

U.S. NUCLEAR REGULATORY COMMISSION

Transcript

September 12, 2023, Public Meeting on Termination of
U.S. Nuclear Regulatory Commission Recognition of
the American Board of Radiology's Certification Processes

This transcript was produced using the Microsoft Teams software. Edits were made to remove time stamps and repeating speaker names, to correct misspellings and incorrect words, and remove repeating words.

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Sarah Lopas (She/Her)

Alright, so good afternoon everybody and thank you for joining us for today's and RC public meeting on the termination of the US NRC recognition of the American Board of Radiology certification processes. My name is Sarah Lopez, and I'm going to be your facilitator for today's meeting.

During this meeting, the staff will be discussing the American Board of Radiology or ABR's decision to eliminate its NRC recognized certification processes and discontinue or stop issuing the ABR certificates. The authorized individual designations after December 31st, 2023. So I'm going to put a link in the chat with the ABR letter. Or perhaps I already did. I have to double check either way. I'll put that link in there, but the letter that AVR sent the undersea and letting us know that that was their plan. I'll get that in the chat. And if you don't have access to the chat, you're on the phone. We have an Adams accession number for that letter. It's ML22091A272.

So the NRC staff is also going to be discussing how affected individuals can apply for authorized individual status today. In just a moment, Ms. Maryann Ayoade, who's a health physicist in the NRC's Office of Nuclear Material Safety and Safeguards and a member of the NRC's medical radiation safety team. She will be giving today's presentation and the slides that Maryann will be presenting are publicly available also.

And I'll put a link to those slides in the chat as well. But if you again, if you don't have access to the chat, the accession number for those slides is ML23254A377 and you can also find the link to the slides in the public meeting notice for today's meeting.

So today's meeting is being transcribed, and we're also recording it so we have a backup to the transcript. There will be time for questions after Maryann is done with her presentation, so when we get to that point in time, I'm going to be, I'm asking you to use the raised hand function if you're using Teams and I'll call on you. That way, if you've called in, if you're on your cell phone, you've called in using the teams bridgeline, you'll just press Star 5, and that's how I'll know that you want to make a comment. That's how you raise your phone or raise your hand via the phone. Pressing Star 5 and you press star 6 to unmute yourself, but I'll go through that again when we get to that point. If you are calling on from the phone and you want your attendance recorded for today, so for the meeting summary that will go out eventually. And please email Maryann Ayoade and I will put her email in the chat as well.

And then also if you have additional questions following up from today, you can either email Maryann or that we have a medical questions resource email that the NRC's medical team keeps an eye on and responds to frequently. So you can send questions either way. As I noted, we also have the chat open, so

I'll look for stuff that I'll be posting in there. And as I said, please use that to communicate any questions or comments to us. Once I stop talking, I'll be watching that. And if you're having technical issues, I'll try to help you out via chat.

OK. And so with that, I am going to turn the meeting over to Ms. Celimar Valentin Rodriguez. She's going to be giving her opening remarks. Celimar is the team leader for the NRC's medical radiation safety team in the Division of Material Safety, Security, State and Tribal Programs. Celimar.

0:3:31.950

Celimar Valentin-Rodriguez (She/Her/Hers)

Thank you. Sarah, can you hear me? OK. Good afternoon, everyone, and thank you for attending this public meeting today on the ABR's decision to discontinue their recognition of medical specialty board processes. As Sarah introduced me, I am the medical team leader here at the NRC. We recognize there's a lot of interest around this topic, so we really appreciate you taking the time to attend this meeting today, and before we begin the meeting, I'd really like to acknowledge and thank Ms. Maryann Ayoade, who's taking the lead on this issue on behalf of the NRC's medical team, and Sarah Lopas and Christine Pineda for their facilitation and project management for today's meeting.

So by way of background, the Commission, I just wanted to give you a brief background of where we are in terms of our training experience efforts within the NRC's medical team. You all might remember our training and experience requirements for unsealed byproduct material rulemaking plan, which was issued to the Commission back in 2020. We received a vote on that paper in January 27 of last year, 2022, and the Commission at that time voted to maintain our current training and experience requirements for the use of unsealed byproduct material in part 35.

However, as part of that Staff Requirements Memorandum, we received additional actions. One of them was to reevaluate or reconsider training and experience requirements for emerging medical technologies. This is being done as part of the emerging medical technologies, Rubidium-82 generator rulemaking. If you attended our public meeting a few weeks ago on the regulatory basis, you might have seen a lot of questions regarding T&E for emerging medical technologies. We were also directed to complete an evaluation of all medical specialty boards. So this was completed in July of last year and as a result of that evaluation of the eleven boards that we recognize at the time, two boards, CBNE and AOBNM were found to be inactive.

And finally, the Commissioner also directed us to develop implementation guidance for training experience requirements. That is an ongoing effort which we plan to issue that guidance in the summer of next year. So as Maryann, we'll cover today in April 6th of last year, ABR informed us of their intent to discontinue their and NRC recognition of all their medical specialty board processes by December 31st of this year. So during today's meeting, Ms. Ayoade will provide an overview of the different pathways that we have at the NRC for becoming an authorized individual, including the alternate pathway, and what ABR's termination means for those physicians, radiation safety officers and medical physicists who will seek authorized individual status in the future. And she will also cover what our next steps will be regarding ABR's termination.

So as a reminder, in an effort to maintain the focus of this meeting on the ABR discontinuation or termination, if you have any specific questions about T&E requirements, about how to become an authorized individual or what requirements apply to your specific situation or background, please

contact your regulatory authority or contact us. Sarah gave our medical questions resource, which again is medicalquestions.resource@nrc.gov.

And with that, I will turn out the meeting to Ms. Ayoade.

0:6:57.40

Maryann Ayoade

Thank you, Ms. Valentin, can you all, Sarah, can you hear me?

0:7:2.840

Sarah Lopas (She/Her)

Yes, Maryann, loud and clear.

0:7:3.960

Maryann Ayoade

OK, good.

