

## RADIOACTIVE MATERIALS (RAM) PROGRAM New/Renewal Veterinary License Checklist

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Lic	censee: License Number:
	<b>Review the NUREG-1556 Volumes 7 and 9</b> (obtain the current revision from the website). <a href="https://www.nrc.gov/reading-rm/doc-collections/nuregs/staff/sr1556/index.html">https://www.nrc.gov/reading-rm/doc-collections/nuregs/staff/sr1556/index.html</a>
	<b>Submit the Application</b> signed by executive management, or a person authorized to make commitments for the business entity requesting/possessing the license. If signed by someone other than senior management or Radiation Safety Officer(RSO) /Alternate Radiation Safety Officer (ARSO) provide a non-RSO delegation of authority form: <a href="https://dpbh.nv.gov/Reg/RAM/dta/Forms/Radioactive_Material_Program_(RAM)Forms/">https://dpbh.nv.gov/Reg/RAM/dta/Forms/Radioactive_Material_Program_(RAM)Forms/</a> .
	Financial Assurance, Decommissioning and Emergency Plans:
	☐ If financial assurance is required, submit documentation required by Nevada Administrative Code (NAC) 459.1995.
	☐ If an emergency plan is required per NAC 49.1951, submit the plan required by NAC 459.195.
	<b>Materials:</b> Mark all materials below that are requested and submit the use for each section.

Radioactive Material	Form	Maximum Quantity	
<ul><li>Any radioactive material permitted by 10 CFR 35.100.</li></ul>	Any	As needed	
<ul> <li>Any radioactive material permitted by 10 CFR 35.200; except gasses, generators and PET radioisotopes</li> </ul>	Any	As needed	
□ PET	Liquid or other form	mCi (GBq);	
(list isotope) permitted by 10 CFR 35.200.		mCi (GBq) per dose	
□ lodine-131 permitted by 10 CFR 35.300	Sodium lodide capsules (commitment to capsules for a reduced bioassay condition), Liquid	mCi (GBq); mCi (GBq) per dose	



Radioactive Material	Form	Maximum Quantity	
☐ Any radioactive materials	Any form permitted by	As permitted by 10 CFR	
permitted by 10 CFR 35.65	10 CFR 35.65	35.65	
☐ Other: List isotope	List form:	List Units	
☐ Other: List isotope	List form:	List Offits	
- Strict. List isotope	List form.	List Units	
☐ Other: List isotope	List form:		
		List Units	
☐ Other: List isotope	List form:		
Other List isstens	List form	List Units	
☐ Other: List isotope	LISCIOITI	List Units	
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Storage and use facility add	lress and diagram		
$\square$ Provide the addresses for th	ne business office and use fa	acility as applicable.	
Provide a facility diagram, with the following details as applicable: indication of north; labeled immediate/surrounding rooms, hallways, storage area, secure areas; occupancy factors; alarm system component including cameras, sensors; and scale or physical dimensions of facility / building.			
☐ For licensees using PET isot shielding.	☐ For licensees using PET isotopes submit shielding report and commitments to shielding.		
<ul> <li>Describe means of preventing access to unauthorized personnel. Include information and training for receiving staff if materials are received outside of normal business hours.</li> </ul>			
☐ Submit a copy of the Landlo Radioactive Materials form a http://dpbh.nv.gov/uploade Mtl/Docs/LandlordAcknowle	available at: dFiles/dpbhnvgov/content/	Reg/Radoactive-	
☐ Submit a copy of local business license.	ness license with the storag	e address and a state	
Authorized Users AUs:	Authorized Users AUs:		
☐ Submit a complete list of all	AUs and their authorized u	ises.	
<ul> <li>Submit a current Nevada St certificate/printout for each</li> </ul>			



