

41.2(68) Training for imaging and localization studies. Except as provided in 41.2(76), the licensee shall require the authorized user of unsealed radioactive material specified in 41.2(33) to be a physician who:

a. Is certified by a medical specialty board whose certification process has been recognized by the agency, NRC, or an agreement state and who meets the requirements in 41.2(68)“*c.*” (The names of specialty boards that have been recognized by the agency, NRC, or agreement state must be posted on the NRC’s Web page.) To have its certification process recognized, a specialty board shall require all candidates for certification to:

(1) Complete 700 hours of training and experience in basic radionuclide handling techniques and radiation safety applicable to the medical use of unsealed radioactive material for uptake, dilution, and excretion studies that include the topics listed in 41.2(68)“*c*”(1)“1” and “2”; and

(2) Pass an examination administered by diplomats of the specialty board, which assesses knowledge and competence in radiation safety, radionuclide handling, and quality control; or

b. Is an authorized user under 41.2(69) and meets the requirements in 41.2(68)“*c*”(1)“2,” seventh bulleted paragraph, or before May 3, 2006, meets the requirements in 10 CFR 35.920, or equivalent agreement state requirements; or

c. (1) Has completed 700 hours of training and experience, including a minimum of 80 hours of classroom and laboratory training, in basic radionuclide handling techniques applicable to the medical use of unsealed radioactive material for imaging and localization studies. The training and experience must include, at a minimum:

1. Classroom and laboratory training in the following areas:

- Radiation physics and instrumentation;
- Radiation protection;
- Mathematics pertaining to the use and measurement of radioactivity;
- Chemistry of radioactive material for medical use;
- Radiation biology, and

2. Work experience, under the supervision of an authorized user who meets the requirements in 41.2(68) or 41.2(68)“*c*”(1)“2,” seventh bulleted paragraph, and 41.2(69), or before May 3, 2006, meets the requirements in 10 CFR 35.920, or equivalent agreement state requirements, involving:

- 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;
- Administering dosages of radioactive drugs to patients or human research subjects; and
- 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; and

(2) Has obtained written attestation, signed by a preceptor authorized user who meets the requirements in 41.2(68) or 41.2(69) and 41.2(68)“*c*”(1)“2,” seventh bulleted paragraph, or, before May 3, 2006, meets the requirements in 10 CFR 35.920, or equivalent agreement state requirements, that the individual has satisfactorily completed the requirements in 41.2(68)“*a*”(1) or 41.2(68)“*c*”(1) and has achieved a level of competency sufficient to function independently as an authorized user for the medical uses authorized under 41.2(31) and 41.2(33).

d. Be identified on a current Agreement State or NRC license as an authorized user for those uses listed in 41.2(33).

41.2(69) *Training for use of unsealed by-product material for which a written directive is required.* Except as provided in 41.2(75), the licensee shall require an authorized user of unsealed radioactive material for the uses authorized under 41.2(37) to be a physician who:

a. Is certified by a medical specialty board whose certification process has been recognized by the agency, NRC, or an agreement state and who meets the requirements in 41.2(69)“b”(1)“2,” seventh bulleted paragraph, and 41.2(69)“b”(2). (The names of the specialty boards that have been recognized by the agency, NRC, or agreement state must be posted on the NRC’s Web page.) To be recognized, a specialty board shall require all candidates for certification to:

(1) Successfully complete residency training in a radiation therapy or nuclear medicine training program or a program in a related medical specialty. These residency training programs must include 700 hours of training and experience as described in 41.2(69)“b”(1)“1” through 41.2(69)“b”(1)“2,” fifth bulleted paragraph. Eligible training programs must be approved by the Residency Review Committee of the Accreditation Council for Graduate Medical Education, the Royal College of Physicians and Surgeons of Canada, or the Committee on Post-Graduate Training of the American Osteopathic Association; and

(2) Pass an examination, administered by diplomats of the specialty board, which tests knowledge and competence in radiation safety, radionuclide handling, quality assurance, and clinical use of unsealed radioactive material for which a written directive is required; or

b. (1) Has completed 700 hours of training and experience, including a minimum of 200 hours of classroom and laboratory training, in basic radionuclide handling techniques applicable to the medical use of unsealed radioactive material requiring a written directive. The training and experience must include:

1. Classroom and laboratory training in the following areas:

- Radiation physics and instrumentation;
- Radiation protection;
- Mathematics pertaining to the use and measurement of radioactivity;
- Chemistry of radioactive material for medical use; and
- Radiation biology; and

2. Work experience, under the supervision of an authorized user who meets the requirements in 41.2(69), or before May 3, 2006, meets the requirements in 10 CFR 35.930, or equivalent agreement state requirements. A supervising authorized user who meets the requirements in 41.2(69)“b,” or before May 3, 2006, meets the requirements in 10 CFR 35.930(b) must also have experience in administering dosages in the same dosage category or categories (i.e., 41.2(69)“b”(1)“2,” seventh bulleted paragraph) as the individual requesting authorized user status. The work experience must involve:

- 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;
- Reserved.
- Administering dosages of radioactive drugs to patients or human research subjects involving a minimum of three cases in each of the following categories for which the individual is requesting authorized user status:
 - Oral administration of less than or equal to 33 millicuries (1.22 Gigabecquerels) of sodium iodide I-131, for which a written directive is required;