Good afternoon, everyone and again, welcome to today's NRC public meeting. Today's presentation is focused on determination or discontinuation of the NRC's recognition of the American Board of Radiology certification processes as Ms. Lopas and Ms. Valentin mentioned, I am a member of the NRC's Medical radiation safety team and again I want to mention, as you heard from Ms. Valentin, that we will be taking questions during this meeting about the information that's presented today. But this is not the forum for questions related to specific licensing actions, because trying to respond to those specific types of questions will take up a lot of time and go beyond the time that we have allotted for today.

And so for any questions that you may have related to specific licensing actions or your particular situation, as I have already been receiving some emailed questions, please do reach out to us or go to your regulators in your state if you're an agreement state or our licensing staff in our NRC regional offices that are within your jurisdiction.

Uh, so let's go ahead and get started. Uh, next slide please, Sarah.

OK, so for the presentation today, I will be providing background information on how to become an authorized individual on a radioactive materials medical use license. And I'll go over the main training and experience pathways that qualified individuals may use to demonstrate that they meet the training requirements in 10 CFR part 35. I will also go over some of the background on the ABR's recognition from when they were first recognized to where they are today, with the pending termination or discontinuation of your NRC recognition. And then I will be discussing the when, the what, and the why surrounding their intent as they have informed us that NRC.

I'll also go over what this all means for the current and future potential authorized individuals and then also talk to you about where you can find information on how to become an authorized individual, as well as all information that's related to NRC's recognized specialty boards and also NRC's procedures for recognizing, monitoring and terminating or discontinuing the recognized boards.

I'll also then get into how to become an authorized individual again, but this time with more focus on the alternate training and experience pathway, which is currently an option and will remain an option even after the ABR's recognition is discontinued. And then I'll go over the current status of the termination

and the next steps in the process. And then finally, we'll take questions that you may have. So I do have a lot to cover for today's presentation, so let's jump right in. Uh, next slide there.

Alright, so in the next couple of slides, I'm going to provide some general information on how to become an authorized individual. And as you may already be aware, this is all about individuals successfully completing the required training and experience and providing documentation of their training to the NRC or agreement states to be reviewed and approved in order for them to become authorized and listed on a license.

And so to be authorized and listed on a license means that you're able to independently fulfill the radiation safety related duties of an authorized individual as you have been assigned on that license. Next slide. All right.

So the NRC has three main pathways for individuals that are seeking to become authorized and listed on a radioactive materials medical use license under Part 35.

The first is the board certification pathway. So here, an individual's request for authorization is primarily based on whether they are board certified by an NRC recognized specialty board and have also received an NRC recognized certificate from the board. Now, in some instances, depending on the type of use that's being requested and the individual's training background, and also if they're seeking additional uses beyond what it is that they're certified for, then they may need to also submit additional required documentation of training that could be in the form of additional hours of classroom and laboratory time, additional supervised casework experience or additional device specific training.

The second is the alternate training and experience pathway where the licensee has to submit documentation of all of the individual training and experience directly to the NRC or to the agreement states for review and approval. And so that is all of the required classroom and lab training hours, the supervised work experience and also any necessary device specific training. Again, depending on what they are seeking to be authorized for now, this is mostly similar to the type of documentation that is submitted to the boards when individuals are seeking to be board certified, but a major difference from the board certification pathway is that in addition to the training documents, they also have to submit a signed attestation, a signed written attestation from a preceptor individual that also meets the requirements for the type of use that's being requested.

OK. And then we have a third pathway for approval and that pathway is based on confirmation that an individual is already identified on an NRC agreement state license for a similar or equivalent types of use. And again, depending on the type of request and the type of authorization that that individual is already listed for, they may need to provide additional required training documentation as I described earlier. And so when a licensee, you know, comes to the NRC agreement States and they submit a request for an individual to be added onto a license, the licensing staff or the license reviewer is asking the questions that you are seeing on this slide.

And so we are asking, is the individual board certified and is that certificate that was submitted, is that one that is currently recognized by NRC depending on the type of use that's being requested? Is the certificate enough or does the individual need to provide additional documentation of their training? If the individual is not board certified, have they submitted all of the required documentation of training and supervised work experience and also have they provided a signed, written attestation from a preceptor that also meets the requirements? Is the individual already listed on a license for similar types

of uses? Have they provided supporting documentation of any additional training? If they're seeking to be authorized for uses beyond what it is that they're currently authorized for, uh, how? How recent is the training that they received? When did they receive their certification and is the certificate still valid for use or do they need to provide documentation of continuing education? So those are the three main pathways that I just described.

And for today's presentation, we will be more focused on the board certification pathway and the alternate pathways because ABR's discontinuation will affect more of the individuals that are not already listed or authorized on the license.

OK, next slide. OK, so this slide includes a table to further highlight the major differences between the two pathways that we are focused on today. The first is that under the board certification and alternate pathways to under both pathways, all individuals must complete the required training and experience that are listed in the regulations for the type of use and the type of authorization that they're seeking.

So what does this mean for every type of use? Both pathways will require somewhat of a similar type of training and supervised work experience, and so, for example, a physician that's seeking to become an authorized user may see that the board certification pathway may require completion of training and experience through a residency training program, whether it's in radiation therapy or nuclear medicine or radiation oncology, or in a related medical specialty.

It depends on the specific type of use that that individual is seeking to be authorized for, and so also in some cases the regulations may call for additional training in the form of supervised casework for some radio, pharmaceutical therapies or some additional device specific training, or radiation safety related training to be completed even outside of the residency training program. Again, this depends on the type of use that is being requested, so those are some of the types of additional training documentation that individuals would need to submit to the regulators in addition to the board certificates. Again, on a case by case basis.

OK. And so in essence, if an individual's training and experience is acquired through any of the required training routes or programs, like residency training program or college or a university degree or a clinical related type of facility that required training and experience from the hours of classroom and lab and the hours or years of supervised work, work experience and the number of clinical case work that is required by the regulations, they will all essentially be similar for both the board certification and the alternate pathways for that specific type of use.

The second thing to note and to point out on this slide is that is the examination requirement that we have for the board certification pathway versus the written preceptor attestation requirement is for the alternate pathway. So, NRC requires that recognized specialty boards also administer an exam that assesses the knowledge and competency and areas that include radiation safety, and you'll see this spelled out in the regulations and the regulatory language that's under the board certification pathway and also under the alternate pathway as well.