	Provide proof of training and experience for any new veterinarian to be added as an AU with the following options. See the :Training for Veterinary RSO/AU document available at: <a href="https://dpbh.nv.gov/Reg/RAM/dta/Forms/Radioactive_Material_Program_(RAM)Forms//">https://dpbh.nv.gov/Reg/RAM/dta/Forms/Radioactive_Material_Program_(RAM)Forms//</a>
	☐ Submit a current RAM license from the Nuclear Regulatory Commission (NRC), another agreement state or the State of Nevada for the same use(s) as requested for the new AU, or
	☐ Submit a copy of an approved specialty board certification in Radiology or Radiation Oncology by the American College of Veterinary Radiology, or
	□ Submit a completed NRC form 313A appropriate for the desired use. The forms and instructions can be found from: <a href="https://dpbh.nv.gov/Reg/RAM/dta/Forms/Radioactive_Material_Program_(RAM)Forms/">https://dpbh.nv.gov/Reg/RAM/dta/Forms/Radioactive_Material_Program_(RAM)Forms/</a> .
RS	SO / ARSO:
	Submit an organizational chart showing the RSO / ARSO relationship with management.
	Submit a completed Delegation of Authority form for the RSO / ARSO or RSO / ARSO candidates (same form is used for both the RSO and ARSO is using both): <a href="http://dpbh.nv.gov/uploadedFiles/dpbhnvgov/content/Reg/Radoactive-Mtl/Docs/RSO_DelegationAuthority.pdf">http://dpbh.nv.gov/uploadedFiles/dpbhnvgov/content/Reg/Radoactive-Mtl/Docs/RSO_DelegationAuthority.pdf</a>
	Provide proof of training and experience for any new veterinarian to be added as an AU with the following options. See the :Training for Veterinary RSO / AU document available at:
	https://dpbh.nv.gov/Reg/RAM/dta/Forms/Radioactive_Material_Program_(RAM) _Forms//
	□ Submit a current RAM license from the Nuclear Regulatory Commission (NRC), another agreement state or the State of Nevada for the same use(s) as requested for the new RSO / ARSO, or
	☐ Submit a copy of an approved specialty board certification in Radiology or Radiation Oncology by the American College of Veterinary Radiology, or
	□ Submit a completed NRC form 313A appropriate for the desired use. The forms and instructions can be found from: <a href="https://dpbh.nv.gov/Reg/RAM/dta/Forms/">https://dpbh.nv.gov/Reg/RAM/dta/Forms/</a> Radioactive_Material_Program_(RAM )Forms/.
Se	aled Source RAM Inventory Policy & Procedure
	Submit a completed current inventory initialed by the RSO. (Renewals only)



Ш	and maintaining records of the inventory for three years.
	Commit to leak testing as recommended by the manufacturer or Sealed Source and Device Registry, maintaining records of the leak checks for at least three years, and provide the following as applicable:
	$\ \square$ Provide the name of the company performing leak checks.
	☐ If self-analyzing leak test, submit procedures for analysis and equipment used for completing the leak test including proof of acceptable minimum activity detectable.
	<ul> <li>Provide a list of staff trained to perform leak tests if other than the RSO and submit their training records.</li> </ul>
Do	simetry: Review NUREG 1556 Volume 9 – Appendix M
	Provide the name of your current/planned dosimetry provider (must be NVLAP approved).
	List the exchange frequency.
	List the type of dosimetry used (whole body / extremity) (optically stimulated and thermoluminescent).
	Commit to maintaining control badges and exposure records indefinitely.
	Commit to having dosimetry records on site for agency technologist and students working/training at the facility.
	Commit to all staff wearing personal dosimetry when working with RAM.
	Policies and procedures for bioassay screening if using volatile forms of Iodine-131
AL	ARA Program:
	Commit to an annual review of the Radiation Protection Plan/Policy/Procedure.
	Commit to an annual review of all written directives where applicable.
	Commit to posting "Caution Radioactive Material" and "Caution Radiation Area" signs appropriately.
	Commit to posting the current NRC1 "Notice to Employees" signage.
	Commit to annual radiation safety training for technologists and ancillary staff as applicable.
	Commit to having all staff that ship, pack or determine shipping of RAM will have current HAZMAT shipping training.
	Provide a public dose estimate.