– Oral administration of greater than 33 millicuries (1.22 Gigabecquerels) of sodium iodide I-131 (experience with at least three cases in this category also satisfies the requirement in the above category);

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

– Parenteral administration of any other radionuclide for which a written directive is required; and

(2) Has obtained written attestation that the individual has satisfactorily completed the requirements in 41.2(69)“a”(1) and 41.2(69)“b”(1)“2,” seventh bulleted paragraph, or 41.2(69)“b”(1), and has achieved a level of competency sufficient to function independently as an authorized user for the medical uses authorized under 41.2(37). The written attestation must be signed by a preceptor authorized user who meets the requirements in 41.2(69), or before May 3, 2006, meets the requirements in 10 CFR 35.930, or equivalent agreement state requirements. The preceptor authorized user who meets the requirements in 41.2(69)“b,” or before May 3, 2006, meets the requirements in 10 CFR 35.930(b), must have experience in administering dosages in the same dosage category or categories (i.e., 41.2(69)“b”(1)“2,” seventh bulleted paragraph) as the individual requesting authorized user status.

c. For training only for oral administration of sodium iodide I-131 requiring a written directive in quantities less than or equal to 33 millicuries (1.22 Gigabecquerels) or quantities greater than 33 millicuries (1.22 Gigabecquerels), see 41.2(81) or 41.2(82).

41.2(70) Training for use of manual brachytherapy sources. Except as provided in 41.2(75), the licensee shall require an authorized user of a manual brachytherapy source for the uses authorized in 41.2(43) to be a physician who:

a. Is certified by a medical specialty board whose certification process has been recognized by the agency, NRC, or an agreement state, and who meets the requirements in 41.2(70)“b”(3). (The names of the specialty boards that have been recognized by the agency, NRC, or agreement state must be posted on the NRC’s Web page.) To have its certification process recognized, a specialty board shall require all candidates for certification to:

(1) Successfully complete a minimum of three years of residency training in a radiation oncology program approved by the Residency Review Committee of the Accreditation Council for Graduate Medical Education or the Royal College of Physicians and Surgeons of Canada or the Committee on Post-Graduate Training of the American Osteopathic Association; and

(2) Pass an examination, administered by diplomats of the specialty board, that tests knowledge and competence in radiation safety, radionuclide handling, treatment planning, quality assurance, and clinical use of manual brachytherapy; or

b. (1) Has completed a structured educational program in basic radionuclide handling techniques applicable to the use of manual brachytherapy sources that includes:

1. 200 hours of classroom and laboratory training in the following areas:

- Radiation physics and instrumentation;
- Radiation protection;
- Mathematics pertaining to the use and measurement of radioactivity; and
- Radiation biology; and

2. 500 hours of work experience, under the supervision of an authorized user who meets the requirements in 41.2(70), or before May 3, 2006, meets the requirements in 10 CFR 35.940, or equivalent agreement state requirements at a medical institution, involving:

- Ordering, receiving, and unpacking radioactive materials safely and performing the related radiation surveys;
- Checking survey meters for proper operation;
- Preparing, implanting, and removing brachytherapy sources;
- Maintaining running inventories of material on hand;

- Using administrative controls to prevent a medical event involving the use of radioactive material; and

- Using emergency procedures to control radioactive material; and

(2) Has completed three years of supervised clinical experience in radiation oncology under an authorized user who meets the requirements in 41.2(70), or before May 3, 2006, meets the requirements in 10 CFR 35.940, or equivalent agreement state requirements, as part of a formal training program approved by the Residency Review Committee for Radiation Oncology of the Accreditation Council for Graduate Medical Education or the Royal College of Physicians and Surgeons of Canada or the Committee on Postdoctoral Training of the American Osteopathic Association. This experience may be obtained concurrently with the supervised work experience required in 41.2(70) “b”(1)“2”; and

(3) Has obtained written attestation, signed by a preceptor authorized user who meets the requirements in 41.2(70), or before May 3, 2006, meets the requirements in 10 CFR 35.940, or equivalent agreement state requirements, that the individual has satisfactorily completed the requirements in 41.2(70) “a”(1) or 41.2(70) “b”(1) and (2), and has achieved a level of competency sufficient to function independently as an authorized user of manual brachytherapy sources for the medical uses in 41.2(43).

41.2(71) Training for ophthalmic use of strontium-90. Except as provided in 41.2(75), the licensee shall require the authorized user of strontium-90 for ophthalmic radiotherapy to be a physician who:

a. Is an authorized user under 41.2(70), or before May 3, 2006, meets the requirements in 10 CFR 35.940 or 35.941, or equivalent agreement state requirements; or

b. (1) Has completed 24 hours of classroom and laboratory training applicable to the medical use of strontium-90 for ophthalmic radiotherapy. The training must include:

1. Radiation physics and instrumentation;
2. Radiation protection;
3. Mathematics pertaining to the use and measurement of radioactivity; and
4. Radiation biology; and

(2) Has completed supervised clinical training in ophthalmic radiotherapy under the supervision of an authorized user at a medical institution, clinic, or private practice that includes the use of strontium-90 for the ophthalmic treatment of five individuals. This supervised clinical training must involve:

1. Examination of each individual to be treated;
2. Calculation of the dose to be administered;
3. Administration of the dose; and
4. Follow-up and review of each individual’s case history; and

(3) Has obtained written attestation, signed by a preceptor authorized user who meets the requirements in 41.2(70) or 41.2(71), or before May 3, 2006, meets the requirements in 10 CFR 35.940 or 35.941, or equivalent agreement state requirements, that the individual has satisfactorily completed the requirements in 41.2(71) “a” and “b” and has achieved a level of competency sufficient to function independently as an authorized user of strontium-90 for ophthalmic use.