And so, depending on the type of use for the board certification pathway, you will see the requirements here mention that the exam must test or assess the knowledge and competence in radiation safety and radionuclide handling, quality assurance, treatment planning and certain types of clinical use. Again, all depending on the type of use that you're seeking authorization for, and then on the other side for individuals that are coming in under the alternate pathways.

So those individuals that do not have recognized certificates or that are not board certified, the preceptor attestation is what essentially serves the purpose that the examination is serving for the other pathway, and so that attestation statement is essentially confirming that an individual has successfully or satisfactorily completed all of the required training, and it also speaks to the individual's ability to independently fulfill the radiation safety related work or duties for the type of use that they're seeking authorization on.

So again, just to note that in addition to successfully completing all of the training and experience that is required, the examination and the preceptor attestation are in essence what the NRC has determined to be the elements that show that an individual has the requisite knowledge, and so going through a structured board program that meets the required training and experience and also successfully passing the examination for the board pathway and then the signed attestation statement for the alternate pathway, that is what serves as confirmation to the regulators that the individual has the requisite knowledge to serve as an authorized individual, that can not only go on to carry out the uses that they were approved for, but also they can serve as a supervising authorized individual for others as well. And this is why the training and experience and the regulations surrounding them are very important to know and to understand. Next slide.

OK, so this slide and the next slide after provides some background about when the ABR was recognized and the timeline of the decision to discontinue their NRC recognition. So the ABR first became an NRC recognized specialty board in 2005 and this was when NRC had published a rule that amongst other things, updated the criteria that all specialty boards must meet in order to be recognized by the NRC or agreement states. So what this meant was that once a specialty board certification process for a specialty area, once it became recognized by NRC or an agreement state, any individual with a recognized certificate from that board may move on to be approved to be an authorized individual. And I say maybe because there's still that next step to authorization of submitting your request to the regulator for their review and approval before you can be added onto a license. And so the request for authorization must be approved through our regulatory licensing process. Next slide.

OK, so now fast forward to today and jumping into the when of the discontinuation and when it goes into effect. So ABR notified NRC in March of 2022 and they also submitted a formal letter the following month, in April of last year as well. And they submitted the letter notifying us of their intent to stop maintaining NRC's recognition of their certification processes after December 31st of this year. So December 31st of 2023, which is in about 3 months from today, the link to the ABR letter has been included as Sarah or Ms. Lopas mentioned earlier, she has included that in the chat, but it's also included on this slide and it's included in our medical toolkit web page under the announcement section. Uh, the links to the different sites are hyperlinked in the slides and again you can find them on our website.

And so their letter explained that they intend to stop maintaining the part of their certification process that allowed for them to be recognized by NRC, which means that they will no longer issue their certificates with the authorized individual eligible designation stamps for the different authorized individuals. So the authorized user, the authorized medical physicists and the radiation safety officers after December 31st of this year. Next slide.

OK, So what exactly is being terminated or discontinued? What is going to be discontinued is the recognition of ABR certification process for certain specialty areas. Specifically, they intend to no longer maintain the part of their examination that tests the knowledge and competence in radiation safety in

accordance with the requirements in part 35, and, as I mentioned earlier, the board certification pathway does require that their candidates complete and pass an exam that tests and assesses their knowledge and competence in radiation safety as part of the requirements for NRC's recognition. And so you will see on this slide and in the table here that all six of the current NRC recognized ABR specialty areas are impacted. And so the authorized user eligible designation that you will see on some of the ABR certificates that is for physician candidates and supports recognition of ABR's certification process for three specialty areas in diagnostic radiology and interventional radiology and diagnostic radiology. The Joint IR/DR program and also in radiation oncology. And then for the radiation safety officers, the RSO eligible designation that you will see on the ABR certificates supports recognition of the ABR certification processes for two specialty areas that you see in this table in diagnostic medical physics and in nuclear medical physics. And then, for the medical physicist candidates, the AMP eligible designation that you see on the ABR certificate is what supports the recognition of the ABR certification processes for the therapeutic medical Physics specialty area. Next slide.

Hey. So I think go back one more slide, please. Yes. Did you? I'm not sure if we were on this slide. I think you skipped this one, so the why of the termination?

Why is the termination or discontinuation happening, and are there any reasons behind this? OK. So the ABR has explained to us that NRC that maintaining their recognition falls outside the defined focus of the board's mission, that it diverts the resources from their fundamental objectives, some of which include refining their examination processes and providing the efficient customer service that they do to their candidates. And also they noted that there's no specific correlation or required link between being board certified and having an authorized individual eligible status because individuals could be authorized in a license without being board certified and individuals may also be board certified without ever becoming authorized individuals. And then lastly, they noted that a direct pathway exists with the NRC and agreement states for verifying an individual's require training for authorization.

And so, at the bottom of this slide, you will find links to additional information that the ABR has provided on their decision. The first two links on this slide at the bottom are for an informational webinar that ABR hosted in March of last year. So, in March of 2022 and they provided the webinar to assist the affected individuals with how to navigate through this transition. And then the last link is to another ABR web page with questions and answers that they've provided. Related to this issue and to their decision as well, next slide.

So, what does all of this mean for individuals and in our NRC authorizations? What are the potential impacts? First of all I want to clarify that prior to that December 31st discontinuation date, so between now and the end of the year, because ABR will continue to comply with NRC's regulations, and until this date ABR is still able to issue NRC recognized certificates with the authorized individual eligible designations. And so this means that these certificates will remain valid and can be used to seek authorization through the board certification pathway. The ABR website has information on when their candidates can sit for their exams to be able to receive a recognized certificate before this December 31st date. And it is my understanding that as of today, the last administration of the exam will be on December 5th according to what's posted on their website, and the application window for this exam has already passed.

So you can go on to the ABR website to find out information on all of this, but also keep in mind that the recognized certificates will again remain valid for seven years from when they were obtained or issued,

and this seven year requirement is in accordance with the regulations for recentness of training or what some may see as continuing education, which is in 10 CFR 35.59.

