



RC Form 256-1b RADIATION SAFETY OFFICER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION *Hours of Training and Experience*

Name of Proposed Radiation Safety Officer	License No.
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Part I – Training and Experience

Training and experience must have been obtained within the preceding 7 years or the individual must have obtained related continuing education and experience since the initial training and experience was completed. Provide dates, duration, and a description of continuing education and experience.

Classroom and Laboratory Training (*Minimum 200 hours*)

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 _____

Supervised Full-Time Radiation Safety Experience (*Minimum 1 year*)

Description of Experience	Location of Training/ License Number of Facility	Dates of Training
Shipping, receiving, and performing related radiation surveys		
Using and performing checks for proper operation of dose calibrators, survey meters, and instruments used to measure radionuclides		

Supervised Full-Time Radiation Safety Experience (continued)

Description of Experience	Location of Training/ License Number of Facility	Dates of Training
Securing and controlling radioactive material		
Using administrative controls to avoid mistakes in the 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		

Supervising Individual (Print and sign)	License No. authorizing supervising individual
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Completed training, as noted below, for all types of use(s) authorized on the license:

Training in radiation safety, regulatory issues and emergency procedures for:	Training Provided by	Dates of Training
§289.256(ff), §289.256(hh) and §289.256(bbb) uses		
§289.256(kk) uses: <input type="checkbox"/> I-131 ≤ 33 mCi <input type="checkbox"/> I-131 > 33 mCi <input type="checkbox"/> Parenteral administrations		
§289.256(rr) uses		
§289.256(ddd) uses: <input type="checkbox"/> remote afterloader <input type="checkbox"/> teletherapy <input type="checkbox"/> gamma stereotactic surgery		

Supervising Individual (if applicable)	License No. authorizing supervising individual
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Part II– Preceptor Attestation and Signature

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.

I attest that _____ has satisfactorily completed

Name of Proposed Radiation Safety Officer

the requirements in §289.256(h)(2) and the requirements in §289.256(h)(6) and has achieved a level of radiation safety knowledge to function independently as a Radiation Safety Officer for a medical use license.

I am the Radiation Safety Officer for a radioactive material license authorized for the following uses:

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|---------------------------------------|--|---|--|
| <input type="checkbox"/> §289.256(ff) | <input type="checkbox"/> §289.256(hh) | <input type="checkbox"/> §289.256(kk) | <input type="checkbox"/> §289.256(bbb) |
| <input type="checkbox"/> §289.256(rr) | <input type="checkbox"/> §289.256(ddd)
remote afterloader | <input type="checkbox"/> §289.256(ddd)
teletherapy | <input type="checkbox"/> §289.256(ddd)
gamma stereotactic surgery |

Preceptor Name (Print)	Signature	Phone Number
License Number/Facility Name		Date

PRIVACY NOTIFICATION: If you are applying as an individual, with few exceptions, you have the right to request and be informed about information that the State of Texas collects about you. You are entitled to receive and review the information upon request. You also have the right to ask the state agency to correct any information that is determined to be incorrect. See <http://www.dshs.texas.gov> for more information on Privacy Notification. (Reference: Government Code, Section 552.021, 552.023, 559.003 and 559.004).