41.2(72) Training for use of sealed sources for diagnosis. Except as provided in 41.2(75), the licensee shall require the authorized user of a diagnostic sealed source for use in a device authorized under 41.2(41) to be a physician, dentist, or podiatrist who:

a. Is certified by a specialty board whose certification process includes all of the requirements in 41.2(72) “b” and “c” and whose certification has been recognized by the agency, NRC, or an agreement state. (The names of the specialty boards that have been recognized by the agency, NRC, or agreement state must be posted on the NRC’s Web page.); or

b. Has completed eight hours of classroom and laboratory training in basic radionuclide handling techniques specifically applicable to the use of the device. The training must include:

- (1) Radiation physics and instrumentation;
- (2) Radiation protection;
- (3) Mathematics pertaining to the use and measurement of radioactivity; and
- (4) Radiation biology; and

c. Has completed training in the use of the device for the uses requested.

41.2(73) Training for use of remote afterloader units, teletherapy units, and gamma stereotactic radiosurgery units. Except as provided in 41.2(75), the licensee shall require an authorized user of a sealed source for use authorized in 41.2(49) to be a physician who:

a. Is certified by a medical specialty board whose certification process has been recognized by the agency, NRC, or an agreement state, and who meets the requirements in 41.2(73)“b”(3) and 41.2(73)“c.” (The names of the specialty boards that have been recognized by the agency, NRC, or agreement state must be posted on the NRC’s Web page.) To have its certification process recognized, a specialty board shall require all candidates for certification to:

(1) Successfully complete a minimum of three years of residency training in a radiation therapy program approved by the Residency Review Committee of the Accreditation Council for Graduate Medical Education or the Royal College of Physicians and Surgeons of Canada or the Committee on Post-Graduate Training of the American Osteopathic Association; and

(2) Pass an examination, administered by diplomats of the specialty board, which tests knowledge and competence in radiation safety, radionuclide handling, treatment planning, quality assurance, and clinical use of stereotactic radiosurgery, remote afterloaders, and external beam therapy; or

b. (1) Has completed a structured educational program in basic radionuclide techniques applicable to the use of a sealed source in a therapeutic medical unit that includes:

1. 200 hours of classroom and laboratory training in the following areas:

- Radiation physics and instrumentation;
- Radiation protection;
- Mathematics pertaining to the use and measurement of radioactivity; and
- Radiation biology; and

2. 500 hours of work experience, under the supervision of an authorized user who meets the requirements in 41.2(73), or before May 3, 2006, meets the requirements in 10 CFR 35.960, or equivalent agreement state requirements at a medical institution, involving:

- Reviewing full calibration measurements and periodic spot checks;
- Preparing treatment plans and calculating treatment doses and times;
- Using administrative controls to prevent a medical event involving the use of radioactive material;
- Implementing emergency procedures to be followed in the event of the abnormal operation of the medical unit or console;
- Checking and using survey meters; and
- Selecting the proper dose and how it is to be administered; and

(2) Has completed three years of supervised clinical experience in radiation therapy under an authorized user who meets the requirements in 41.2(73), or before May 3, 2006, meets the requirements in 10 CFR 35.960, or equivalent agreement state requirements, as part of a formal training program approved by the Residency Review Committee for Radiation Oncology of the Accreditation Council for Graduate Medical Education or the Royal College of Physicians and Surgeons of Canada or the Committee on Postdoctoral Training of the American Osteopathic Association. This experience may be obtained concurrently with the supervised work experience required by 41.2(73)“b”(1)“2”; and

(3) Has obtained written attestation that the individual has satisfactorily completed the requirements in 41.2(73)“a”(1) or 41.2(73)“b”(1) and (2), and 41.2(73)“c,” and has achieved a level of competency sufficient to function independently as an authorized user of each type of therapeutic medical unit for which the individual is requesting authorized user status. The written attestation must be signed by a preceptor authorized user who meets the requirements in 41.2(73), or before May 3, 2006, the requirements in 10 CFR 35.960, or equivalent agreement state requirements for an authorized user for each type of therapeutic medical unit for which the individual is requesting authorized user status; and

c. Has received training in device operation, safety procedures, and clinical use for the type of use for which authorization is sought. This training requirement may be satisfied by satisfactory completion of a training program provided by the vendor for new users or by receiving training supervised by an authorized user or authorized medical physicist, as appropriate, who is authorized for the type of use for which the individual is seeking authorization.