And then we also have the board certification pathway option for individuals that wish to obtain certification from a different NRC recognized Specialty board, which you can find listed on our on our NRC recognized specialty board web page. And we also have the alternate training and experience pathway, which I will be going over some more in coming slides, next slide.

And what is going to happen after December 31st? So after December 31st, ABR will not maintain the NRC, their NRC recognition. And so in other words, the certification processes will no longer be seen or recognized as being in compliance with the applicable NRC regulations. And also there the ABR certificates will no longer be issued with the authorized individual eligible designations and cannot be used for authorization for medical use through the board certification pathway. And so the last four bullets are similar to what was presented in the last slide.

As I mentioned, individuals with valid or recognized certificates that were issued prior to December 31st can still use these certificates to request authorization through the board certification pathway. The seven year recentness of training requirement will continue to apply, and then the option for individuals to use a different NRC recognized specialty board is still available and the alternate training and experience pathway still stands. Next slide.

OK, so where can you find information on how to become authorized and the NRC's recognized specialty boards? The slide includes hyperlinks with all of the relevant information for individuals that may be seeking NRC authorization on a medical use license through the board certification pathway and beyond.

The first thing I want to point out on this slide is that we do have a public NRC web page for just about everything related to medical uses for our licensees and the general public. And that is our NRC medical uses licensee toolkit Web page. On this web page is where you will find a section on the recent announcements that we make on several ongoing medical related projects including this ABR termination or discontinuation. And then you will also find the link to our dedicated NRC recognized specialty board web page and that includes information on the boards, the different specialty areas and certificates that we recognize and also those that we no longer recognize. And this page also includes information on how to become an authorized individual. You will find there a link to our NRC procedures for recognizing, monitoring and discontinuing of the certification processes of specialty boards and also our most recent evaluation that NRC conducted in 2022 of all of the recognized boards and their status.

We've also included on this slide some other useful links that are on the medical uses licensee toolkit web page, like the NRC's Advisory Committee on the Medical Uses of Isotopes, the ACMUI, they have a dedicated web page, and also you will find information about their Training and Experience Subcommittee report on the ABR's decision. And so that report includes their thoughts, their recommendations, and their feedback on the impact of this issue at hand.

Also included is a link to the NRC's medical related Q&A, or frequently asked questions, and the NRC's medical list server. If you aren't a part of that already, you can sign up to receive or automated email notifications of medical related information and even medical related Federal Register notices. Next slide.

OK, so now this slide has been added as a reminder because in the next couple of slides and as I mentioned earlier, I will go over the alternate pathway option in a little bit more detail and that option can be used to get authorization and be to be listed on a license if you're not certified by a board that the NRC recognizes, or if you do not have a recognized certificate from a board.

So since today's presentation is focused on ABR, I will use that in my explanation as an example. So if you're an individual or a physician or a physicist that has been considering and is working your way towards getting an ABR certification next year, what do you need to do? Well, first of all, you should hopefully already be affiliated with a licensee from an NRC agreement state, because the process to request authorization starts there. The request for authorization for an individual to use radioactive material must come from the licensee or an applicant or entity that is seeking to use radioactive material. And so you'll notice the note that I've included at the bottom of this slide that says that NRC does not issue licenses to individuals, but rather to licensees and NRC authorizes individuals to be listed on a license.

And so we do get questions sometimes related to this issue. So we have included that on this slide for further clarification. OK, so the licensee submits the request to add someone to their license and they have to include all the applicable training and experience documentation for the individual, and they also have the option of using our NRC forms, which is a version of the NRC 313 application form that is initially used to apply for a license. But these forms are the NRC 313A series of forms for different types of authorized individuals, and the different types of uses that can be requested. And I've included a link to those forms, along with the accompanying instructions and guidance, which is our NUREG-1556 volume 9. I've included that along with the specific sections in that document to help complete these forms, and so you can also find all of these links in the presentation for today. Again, just by Googling our NRC medical uses licensee toolkit web page and you can find all of these links in there as well.

I also wanted to point out that it's important to know your agreement state program if you are in a state that is not under NRC's jurisdiction, you will need to check with your state's program because some states may have their own forms that you can use to provide this information as well. Next slide.

OK. So on this slide and the next couple of slides, you will see about 5 to 6 pages of one of the types of 313A forms that I mentioned that can be used to submit documentation of an individual's training as well as a section for the preceptor individual to complete and sign. And so I won't be going over the forms in detail today for the sake of time, as there's so many different options to complete depending on the type of the request and the individual's training and work experience.

But I will walk you through the types of options to expect when you use these forms, and so for today I will be using a sample blank form for a physician that wishes to use material under 10 CFR 35.400 and 600, which is for manual brachytherapy uses and for ophthalmic or eye related use of strontium-90 and also for use of remote afterloader teletherapy and gamma stereotactic radiosurgery types of units.

So on the first page is where you will complete information about the proposed authorized individual. Now in this case it will be for the proposed physician authorized user because of the form that we're using. And so you will include information about the individual and where they're currently licensed. You will also include information about the type of use that's being requested, so you'll notice the five boxes of options at the top of the form that you can check, and then you can get and then you go into part one, part one of the form, which is where you start to indicate whether you're board certified by an NRC recognized board or if you're already an authorized user in a license and are seeking additional

authorization for uses that you checked earlier. Or if you don't fall under these two first two categories, then the third item takes you to where you can provide information for the alternate pathway, starting with details of your classroom and laboratory training the location.

So where did you receive your training? The number of hours of the training and then when the time frame, the dates that you received, the training, you put all that information into this section of the form, and you'll notice the box at the end are at the bottom for the total number of required hours of training to be added there as well. Next slide.

OK, so the next three slides are including this slide gives you tables where you can provide details of the required supervised training and work experience for the different types of uses that are being requested. Again, you'll see the section to include the total number of hours of work experience, and also at the bottom a section for the supervising individual to provide your signature and evidence of their current stance as an authorized individual, which will be in the form of a license number that they are already listed on. And just like the previous slide, you will also need to complete information about where and when you received the training. Next slide.

OK, so this slide shows the page that you would complete again the supervised training and work experience for the other types of uses that this form allows. So for the ophthalmic treatments at the top and then later on for the remote afterloader teletherapy and gamma knife type of uses, you will include the training and work experience in this section of the form. Next slide.