Tr	aining: Review NUREG 1556 Volume 9, Appendix J
	Commit to having training records on site for agency technologist and students working/training at this facility.
	Commit to an annual training assessment and implementation per NUREG 1556 volume 9.
Ra	idiation Monitoring Equipment: Review NUREG 1556 volume 9 – appendix K
	Submit meter manufacturer, model and serial numbers, probes, and use (rate -v-contamination).
	Commit to annual calibration of survey meters and to maintaining records for three years.
	$\ \square$ Submit the name of the company performing the calibration.
	$\hfill \square$ If performing calibrations locally, provide a copy of calibration procedures.
Do	ose Calibrator: Review NUREG 1556 volume 9 – appendix G
	If not using a dose calibrator per 10 CFR 35.63. commit to the following: "We will use decay correction from the unit doses from the radiopharmacy prescription."
	Commit to calibration in accordance with national standard or per manufacturer's instructions.
	Commit to maintaining records of dose calibrator calibration for three years and until replaced by a newer calibration for those completed less than annually (geometry).
Ar	ea Surveys: Review NUREG 1556 Volume 9 – appendix R
	Provide a map of daily radiation survey points and provide the associated trigger levels
	Provide a map of weekly wipe survey points and provide the associated trigger levels
	Commit to maintain survey records for three years.
Sa	<b>fe Use of Unsealed Materials:</b> Review NUREG 1556 Volume 9 – appendix T
	Submit the policy and procedure for the safe use of unsealed material.
En	nergency and Spill Procedures: Review NUREG 1556 Volume 9 – appendix N
	Submit emergency policies/procedures including those incident response procedures (fire, theft, damage) and reporting requirements. Ensure the procedures are marked as Official Use Only – Security-Related Information as needed.



	<ul> <li>Add the State of Nevada emergency numbers and RSO contact information to postings and procedures.</li> </ul>		ct information to
		Radiation Control Program (8:00 am–5:00 pm M-F) Radiation Control Program 24 hr Emergency Number Nevada Highway Patrol (24 hrs)	(775) 687-7550 (877) 438-7231 (775) 687-0400
	Or	rder and Receipt of Materials: Review NUREG 1556 Volume	9 – Appendix O
		Submit policies and procedures for the ordering and receipt	of materials.
	Or	pening Packages containing RAM: Review NUREG 1556 Vo	lume 9 – Appendix P
		Submit policies and procedures for opening packages contai	ning RAM.
		nimals used for veterinary medicine radiation safety pro JREG 1556 Volume 7 – Appendix H	ocedures: Review
		Provide the policy and procedures for staff training for the ca undergoing treatment and/or imaging using radioactive mat	
		Provide the policy for contamination control regarding the caundergoing treatment and/or imaging using radioactive mat	
		Provide the policy and procedures for the release of animals a provided to their care takers regarding care of animals follow or imaging using radioactive materials.	
□ <b>Waste Management:</b> Review NUREG 1556 Volume 9 – Appendix W		dix W	
		Submit decay in storage policy and procedures for waste with days or less.	n a half-life of 120
		Commit that the transfer or disposal of sealed sources and rabe conducted by either transferring it to a licensed radioactive returned to the manufacturer, or by transferring it to a specifical authorized to possess the material.	e waste broker,
		Commit to maintain records of receipt, transfer, and disposal received and possessed under the license.	of all sealed sources
		Commit that license termination will be conducted in compli Administrative Code (NAC) 459.200.	ance with Nevada
	М	obile Imaging: Review NUREG 1556 Volume 9 - Appendix V	
		Explain the Method of transportation:	
		☐ A coach (self-contained, materials stay with vehicle); included coach.	de the VIN for the



<ul> <li>A van (materials &amp; camera will enter use locations) Include the address for each use location.</li> </ul>
$\ \square$ Submit a Memorandum of Understanding (MOU) for each location of use.
$\ \square$ Submit a facility diagram for each coach/trailer and the dispatch/hub location.
<ul> <li>Commit to transporting all radioactive materials in accordance with U.S. DOT regulations.</li> </ul>
<ul> <li>Submit the Type A shipping container documentation for all shipping containers used to ship type A quantities of radioactive materials. Mark drawing and documentation as noted in NUREG 1556 Volume 9 page 6-1 as appropriate.</li> </ul>
CERTIFICATION
The Applicant understands that all commitments that are marked above are binding and considered part of the license application; if not applicable, DO NOT mark. All applicable items that require submission must accompany the application, license fee and this checklist.
Printed Name Certifying Officer Title Signature Date