41.2(74) Training for an authorized medical physicist. Except as provided in 41.2(75), the licensee shall require the authorized medical physicist to be an individual who:

a. Is certified by a specialty board whose certification process has been recognized by the agency, NRC, or an agreement state and who meets the requirements in 41.2(74)“b”(2) and 41.2(74)“c.” (The names of the specialty boards that have been recognized by the agency, NRC, or agreement state must be posted on the NRC’s Web page.) To have its certification process recognized, a specialty board shall require all candidates for certification to:

(1) Hold a master’s or doctor’s degree in physics, medical physics, other physical science, engineering, or applied mathematics from an accredited college or university;

(2) Have two years of either full-time practical training or supervised experience in medical physics:

1. Under the supervision of a medical physicist who is certified in medical physics by a specialty board recognized by the agency, NRC, or an agreement state; or

2. In clinical radiation facilities providing high-energy, external beam therapy (photons and electrons with energies greater than or equal to 1 million electron volts) and brachytherapy services under the direction of physicians who meet the requirements for authorized users in 41.2(70) or 41.2(73); and

(3) Pass an examination, administered by diplomats of the specialty board, that assesses knowledge and competence in clinical radiation therapy, radiation safety, calibration, quality assurance, and treatment planning for external beam therapy, brachytherapy, and stereotactic radiosurgery; or

b. (1) Holds a master’s or doctor’s degree in physics, medical physics, other physical science, engineering, or applied mathematics from an accredited college or university; and has completed one year of full-time training in medical physics and an additional year of full-time work experience under the supervision of an individual who meets the requirements for an authorized medical physicist for the type of use for which the individual is seeking authorization. This training and work experience must be conducted in clinical radiation facilities that provide high-energy, external beam therapy (photons and electrons with energies greater than or equal to 1 million electron volts) and brachytherapy services and must include:

1. Performing sealed source leak tests and inventories;

2. Performing decay corrections;

3. Performing full calibration and periodic spot checks of external beam treatment units, stereotactic radiosurgery units, and remote afterloading units, as applicable; and

4. Conducting radiation surveys around external beam treatment units, stereotactic radiosurgery units, and remote afterloading units, as applicable; and

(2) Has obtained written attestation that the individual has satisfactorily completed the requirements in 41.2(74)“a”(1) and (2) and 41.2(74)“c” or 41.2(74)“b”(1) and 41.2(74)“c,” and has achieved a level of competency sufficient to function independently as an authorized medical physicist for each type of therapeutic medical unit for which the individual is requesting authorized medical physicist status. The written attestation must be signed by a preceptor authorized medical physicist who meets the requirements in 41.2(74), or before May 3, 2006, the requirements in 10 CFR 35.961, or equivalent agreement state requirements for an authorized medical physicist for each type of therapeutic medical unit for which the individual is requesting authorized medical physicist status; and

c. Has training for the type of use for which authorization is sought that includes hands-on device operation, safety procedures, clinical use, and the operation of a treatment planning system. This training requirement may be satisfied by satisfactorily completing either a training program provided by the vendor or by training supervised by an authorized medical physicist who is authorized for the type of use for which the individual is seeking authorization.

41.2(75) *Training for experienced radiation safety officer, authorized medical physicist, nuclear pharmacist, authorized nuclear pharmacist, authorized users and teletherapy or medical physicists.*

a. (1) An individual identified as a radiation safety officer, teletherapy or medical physicist, or nuclear pharmacist on an agency, NRC or agreement state license or a permit issued by an NRC or agreement state broad scope licensee or master material license permit or by a master material license permittee of broad scope before January 1, 2003, does not need to comply with the training requirements of 41.2(65), 41.2(74), or 41.2(78).

(2) An individual identified as a radiation safety officer, an authorized medical physicist, or an authorized nuclear pharmacist on the agency, NRC, or agreement state license or permit issued by the agency, NRC, or agreement state broad scope licensee or issued by master material license permit or issued by a master material license permittee of broad scope between January 1, 2003, and May 3, 2006, need not comply with the training requirements of 41.2(65), 41.2(74), or 41.2(78).

b. (1) Physicians, dentists, or podiatrists identified as authorized users for the medical use of radioactive material on a license issued by the agency, the NRC, or agreement state, a permit issued by an NRC master material licensee, a permit issued by an NRC broad scope licensee, or a permit issued by an NRC master material license broad scope permittee before January 1, 2003, who perform only those medical uses for which they were authorized before that date need not comply with the training requirements of 41.2(67), 41.2(68), 41.2(69), 41.2(70), 41.2(71), 41.2(72), 41.2(73), 41.2(81), 41.2(82), or 41.2(89).

(2) Physicians, dentists, or podiatrists identified as authorized users for the medical use of radioactive material issued by the agency, the NRC, or agreement state, a permit issued by an NRC master material licensee, a permit issued by an NRC broad scope licensee, or a permit issued by an NRC master material license broad scope permittee who perform only those medical uses for which they were authorized between January 1, 2003, and May 3, 2006, need not comply with the training requirements of 41.2(67), 41.2(68), 41.2(69), 41.2(70), 41.2(71), 41.2(72), 41.2(73), 41.2(81), 41.2(82), or 41.2(89).