And then that continues here again with the supervised work and clinical experience for the different types of uses. Next slide.

So back one, there you go, and then you get to where the preceptor information can be provided that would be on the last two pages of the form. And so on this slide and the next slide that you will see, this is where the preceptor individual is attesting to or in essence they're vouching for the training and work experience that has been provided to that individual. And as the form itself says, here they are attesting that the proposed authorized individual has satisfactorily completed the required hours of classroom and laboratory training, as well as the required hours of supervised work and any required years of supervised clinical experience that the regulations call for.

And so they are attesting that the individual is able to independently fulfill the radiation safety related duties as an authorized individual. In this case, an authorized user for the specific types of uses that are being requested. So that's what you will see in this section of the form. Next slide.

And here the preceptor attestation continues into the last page of the form. I want to point out that this page also includes where information about the preceptor can be provided. So if they are authorized individuals, in this case an authorized user, or if they meet the requirements to act as a preceptor using the residency program director route, the catch here is that there has to be at least one residency program faculty member that is an authorized user for similar types of uses being requested and that authorized user faculty member does agree or concurs with the attestation that the residency program director is providing. And so all of that specific information that requirement for the preceptor that I just mentioned, all of that is spelled out in the regulations for you, for this type, for these types of uses, next slide.

OK, so as another final reminder and then important takeaway from today's presentation, this table has been included with information that you saw and heard earlier about what to expect between now and the end of the year. And then what happens come January 1st of 2024? And so remember that prior to December 31st, ABR will continue to comply with NRC's regulations and they will maintain the recognition and individuals have the option to obtain an NRC recognized certificate from the ABR. But after that date, any certificates that are issued will not include the authorized individual designations, as the ABR will no longer have criteria that fully meet NRC's requirements, and also just to take note of the other criteria that I spoke to already, and they apply now and they will continue to apply even after this date. And that is the criteria that you see here in the blue section of the table related to the recentness of training or continuing education and also the alternate pathway that continues to exist. Next slide.

OK, So what is the current status and what are the next steps in this process? And so the discontinuation or termination of their recognition is set to occur on December 31st and we will be issuing a final discontinuation letter to ABR sometime in the November, December timeframe of this year. We've already been communicating this news informally through our different relationships with the professional societies and through our agreement state counterparts and now via this public meeting today. So after that final letter is issued to ABR, we will send out a communication to the medical community and the public at large using our medical list server and through announcements on our medical uses licensee toolkit web page and also in our communications with the medical professional societies and our agreement state counterparts.

And so we ask that licensees and potential authorized individuals start now if you haven't already started out to practice keeping good track of your training documentation and also complete your NRC 313A series forms early if possible. You want to get familiar with the training and experience regulations in part 35 and any requirements in your agreement states as well. And of course, we're here to assist you. Your regulators and NRC and agreement states if you have any questions, next slide.

That includes the abbreviations that were in the presentation for today and the next slide takes us to our question portion for today. Again, as a reminder, this meeting is not a meeting about specific training and experience requirements, but if you do have questions related to T&E or question about your particular situation or licensing action, I ask that you reach out to your regulators, reach out to us separately for your specific situation. But yes, Sarah, we're ready for questions.

0:46:6.290

Sarah Lopas (She/Her)

OK, So what I'm going to do everybody is I'm going to enable everybody's microphones, but if you don't touch anything, you will stay muted cause you control your own mute button. I cannot unmute you, but I'm going to allow everybody's microphones. And so this will allow you to unmute yourself.

So I'm going to ask, we do have a number of questions that came in via the chat. So we'll start with those, but go ahead and just hit that raise hand icon, which should be maybe somewhere towards the top right hand of your Teams screen. So you just hit that and I'll use that to call on folks. And then if you're on the phone, which I don't think we actually have anybody on the phone, but if you happen to be on the phone and I don't see you, you'll be pressing star 5.

So let me get started with some of the questions that came in via the chat and then we'll go. I see a couple hands raised.

0:47:5.470

Maryann Ayoade

OK.

0:46:59.220

Sarah Lopas (She/Her)

So Maryann, there was one question came in that Celimar responded to and I just want to read it out loud and then I can either read Celimar's response or you can just reiterate it.

So Mark Winslow asked, Will previously recognized board certificates still be recognized? Hang on a second. I'm finding his whole. Will previously recognized board certificates still be recognized or all ABR board certificates no longer accepted. Or does this change only apply to those that are newly boarded?

0:47:32.760

Maryann Ayoade

There.

0:47:32.370

Sarah Lopas (She/Her)

And you want me to read?

0:47:33.80

Maryann Ayoade

Did you say? Oh, I wasn't sure if you said you were going to read the response.

0:47:36.70

Sarah Lopas (She/Her)

I can read you have to.

0:47:36.720

Maryann Ayoade

I see it and then I can add on to that response.

0:47:38.990

Sarah Lopas (She/Her)

Yeah. So I'll read the response. So Celimar responded that certificates with the AU eligible RSO eligible or AMP eligible designation issued prior to December 31st, 2023 will be accepted. New certificates issued by ABR after December 31st, 2023 will not have those designations and will not be able to be used.

0:48:1.720

Maryann Ayoade

OK. Thanks, Sarah, and I can clarify that some more. Again, as Celimar mentioned in there, it's the ABR recognized certificates that are issued prior to December 31st.

I say ABR recognized because ABR does issue certificates without the authorized individual designation.

What gets you the designation is the part of the NRC requirement that asks that the board fulfilled the examination portion and the examination has to be passed by that individual, right? So the way ABR

does it is they have these examinations and there is a section of the way they grade examination which is called the radiation isotope safety examination or RISE, and that portion is what addresses fully all of the radiation safety related areas or topics that NRC requires.

If the individual completes the examination and passes that portion that is specifically what earns them that authorized user eligible designation because they have fully met NRC's requirements in addition to all of the training and experience documentation that ABR has reviewed.

So once they put that on their certificate and they submit that to the NRC, if it was issued prior to December 31st, you know it's that that certificate, it's valid to be used again, anything before that.

