FORM RM-HU(AUT) Alabama Department of Public Health - Radiation Control			
AUTHORIZED USER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (for uses defined under 420-3-2607(52)) [420-3-2607(56), (57), (58) and (59)]			
Name of Propose	ed Authorized User	Name of Licensee Where Physic	cian Wishes to be Approved
Requested Auth	horization(s) (check all that apply):		
.07(52)	Use of unsealed radioactive material for wh	ich a written directive is requir	ed
OR			
.07(52)	.07(52) Oral administration of sodium iodide I-131 requiring a written directive in quantities less than or equal to 1.22 gigabecquerels (33 millicuries)		
.07(52)	.07(52) Oral administration of sodium iodide I-131 requiring a written directive in quantities greater than 1.22 gigabecquerels (33 millicuries)		
.07(52)	.07(52) 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		
.07(52)	Parenteral administration of any other radio	nuclide for which a written dire	ective is required
		G AND EXPERIENCE	
(Select one of the three 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 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. <u>Board (</u>	Certification		
a. Provide	e a copy of the board certification.		
	 b. For .07(56), provide documentation of supervised clinical case experience. The table in section 3.c. may be used to document this experience. 		
c. For .07(59), provide documentation of classroom and laboratory training, supervised work experience, and supervised clinical case experience. The tables 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.			
2. Current	2. Current .07(52), .07(60), or .07(72) Authorized Users Seeking Additional Authorization		
	a. Authorized User on Materials License under the requirements below or		
equivalent NRC or Agreement State requirements (check all that apply):			
.07	(56) .07(57) .07(58)	.07(68) .07(89	Э)
required	b. If currently authorized for a subset of clinical uses under .07(52), provide documentation on additional required supervised case experience. The table in section 3.c. may be used to document this experience. Also provide completed Part II Preceptor Attestation.		
 c. If currently authorized under .07(68) or .07(89) and requesting authorization for .07(59), provide documentation on classroom and laboratory training, supervised work experience, and supervised clinical case experience. The tables in sections 3.a., 3.b., and 3.c. may be used to document this experience. Also provide completed Part II Preceptor Attestation. New or first-time Authorized Users must complete sections 3.a., b. and c. and Part II, Preceptor Attestation 			

AUTHORIZED USER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)			
3. <u>Training and Experience for</u>			
a. Classroom and Laboratory Tra	aining .07(56) .07(57) .07(58) .	07(59)
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 Classroom and Laboratory Training:			
b. Supervised Work Experience .07(56) .07(57) .07(58) .07(59) If more than one supervising individual is necessary to document supervised training, provide multiple copies of this page.			
Description of Experience	Location of Experience/License or Permit Number of Facility	Clock Hours	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 misadministration involving the use of unsealed radioactive material			
Using procedures to contain spilled radioactive material safely and using proper decontamination procedures			
Total Hours	of Supervised Work Experience:		

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AUTHORIZED USER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)		
3. Training and Experience for Proposed Author	<u>rized User</u> (continued)	
b. Supervised Work Experience (continued)		
Supervising Individual	License/Permit Name and Number listing supervising individual as an authorized user	
Supervisor meets the requirements below (or eq	quivalent from NRC or Agreement State). [check all that apply]**:	
 .07(57) Oral Nal-131 requiring a written directive in quantities less than or equal to 1.22 gigabecquerels (33 millicuries) .07(58) .07(59) Oral Nal-131 in quantities greater than 1.22 gigabecquerels (33 millicuries) Parenteral administration of beta-emitter, or photon-emitting radionuclide with a photon energy less than 150 keV requiring a written directive 		
 ** Supervising Authorized User must have experience in ac requesting authorized user status. 	dministering dosages in the same dosage category or categories as the individual	

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 or Permit Number of Facility	Dates of Experience*
Oral administration of sodium iodide I-131 requiring a written directive in quantities less than or equal to 1.22 gigabecquerels (33 millicuries)			
Oral administration of sodium iodide I-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 adminstration of any other radionuclide for which a written directive is required			
(List radionuclides)			

FORM RM-HU(AUT) AUTHORIZED USER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)			
3. <u>Training and Experience for Proposed Authorized</u>	User (continued)		
c. Supervised Clinical Case Experience (continued)			
Supervising Individual	License/Permit Number listing supervising individual as an authorized user		
Supervisor meets the requirements below (or equivale	ent from NRC or Agreement State). [check all that apply]**:		
.07(56) With experience administering dosage	is of:		
.07(57) Oral Nal-131 requiring a written dir gigabecquerels (33 millicuries)	rective in quantities less than or equal to 1.22		
.07(59) Oral Nal-131 in quantities greater t	Oral Nal-131 in quantities greater than 1.22 gigabecquerels (33 millicuries)		
	her radionuclide requiring a written directive		
** Supervising Authorized User must have experience in administ requesting authorized user status.	stering dosages in the same dosage category or categories as the individual		
d. Provide completed Part II Preceptor Attestation.			
PART II – PRECE	EPTOR 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 for each requested authoriz	First Section Check one of the following for each requested authorization:		
<u>For .07(56):</u>			
Board Certification			
I attest that Name of Proposed Authorized User	has satisfactorily completed the training and experience		
requirements in 420-3-2607(56)(a)1.			
OR			
Training and Experience	has satisfactorily completed the 700 hours of training		
Name of Proposed Authorized User			
and experience, including a minimum of 200 hours of classroom and laboratory training, as required by 429-3-2607(56)(b)1.			