41.2(76) *Physician training in a three-month program.* A physician who, before July 1, 1984, began a three-month nuclear medicine training program approved by the Accreditation Council for Graduate Medical Education and has successfully completed the program, is exempted from the requirements of 41.2(67) or 41.2(68).

41.2(77) *Recentness of training.* The training and experience specified in 41.2(65) to 41.2(79) and 41.2(81), 41.2(82), and 41.2(89) shall have been obtained within the seven years preceding the date of application or the individual shall have had related continuing education and continuing applicable experience since the required training and experience were completed.

41.2(78) Training for an authorized nuclear pharmacist. Except as provided in 41.2(79), the licensee shall require the authorized nuclear pharmacist to be a pharmacist who:

a. Is certified as a nuclear pharmacist by a specialty board whose certification process includes all of the requirements of 41.2(78)“*b.*” (The names of the specialty boards that have been recognized by the agency, NRC, or agreement state must be posted on the NRC’s Web page.) To have its certification process recognized, a specialty board shall require all candidates for certification to:

(1) Have graduated from a pharmacy program accredited by the American Council on Pharmaceutical Education (ACPE) or have passed the Foreign Pharmacy Graduate Examination Committee (FPGEC) examination;

(2) Hold a current, active license to practice pharmacy;

(3) Provide evidence of having acquired at least 4,000 hours of combined training and experience in nuclear pharmacy practice. Academic training may be substituted for no more than 2,000 hours of the required training and experience; and

(4) Pass an examination in nuclear pharmacy administered by diplomats of the specialty board that assesses knowledge and competency in procurement, compounding, quality assurance, dispensing, distribution, health and safety, radiation safety, provision of information and consultation, monitoring patient outcomes, research and development; or

b. Has completed 700 hours in a structured education program consisting of both:

(1) 200 hours of classroom and laboratory training in the following areas:

1. Radiation physics and instrumentation;

2. Radiation protection;

3. Mathematics pertaining to the use and measurement of radioactivity;

4. Chemistry of radioactive material for medical use; and

5. Radiation biology; and

(2) Supervised practical experience in a nuclear pharmacy involving:

1. Shipping, receiving, and performing related radiation surveys;

2. Using and performing checks for proper operation of instruments used to determine the activity of dosages, survey meters and, if appropriate, instruments used to measure alpha- or beta-emitting radionuclides;

3. Calculating, assaying, and safely preparing dosages for patients or human research subjects;

4. Using administrative controls to avoid medical events in the administration of by-product material; and

5. Using procedures to prevent or minimize radioactive contamination and using proper decontamination procedures; and

c. Has obtained written attestation, signed by a preceptor authorized nuclear pharmacist, that the individual satisfactorily completed the requirements in 41.2(78)“*a*”(1), (2), and (3), or 41.2(78)“*b*”(1) and has achieved a level of competency sufficient to function independently as an authorized nuclear pharmacist.

41.2(79) Training for experienced nuclear pharmacists. An individual identified as a nuclear pharmacist on an NRC or agreement state license or permit issued by an NRC or agreement state broad scope licensee or master material license permit or by a master material license permittee of broad scope before January 1, 2003, need not comply with the training requirements of 41.2(78).

41.2(80) Training for nuclear medicine technologists. Rescinded IAB 4/2/03, effective 5/7/03.

41.2(81) *Training for the oral administration of sodium iodide I-131 requiring a written directive in quantities less than or equal to 33 millicuries (1.22 Gigabecquerels).* Except as provided in 41.2(75), the licensee shall require an authorized user for the oral administration of sodium iodide I-131 requiring a written directive in quantities less than or equal to 33 millicuries (1.22 Gigabecquerels) to be a physician who:

a. Is certified by a medical specialty board whose certification process includes all of the requirements in 41.2(81)“c”(1) and (2) and whose certification process has been recognized by the agency, NRC, or an agreement state and who meets the requirements in 41.2(81)“c”(3). (The names of the specialty boards that have been recognized by the agency, NRC, or agreement state must be posted on the NRC’s Web page.); or

b. Is an authorized user under 41.2(69)“a” or “b” for uses in the oral administration of less than or equal to 33 millicuries (1.22 Gigabecquerels) of sodium iodide I-131 for which a written directive is required, or oral administration of greater than 33 millicuries (1.22 Gigabecquerels) of sodium iodide I-131, or before May 3, 2006, who meets the requirements in 10 CFR 35.930, 35.932, or 35.934, or meets equivalent agreement state requirements; or

c. (1) Has successfully completed 80 hours of classroom and laboratory training, applicable to the medical use of sodium iodide I-131 for procedures requiring a written directive. The training must include:

1. Radiation physics and instrumentation;
2. Radiation protection;
3. Mathematics pertaining to the use and measurement of radioactivity;
4. Chemistry of radioactive material for medical use; and
5. Radiation biology; and

(2) Has work experience, under the supervision of an authorized user who meets the requirements in 41.2(69)“a” or “b,” or 41.2(82), or before May 3, 2006, meets the requirements in 10 CFR 35.930, 35.932, or 35.934, or equivalent agreement state requirements. A supervising authorized user who meets the requirements in 41.2(69)“b” must also have experience in administering dosages as follows: oral administration of less than or equal to 33 millicuries (1.22 Gigabecquerels) of sodium iodide I-131, for which a written directive is required; or oral administration of greater than 33 millicuries (1.22 Gigabecquerels) of sodium iodide I-131. The work experience must involve:

1. Ordering, receiving, and unpacking radioactive materials safely and performing the related radiation surveys;
2. Performing quality control procedures on instruments used to determine the activity of dosages and performing checks for proper operation of survey meters;
3. Calculating, measuring, and safely preparing patient or human research subject dosages;
4. Using administrative controls to prevent a medical event involving the use of radioactive material;
5. Using procedures to contain spilled radioactive material safely and using proper decontamination procedures; and
6. Administering dosages to patients or human research subjects that include at least three cases involving the oral administration of less than or equal to 33 millicuries (1.22 Gigabecquerels) of sodium iodide I-131; and

(3) Has obtained written attestation that the individual has satisfactorily completed the requirements in 41.2(81)“c”(1) and (2), and has achieved a level of competency sufficient to function independently as an authorized user for medical uses authorized under 41.2(37). The written attestation must be signed by a preceptor authorized user who meets the requirements in 41.2(69), 41.2(81), or 41.2(82), or before May 3, 2006, meets the requirements in 10 CFR 35.930, 35.932, or 35.934, or equivalent agreement state requirements. A preceptor authorized user who meets the requirements in 41.2(69)“b” must also have experience in administering dosages as follows: oral administration of less than or equal to 33 millicuries (1.22 Gigabecquerels) of sodium iodide I-131, for which a written directive is required; or oral administration of greater than 33 millicuries (1.22 Gigabecquerels) of sodium iodide I-131.

41.2(82) Training for the oral administration of sodium iodide I-131 requiring a written directive in quantities greater than 33 millicuries (1.22 Gigabecquerels). Except as provided in 41.2(75), the licensee shall require an authorized user for the oral administration of sodium iodide I-131 requiring a written directive in quantities greater than 33 millicuries (1.22 Gigabecquerels) to be a physician who:

a. Is certified by a medical specialty board whose certification process includes all of the requirements in 41.2(82)“c”(1) and (2), and whose certification has been recognized by the agency, NRC, or agreement state, and who meets the requirements in 41.2(82)“c”(3). (The names of the specialty boards that have been recognized by the agency, NRC, or agreement state must be posted on the NRC’s Web page.); or

b. Is an authorized user under 41.2(69)“a” or “b” for oral administration of greater than 33 millicuries (1.22 Gigabecquerels) of sodium iodide I-131, or before May 3, 2006, meets the requirements in 10 CFR 35.930 or 35.934, or meets equivalent agreement state requirements; or

c. (1) Has successfully completed 80 hours of classroom and laboratory training, applicable to the medical use of sodium iodide I-131 for procedures requiring a written directive. The training must include:

1. Radiation physics and instrumentation;
2. Radiation protection;
3. Mathematics pertaining to the use and measurement of radioactivity;
4. Chemistry of radioactive material for medical use; and
5. Radiation biology; and

(2) Has work experience, under the supervision of an authorized user who meets the requirements in 41.2(69)“a” or “b,” or 41.2(82), or before May 3, 2006, meets the requirements in 10 CFR 35.930 or 35.934, or equivalent agreement state requirements. A supervising authorized user who meets the requirements in 41.2(69)“b” must also have experience in oral administration of greater than 33 millicuries (1.22 Gigabecquerels) of sodium iodide I-131. The work experience must involve:

1. Ordering, receiving, and unpacking radioactive materials safely and performing the related radiation surveys;
2. Performing quality control procedures on instruments used to determine the activity of dosages and performing checks for proper operation of survey meters;
3. Calculating, measuring, and safely preparing patient or human research subject dosages;
4. Using administrative controls to prevent a medical event involving the use of radioactive material;
5. Using procedures to contain spilled radioactive material safely and using proper decontamination procedures; and
6. Administering dosages to patients or human research subjects that include at least three cases involving the oral administration of greater than 33 millicuries (1.22 Gigabecquerels) of sodium iodide I-131; and

(3) Has obtained written attestation that the individual has satisfactorily completed the requirements in 41.2(82)“c”(1) and (2), and has achieved a level of competency sufficient to function independently as an authorized user for medical uses authorized in 41.2(37). The written attestation must be signed by a preceptor authorized user who meets the requirements in 41.2(69) or 41.2(82), or before May 3, 2006, meets the requirements in 10 CFR 35.930 or 35.934, or equivalent agreement state requirements. A preceptor authorized user who meets the requirements in 41.1(69)“b” must also have experience in oral administration of greater than 33 millicuries (1.22 Gigabecquerels) of sodium iodide I-131.