We also have to keep in mind the seven year recentness of training or continuing education requirements and so if that certificate falls within seven years, they can use that certificate.

If it's beyond seven years, then they have to provide that additional documentation of continuing education in that time frame.

0:49:51.440

Sarah Lopas (She/Her)

OK. Thanks, Maryann. I'm going to get through a couple more of these chats and then I will go to the two hand raises, I promise.

OK. So the next question here on the chat is from an unknown user says Will NRC be staffing up to support a greater demand for AU requests via the alternate pathway? What is the estimated? And here's the second part of that. What is the estimated timeframe from submission to approval, assuming all the paperwork is in order and correct?

0:50:24.130

Maryann Ayoade

OK. Thanks Sarah. Oh, that's I mean that's a good question and that is something that currently NRC we're monitoring you know the termination hasn't gone into effect yet.

We do have the alternate pathway which we have gotten feedback from our regional staff, our license review staff that they do get a good amount of licensing actions with individuals coming in under the alternate pathway even before, you know, this request from ABR came in.

Again, it's not just NRC. We're also in contact with our agreement state regulators and they have, you know, a lot more licensees. And so we're also going to be in contact with them as we move forward in this next phase with the expectation to see more actions or requests for individuals coming in under the alternate pathway.

And then as far as the timeframe, again with the alternate pathway, it's dependent on the specific, the type of requests dependent on the type of individuals of training that they already have, because we have to review again, if they're, if they don't have a certificate, but they had a certificate that was recognized, but yet before the seven years, we have to take a look at the type of continuing education that they have. So there's a varying amount of timeframe.

Our advisory committee, the ACMUI, did talk about this as a potential challenge as we move forward and they did give us, you know, some feedback on, you know, there isn't any like set timeframe to review our licensing actions through the alternate pathway. But this is something that we're going to be monitoring as we move forward.

Celimar I don't know if you wanted to add anything to this one.

0:52:19.880

Celimar Valentin-Rodriguez (She/Her/Hers)

Yeah, I mean with respect to the estimated timeframe at, in the NRC, we have differing timelines for different types of licensing actions that can range from 90 days up to 180 days. And if you have renewals that might take longer, also it will also depend on the quality of the application. If you have most or all of that documentation that the license reviewer will need, then you'll probably have a more speedy approval of that authorized individual. So that's very important and I will also note that agreement states have different milestones and timeframes for their own licensing actions. So that will also vary state to state.

0:52:59.620

Sarah Lopas (She/Her)

Yeah. And I'm going to follow up with one of the questions from the chat related to that.

So this is Margo. Shoot, she's, she asks when should the forms be submitted with residents graduating June 30th? How much in advance or how far in advance for residents graduated June 30th.

0:53:19.470

Maryann Ayoade

I mean to that I would say it depends on when they want to start using the license. Like Celimar said, depends on the type of license. See if it's a new license application or a new license, we have a different timeframe for that. If it's for amendments where you're amending a current license to add the individual, we have a different timeframe that depends on the agreement state that you're in. So I would say, you know, reach out to your, to us, your regulators or your agreement states that you're in depending on when you're looking to have that individual, you know, start. That's, I think what you should go with as far as timeframe for submitting, but I would say start keeping track of your training and experience as you move forward and you can use that form to document it, yeah.

0:54:9.850

Sarah Lopas (She/Her)

All right. One more and then I'll go to the two hand raises and then I'll continue with the chat questions.

0:54:15.740

Maryann Ayoade

OK.

0:54:15.550

Sarah Lopas (She/Her)

So Todd and I'm going to mispronounce your name. Todd. Todd Senglaub. He asks, will the ABR include AU eligible when someone renews their board certificate after 12-31-23, assuming they were previously eligible?

0:54:32.310

Maryann Ayoade

OK, so even currently, because we do not recognize their re-certification, uh, process, they are not able to issue AU eligible when they renew the board certificate. They have to come to NRC with that, along with documentation of their continuing education, because again, it's very case by case or specific to the case at hand. And so right now, no, ABR after this date will not be issuing any certificates that will include the designation for the authorized individuals because there are no longer trying to maintain, you know, their recognition with NRC.

0:55:25.550

Sarah Lopas (She/Her)

OK. All right, now we're finally going to get to our first hand raise. So is it Kenneth? You can go ahead and unmute yourself and I just ask that you introduce yourself, maybe start with your affiliation and then go ahead and ask your question.

0:55:40.730

Traegde, Kenath (DPH)

Yeah, this is Ken Traegde. I'm with the Massachusetts Radiation Control program and I am a supervisor for licensing. I just wanted to ask, as a result of this change, is the NRC going to amend this series of 313 forms with any new information based on the ABR certification?

0:56:6.30

Maryann Ayoade

Thanks for your question. Uh, so right now there is nothing that we see that we need to revise in the forms based on this ABR decision or intent to discontinue. And that's because there are still other specialty boards that we recognize. So that board certification pathway is still an option. This is not a change to anything in our requirements.

The training and experience requirements continue to remain the same in both pathways, so no, we are not revising our forms because or due to anything related to this issue. If we update the forms, which sometimes we do periodically for other OMB requirements, that would be something separate, but not as a result of this ABR discontinuation of recognition.

0:57:1.660

Traegde, Kenath (DPH)

OK. Thank you.

0:57:3.270

Sarah Lopas (She/Her)

And Maryann, let me ask a follow up question from the chat.

0:57:6.790

Maryann Ayoade

OK.

0:57:6.170

Sarah Lopas (She/Her)

That's kind of related to the 313 form. So John Lichtenberger asks, can you briefly explain the difference between NRC forms 313 AUS, AUD, & AUT?

0:57:19.880

Maryann Ayoade

Yes. So the form that I presented, the sample form that I used was the AUS and that was for physician authorized user candidates for the 35.400 and 600 uses. Some of the other forms are 313 forms, which we don't always do a good job at highlighting.

Are the 313 ARSO forms? That's easy to remember. Then we have the 313A AMP for the authorized medical physicist or the ophthalmic physicist.

And then we have the 313 ANP for the authorized nuclear pharmacist and then the AUD and the AUT are for physician authorized users for the other types of uses. So for 100, 200, 300 and then for 300, because that's a whole category on its own under 300, it has different categories or types of uses. And so, the forms are we tried to or they tried to letter them according to the types of authorizations or authorized individuals.