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AUTHORIZED L	AUTHORIZED USER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)			
Preceptor Attestation	continued)			
First Section (continu	ued)			
For .07(57) (Identica	I Attestation Statement Regardle	ess of Training and Experience Pathway):		
I attest that		has satisfactorily completed the 80 hours of classroom		
	Name of Proposed Authorized User			
	training, as required by 420-3-260 uired in 420-3-2607(57)(c)2.	07(57)(c)1., and the supervised work and clinical case		
For .07(58) (Identica	I Attestation Statement Regardle	ess of Training and Experience Pathway):		
I attest that		has satisfactorily completed the 80 hours of classroom		
_	Name of Proposed Authorized User			
	training, as required by 420-3-260 uired in 420-3-2607(58)(c)2.	07(58)(c)1., and the supervised work and clinical case		
Second Section				
I attest that	Name of Proposed Authorized User	has satisfactorily completed the required clinical case		
experience req	uired in 420-3-2607(57)(b)1.(ii)(V	II) listed below:		
	1 requiring a written directive in qu rels (33 millicuries)	antities less than or equal to 1.22		
Oral Nal-13	1 in quantities greater than 1.22 gi	gabecquerels (33 millicuries)		
	administration of beta-emitter, or ph than 150 keV requiring a written d	hoton-emitting radionuclide with a photon lirective is required		
Parenteral administration of any other radionuclide requiring a written directive				
Third Section				
I attest that		has satisfactorily achieved a level of competency to		
	Name of Proposed Authorized User			
function indepe	endently as an authorized user for:			
	1 requiring a written directive in qu rels (33 millicuries)	antities less than or equal to 1.22		
Oral Nal-131 in quantities greater than 1.22 gigabecquerels (33 millicuries)				
	administration of beta-emitter, or ph than 150 keV requiring a written d	hoton-emitting radionuclide with a photon lirective is required		
Parenteral a	administration of any other radionu	clide requiring a written directive		
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AUTHORIZED USER TRAINI	NG AND EXPERIENCE AND PRECEP	TOR ATTESTATION (continued)		
Fourth Section				
<u>For .07(59):</u>				
<u>Current .07(68) or .07(89) autho</u>	orized user:			
I attest that	I attest that is an authorized user under 420-3-2607(68) or (89) or			
equivalent NRC orAgreement laboratory training, as require experience required by 420-3	equivalent NRC orAgreement State requirements, has satisfactorily completed the 80 hours of classroom and laboratory training, as required by 420-3-2607(59)(d)1., and the supervised work and clinical case experience required by 420-3-2607(59)(d)2., and has achieved a level of competency sufficient to function independently as an authorized user for:			
	of any beta-emitter, or photon-emitting written directive is required	radionuclide with a photon energy less		
Parenteral adminstration of	of any other radionuclide for which a wr	itten directive is required		
	OR			
Board Certification:				
I attest that		y completed the board certification		
	posed Authorized User (59(c) has satisfactorily completed the	80 hours of classroom and laboratory		
training required by 420-3-26-	requirements of 420-3-2607(59(c), has satisfactorily completed the 80 hours of classroom and laboratory training required by 420-3-2607(59)(d)1., and the supervised work and clinical case experience required by 420-3-2607(59)(d)2., and has achieved a level of competency sufficient to function independently as an authorized user for:			
	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 adminstration of	of any other radionuclide for which a wr	itten directive is required		
Fifth Section Complete the following for preceptor attestation and signature:				
I meet the requirements below, c	or equivalent Agreement State requirem	nents, as an authorized user for:		
.07(56) .07(57)	.07(58) .07(59)			
I have experience administering dosages in the following categories for which the proposed Authorized User is requesting authorization.				
Oral Nal-131 requiring a written directive in quantities less than or equal to 1.22 gigabecquerels (33 millicuries)				
Oral Nal-131 in quantities greater than 1.22 gigabecquerels (33 millicuries)				
 Parenteral administration of beta-emitter, or photon-emitting radionuclide with a photon energy less than 150 keV requiring a written directive is required 				
Parenteral administration of any other radionuclide requiring a written directive				
Name of Preceptor	Signature	Telephone Number Date		
License/Permit Number/Facility Name				