41.2(83) Provisions for the protection of human research subjects.

a. A licensee may conduct research involving human research subjects only if the licensee uses the radioactive materials authorized on its specific license for the uses authorized on its license.

b. If the research is conducted, funded, supported, or regulated by another federal agency that has implemented Federal Policy for the Protection of Human Subjects (Federal Policy), the licensee shall, before conducting research:

(1) Obtain review and approval of the research from an “Institutional Review Board,” as defined and described in the Federal Policy; and

(2) Obtain “informed consent,” as defined and described in the Federal Policy, from the human research subjects.

c. If the research will not be conducted, funded, supported, or regulated by another federal agency that has implemented the Federal Policy, the licensee shall, before conducting research, apply for and receive a specific amendment to its medical use license. The amendment request must include a written commitment that the licensee will, before conducting research:

(1) Obtain review and approval of the research from an “Institutional Review Board,” as defined and described in the Federal Policy; and

(2) Obtain “informed consent,” as defined and described in the Federal Policy, from the human research subjects.

d. Nothing in this subrule relieves a licensee from complying with the other requirements of these rules.

41.2(84) Calibration measurements of brachytherapy sources.

a. Before the first medical use of a brachytherapy source on or after January 1, 2003, a licensee shall have:

(1) Determined the source output or activity using a dosimetry system that meets the requirements of 41.2(57);

(2) Determined the source positioning accuracy within applicators; and

(3) Used published protocols currently accepted by nationally recognized bodies to meet the requirements of 41.2(84)“a.”

b. A licensee may use measurements that are provided by the source manufacturer or by a calibration laboratory accredited by the American Association of Physicists in Medicine and that are made in accordance with 41.2(84)“a”(1) and (2).

c. A licensee shall mathematically correct the outputs or activities determined in 41.2(84)“a” for physical decay at intervals consistent with 1 percent physical decay.

d. A licensee shall retain a record of each calibration for three years after the last use of the source. The record must include:

(1) The date of the calibration;

(2) The manufacturer’s name, model number, and serial number for the source and the instruments used to calibrate the source;

(3) The source output or activity;

(4) The source positioning accuracy within the applicators; and

(5) The signature of the authorized medical physicist.

41.2(85) *Decay of strontium-90 sources for ophthalmic treatment.*

a. Only an authorized medical physicist shall calculate the activity of each strontium-90 source that is used to determine the treatment times for ophthalmic treatments. The decay must be based on the activity determined under 41.2(84).

b. A licensee shall retain a record of the activity of each strontium-90 source in accordance with 41.2(84).

41.2(86) *Therapy-related computer systems.* The licensee shall perform acceptance testing on the treatment planning system of therapy-related computer systems in accordance with published protocols accepted by nationally recognized bodies. At a minimum, the acceptance must include, as applicable, verification of:

a. The source-specific input parameters required by the dose calculation algorithm;

b. The accuracy of dose, dwell time, and treatment time calculations at representative points;

c. The accuracy of isodose plots and graphic displays;

d. The accuracy of the software used to determine sealed source positions from radiographic images; and

e. The accuracy of electronic transfer of the treatment delivery parameters to the treatment delivery unit from the treatment planning system.

41.2(87) *Written directives.* Each licensee or registrant shall meet the following objectives:

a. Prior to administration, a written directive must contain the patient's or human research subject's name and the following information:

(1) For any administration of quantities greater than 30 microcuries of either sodium iodide I-125 or I-131: the dosage;

(2) For a therapeutic administration of a radiopharmaceutical other than sodium iodide I-125 or I-131: the radiopharmaceutical, dosage, and route of administration;

(3) For gamma stereotactic radiosurgery: target coordinates, collimator size, plug pattern, and total dose;

(4) For teletherapy: the total dose, dose per fraction, number of fractions, treatment site, and overall treatment period;

(5) For high-dose-rate remote afterloading brachytherapy: the radioisotope, treatment site, and total dose; or

(6) For all other brachytherapy, including low-, medium-, and pulsed-dose-rate remote afterloaders:

1. Prior to implantation: treatment site, the radioisotope, number of sources, and source strengths; and

2. After implantation but prior to completion of the procedure: the radioisotope, treatment site, number of sources, and total source strength and exposure time (or, equivalently, the total dose);

(7) For therapeutic use of radiation machines, see 41.3(14);

b. Prior to each administration, the patient's or human research subject's identity is verified by more than one method as the individual named in the written directive;

c. The final plans of treatment and related calculations for brachytherapy, teletherapy, and gamma stereotactic radiosurgery are in accordance with the respective written directives;

d. Each administration is in accordance with the written directive through checking both manual and computer-generated dose calculations and verifying that any computer-generated dose calculations are correctly transferred into the consoles of the medical units authorized by 641—Chapter 41;

e. Any unintended deviation from the written directive is identified and evaluated, and appropriate action is taken;

f. If, because of the emergent nature of the patient's or human research subject's condition, a delay in order to provide a written directive jeopardizes the patient's or human research subject's health, an oral directive is acceptable. The information contained in the oral directive must be documented as soon as possible in writing in the patient's or human research subject's record. A written directive must be prepared within 48 hours of the oral directive; and

g. A copy of the written directive in auditable form shall be retained for three years after the date of administration.

h. A written revision to an existing written directive may be made if the revision is dated and signed by an authorized user before the administration of the dosage of unsealed by-product material, the brachytherapy dose, the gamma stereotactic radiosurgery dose, the teletherapy dose, or the next fractional dose.