But then as you can see, once we get to the AUD AT and AUS, that's where it's for the different types of uses 100, 200, 300 or 100, 200, 500 and then a separate one for 300, which is the AUT form and then the form that I use in my example.

The AUS was for the 35.400 and 600 uses, so I hope that clarifies or answers your question.

0:59:3.440

Sarah Lopas (She/Her)

That's good, Maryann. Thank you. OK. So just a reminder to hit the hand icon on the top right hand side of your screen. If you want to speak out your question or comment, maybe also put it in the chat.

We're going to. We're going to get through those. So David, you've been waiting very patiently, David Vassy, you can unmute yourself.

0:59:21.150

Vassy, David

Oh, thank you. I'm David Vassy. For 40 years I've been an RSO, at a good sized hospital system and I've brought people onto our licenses both before and during the era of AU eligibility. And so, I would just and I, one of the other speakers mentioned that the quality of -- how long it takes to process these requests is somewhat dependent on the quality of the application.

0:59:53.270

Maryann Ayoade

Exactly.

0:59:53.510

Vassy, David

And you've all seen from what was presented here, the complexity and level of detail of the various 313 forms. So, I would, I'm here just to make a pitch for the fact that if we're going to survive in a post AU eligible world that we've got to figure out how to make sure that nobody gets out of their residencies without that form already being filled out before they leave the building. Uh, I worked in a time when AU eligible was not a thing and it is very difficult to get after the fact accurate information about the dates,

times and places and who and the whats. Uh, they've got to come out of their residencies with that information recorded and signed off by the appropriate preceptor and so on. So, I would make a pitch. I would I do something very strong-armed, like I would, I would cancel that radiation or that residency program's license if they don't send those kids out with those forms already filled out.

1:1:8.0

Maryann Ayoade

Thank you, David, for that feedback, and that's you know something that we, you will hear from the ABR if you listen to that video, they're encouraging, you know, their residents and the residency program faculty to encourage their residents to start to do the same thing. And we encourage that as well. Like I said, practice now to start filling out the form because you know if you, if you aren't familiar, if you're not as involved with maintaining or keeping track of your training as you move forward towards your board, earning your board certificate, you should start now.

1:1:49.410

Vassy, David

Yes, ma'am.

1:1:51.490

Sarah Lopas (She/Her)

Right. Thank you, David.

1:1:53.580

Vassy, David

Yes, ma'am.

1:1:53.770

Sarah Lopas (She/Her)

That's it.

1:1:54.220

Vassy, David

Thank you.

1:1:54.990

Sarah Lopas (She/Her)

Good advice. This is a general T&E question. This is from Jonathan Porter -- is training/experience in Canada considered valid for this form given that preceptors and supervisors are generally not NRC designated AUs, but the Canadian equivalent?

1:2:14.210

Maryann Ayoade

That's a good question, and you may, Jonathan may have already responded to some of your question with foreign trained individuals. In this case, physicians, we don't have a recognized specialty board from Canada for the physicians, the Specialty Board that we recognize is for the physicists right now. And so what that means through the board certification pathway or even outside through the alternate pathway, is that what the block or the challenge for Canadian or foreign trained physicians is that supervised work experience and also the preceptor that's going to be signing off on the training and the

work experience. And so it does have to be the training has to be supervised by an authorized user, and that's where it has to be from an NRC agreement state licensee.

1:3:15.860

Sarah Lopas (She/Her)

Right. Thank you, Maryann. Here's that question from Kevin Nelson. Does NRC expect a shortage of AUs in the years to come now that ABR certification will no longer be recognized?

1:3:31.960

Maryann Ayoade

Thank you, uh, Kevin for that question, that is a good question. That's something that we are going to be on the lookout for. That's something that has been in discussions with our advisory committee, as I mentioned, and you will see that they did have that discussion. If you look at the meeting transcripts and their report right now, you know we are again just looking out for what to expect as a result of this. And so it's on our radar because we know ABR is a board that, you know, holds a lot of candidates and different specialty areas. And so we're on the lookout for that right now. And we are looking, we have our ears through the ground and we're going to be listening to see what to expect as we move forward.

1:4:24.10

Sarah Lopas (She/Her)

Thank you.

1:4:23.810

Celimar Valentin-Rodriguez (She/Her/Hers)

Maryann, and I just wanted to add, I think you've reiterated this point throughout the presentation, but the alternate pathway is still available to anyone who wants to become an authorized user and authorized individual. And also umm, you know you can actually work under the supervision of a current authorized user. So in that terms, unless you're actually going into an AU role.

If you're still working under the supervision of any AU and you do not want to become an authorized user at this point, you, that pathway is still available for those who don't want to attain that designation, so.

1:5:2.640

Sarah Lopas (She/Her)

Alright, I'm going to read two comments. I think by the same person, unknown user. If offered, would it be possible for AU candidates to take the RISE exam via third party exam site and submit their results and ABR certificate to satisfy the same requirements and then the follow up I think is since the ABR will continue to include the rise portion in their exam, will the NRC recognize this training to be used to complete the required NRC forms? OK.

1:5:39.30

Maryann Ayoade

Sir, I don't think I caught all of the second part of your question because I see it was OK. I see it.

1:5:46.120

Sarah Lopas (She/Her)

Yeah.

1:5:44.50

Maryann Ayoade

It was submitted after, OK so but I can start with the first part. So again, currently, because our regulations were for the different specialty boards and they're supposed to maintain or meet our criteria, right? Right now, we do not have any, you know, options to receive information from a third party that, as you pointed out, may be able to do, you know, similar or what it is that ABR has offered as far as what gets you the AU eligible. So right now, we do not have an option for that or a pathway for that. It's a comment that we're going to take back and consider, and I don't know if Celimar, if you wanted to add anything to this one.

