and specific radiation safety training was completed more than seven years ago.

Submit a completed section 3.a.

Submit a completed section 3.b. The individual must have completed one year of full-time radiation safety experience under the supervision of a Radiation Safety Officer. This is documented in section 3.b by providing the ranges of dates for supervised radiation safety experience. If there was more than one supervising individual, identify each supervising individual by name and provide their qualifications.

Provide the requested information, i.e., documentation of specific radiation safety training for each use on the license (complete the table in 3.c). Specific radiation safety training for each type of use on the license may be supervised by a Radiation Safety Officer, an authorized medical physicist, authorized nuclear pharmacist, or authorized user who is authorized for that type of use. The applicant only has to identify the supervising individual in the table in 3.c and his/her qualifications if the source of this training was a Radiation Safety Officer, an authorized medical physicist, authorized nuclear pharmacist, or authorized user. If more than one supervising individual provided the training, identify each supervising individual by name and provide their qualifications.

Submit a completed preceptor attestation in Part II.

Item 4. Authorized User, Authorized Medical Physicist, or Authorized Nuclear Pharmacist Identified on the Licensee's License

Provide the requested information, i.e., the license number and documentation of specific radiation safety training for each use on the license (complete the table in 3.c). As indicated on the form, additional information is needed if the specific radiation safety training was greater than seven years ago.

Specific radiation safety training for each type of use on the license may be supervised by a Radiation Safety Officer, an authorized medical physicist, authorized nuclear pharmacist, or authorized user who is authorized for that type of use. If more than one supervising individual provided the training, identify each supervising individual by name and provide their qualifications.

Part II. Preceptor Attestation

The Preceptor Attestation page has four sections.

- The attestation to the new proposed Radiation Safety Officer's training or identification on the license as an authorized user, authorized medical physicist, or authorized nuclear pharmacist is in the first section.
- The attestation for the specific radiation safety training is in the second section.
- The attestation of the individual's competency to function independently as a Radiation Safety Officer for a medical use license is in the third section.
- The fourth and final section requests specific information about the preceptor's authorization as a Radiation Safety Officer on a medical use license in addition to the preceptor's signature.

The preceptor for a new proposed Radiation Safety Officer must fill out all four sections of this page.

The preceptor for a Radiation Safety Officer seeking authorization to be recognized as a Radiation Safety Officer for the additional medical use(s) must fill out the second, third, and fourth sections.