41.2(88) *Other medical uses of by-product material or radiation from by-product material.* A licensee may use by-product material or a radiation source approved for medical use which is not specifically addressed in 641—41.2(136C)(e.g., Y-90 microspheres, liquid brachytherapy, intravascular brachytherapy) if:

a. The applicant or licensee has submitted the information required by the agency; and

b. The applicant or licensee has received written approval from the agency in a license or license amendment and uses the material in accordance with the regulations and specific conditions the agency considers necessary for the medical use of the material.

41.2(89) *Training for the parenteral administration of unsealed by-product material requiring a written directive.* Except as provided in 41.2(75), the licensee shall require an authorized user for the parenteral administration requiring a written directive to be a physician who:

a. Is an authorized user under 41.2(69), or before May 3, 2006, meets the requirements in 10 CFR 35.930, for uses listed in 41.2(89), or meets equivalent agreement state requirements; or

b. Is an authorized user under 41.2(70) or 41.2(73), or before May 3, 2006, meets the requirements in 10 CFR 35.940 or 35.960, or meets equivalent agreement state requirements, and who meets the requirements in 41.2(89)“*d*”; or

c. Is certified by a medical specialty board whose certification process has been recognized by the NRC or an agreement state under 41.2(70) or 41.2(73), or before May 3, 2006, meets the requirements in 10 CFR 35.940 or 35.960, and who meets the requirements in 41.2(89)“*d*”; or

d. (1) Has successfully completed 80 hours of classroom and laboratory training, applicable to parenteral administrations, for which a written directive is required, of either any beta emitter or any photon-emitting radionuclide with a photon energy less than 150 keV or parenteral administration of any other radionuclide for which a written directive is required. The training must include:

1. Radiation physics and instrumentation;
2. Radiation protection;
3. Mathematics pertaining to the use and measurement of radioactivity;
4. Chemistry of radioactive material for medical use; and
5. Radiation biology; and

(2) Has work experience, under the supervision of an authorized user who meets the requirements in 41.2(69) or 41.2(89), or before May 3, 2006, meets the requirements in 10 CFR 35.930, or equivalent agreement state requirements, in the parenteral administration for which a written directive is required, of either any beta emitter or any photon-emitting radionuclide with a photon energy less than 150 keV or parenteral administration of any other radionuclide for which a written directive is required. A supervising authorized user who meets the requirements in 41.2(69) or before May 3, 2006, meets the requirements in 10 CFR 35.930 must have experience in administering dosages of either any beta emitter or any photon-emitting radionuclide with a photon energy less than 150 keV or parenteral administration of any other radionuclide for which a written directive is required. The work experience must involve:

1. Ordering, receiving, and unpacking radioactive materials safely, and performing the related radiation surveys;
 2. Performing quality control procedures on instruments used to determine the activity of dosages, and performing checks for proper operation of survey meters;
 3. Calculating, measuring, and safely preparing patient or human research subject dosages;
 4. Using administrative controls to prevent a medical event involving the use of unsealed radioactive material;
 5. Using procedures to contain spilled radioactive material safely, and using proper decontamination procedures; and
 6. Administering dosages to patients or human research subjects, that include at least three cases involving the parenteral administration for which a written directive is required, of either any beta emitter or any photon-emitting radionuclide with a photon energy less than 150 keV or at least three cases involving the parenteral administration of any other radionuclide for which a written directive is required; and
- (3) Has obtained written attestation that the individual has satisfactorily completed the requirements in 41.2(89) "b" or "c," and has achieved a level of competency sufficient to function independently as an authorized user for the parenteral administration of unsealed by-product material requiring a written directive. The written attestation must be signed by a preceptor authorized user who meets the requirements in 41.2(69) or 41.2(89), or before May 3, 2006, meets the requirements in 10 CFR 35.930, or equivalent agreement state requirements. A preceptor authorized user who meets the requirements in 41.2(69), or before May 3, 2006, meets the requirements in 10 CFR 35.930, must have experience in administering dosages of either any beta emitter or any photon-emitting radionuclide with a photon energy less than 150 keV or at least three cases involving the parenteral administration of any other radionuclide for which a written directive is required.

641—41.3(136C) Therapeutic use of radiation machines.

41.3(1) Scope and applicability.

- a. This subrule establishes requirements, for which the registrant is responsible, for use of therapeutic radiation machines.
- b. The use of therapeutic radiation machines shall be by, or under the supervision of, a physician who meets the training/experience criteria established by 41.3(5).
- c. Unless specifically required otherwise by 641—41.3(136C), all registrants are subject to the requirements of 641—Chapters 38 to 40.

41.3(2) Definitions. In addition to the definitions provided in 641—38.2(136C) and 641—40.2(136C), the following definitions are specific to 641—41.3(136C).

"*Accessible surface*" means surface of equipment or of an equipment part that can be easily or accidentally touched by persons without the use of a tool.

"*Added filtration*" means any filtration which is in addition to the inherent filtration.

"*Beam-limiting device*" means a field defining collimator, integral to the therapeutic radiation machine, which provides a means to restrict the dimensions of the useful beam.

"*Beam-scattering foil*" means a thin piece of material (usually metallic) placed in the beam to scatter a beam of electrons in order to provide a more uniform electron distribution in the useful beam.