1:6:38.740

Celimar Valentin-Rodriguez (She/Her/Hers)

No, I think for this. You know, if I'm reading it correctly, I think what's important is to look at our requirements and make sure you fulfill those requirements. I think what the RISE examination and the process that ABR submitted to us is specific to their own certification and their own special specialty process, recognition process. So, I mean, I always point people to our requirements and that's what really you need to meet and that's what you need to submit. So, anything that you would comply with during your completion of an ABR certification, you can keep the 313 form and use that to kind of keep track of that training and experience and use that towards your alternate pathway application.

1:7:30.810

Maryann Ayoade

Yeah. And I can add cause I just, Sarah, I just got to the second part of the question that says since the ABR will continue to include the RISE portion in the exam, would NRC recognize the training to be used to complete the required NRC forms and to respond to that because ABR has made the decision to no longer maintain the recognition, we can't put them on hold. If we change our regulations and they're not meeting our regulations, right, and so we can't still hold that RISE portion of the exam or any part of their certification process to the same standard that we're holding them to now because they're recognized.

And so again, all of the information that would be, would have been submitted to the boards to be able to sit for the exam is what you would have to still submit to NRC because we're going to be the ones reviewing the training records to make sure that each individual has satisfied the requirements.

We're not. What? What's happening is that we're not putting it on the American Board of Radiology anymore to maintain that they're meeting our requirements. So just wanted to clarify that.

1:8:47.900

Sarah Lopas (She/Her)

I think I'm going to follow up with the related question. The question is kind of related to this, so Suke Patel asked, are there any NRC recognized training courses available for AUs to meet the T&E requirements?

1:9:5.210

Maryann Ayoade

So I'll have Celimar follow up with me on this, but I know we have courses for our regulators. So, for our license reviewers at NRC and you agreement states to be able to review and approve, but we do not have that. I'm aware of have a generic licensing course for non-regulator staff.

1:9:34.150

Celimar Valentin-Rodriguez (She/Her/Hers)

Right, and we don't, we do not endorse any training and experience or courses from outside organizations. So, if your question is if there's any course that a physician could take to comply with our T&E requirements, we don't endorse or review any of those types of courses. So, you would have to go through your medical state board or through some professional society and look at what they offer or any courses that they may endorse. But the NRC does not endorse any training courses.

1:10:4.880

Maryann Ayoade

And I know that a couple of the professional societies have started having conversations of what they want to offer or put out there to help their different members that are associated with their, with their societies, so.

1:10:21.640

Sarah Lopas (She/Her)

Right. There's a related comment here in the chat that says SNMMI had a few 80 hour AU courses.

So. Umm OK, I am going through the chat and it looks like some people are giving hints for how to decipher the AU. The 313 forms a AUT therapy, AUD diagnostic and I am looking for any additional questions here. There, see. I don't see anything.

1:10:55.440

Celimar Valentin-Rodriguez (She/Her/Hers)

I don't see anything else, Sarah, that we haven't addressed.

1:10:58.980

Sarah Lopas (She/Her)

No, I don't see anything else either. OK, one more, one more, just popped up maybe. Oh John, John, you had a number. Let's see. So, John, your question was, I think yours was a specific a specific question here, John. I'm trying to find it, no.

1:11:16.90

Celimar Valentin-Rodriguez (She/Her/Hers)

Yeah. His question was what form for diagnostic radiologists. So, I guess what 313 form?

1:11:23.170

Maryann Ayoade

So that would be the form for uses under the diagnostic right, so 100, 200 and so that would be the AUD as people reminded me. Yes, the designations S, T, & E are for diagnostic therapeutic and sealed source related types of uses.

1:11:45.290

Sarah Lopas (She/Her)

Have.

1:11:47.240

John Lichtenberger (Guest)

Umm. And if they do iodine, they also have to do a AUT, so 2 forms.

1:11:51.950

Maryann Ayoade

It depends on what they're requesting for, if they're requesting for uses of iodine with less than 33, greater than 33. But yes, the AUT form is for the 300 uses in general, and then you have to figure out the types of use that you're requesting, or if you're requesting use under all the categories in 300.

1:12:16.350

John Lichtenberger (Guest)

And if that's true, all the categories is 2 separate forms.

1:12:24.720

Maryann Ayoade

If it's all the categories under just 300, then it's the AUT form. When you first mentioned diagnostic radiology, I wasn't sure if you were looking to do other things beyond 300, so in 100 and 200.

1:12:36.830

John Lichtenberger (Guest)

But OK, thank you.

1:12:38.500

Maryann Ayoade

So you're welcome.

1:12:42.40

Sarah Lopas (She/Her)

Great.

1:12:43.550

Sarah Lopas (She/Her)

And related to this, Celimar maybe just um, I know you mentioned that I think we're doing some, we're issuing some sort of guidance T&E filling out these forms or some sort of guidance, right? That's coming.

1:12:58.350

Celimar Valentin-Rodriguez (She/Her/Hers)

Yes.

1:12:56.440

Sarah Lopas (She/Her)

Maybe this coming summer or I'm not sure.

1:13:0.70

Celimar Valentin-Rodriguez (She/Her/Hers)

Yeah. So, we're preparing implementation guidance, this will, this can be used by licensed reviewers and NRC agreement states, but also by licensees and even individuals who are seeking authorized status.

We'll be clarifying roles and responsibilities of people who are involved in training and experience. So, what's your role as an AU versus what's your role as an AMP or so, etc. You know, we always get a lot of questions about how to count hours towards work experience casework, that kind of thing. So, we'll try to provide some clarification there. Clarification on supervision. So, it's just, it's a bit more than just filling out the forms, but there's going to be a lot more information in that guidance to kind of help answer some of these questions that we see from time to time and that will hopefully assist folks in providing better responses and or better record keeping or 313 forms. So that should be coming to you all next year. And I just want to remind people that our NUREG-1556, volume 9, Revision 3 also has information about the different pathways for becoming authorized individuals that has checklists and also information about what you need to submit depending on what type of use, what type of authorization you're seeking. So that's a really good resource for now. And so that's something that folks can use in the meantime as well.

1:14:30.790

Marc Benayoun

And.

1:14:30.350

Sarah Lopas (She/Her)

And. Who's that speaking?

1:14:34.660

Marc Benayoun

Sorry, I had my hand raised but I don't know if it went down or it's like.

1:14:37.770

Sarah Lopas (She/Her)

Uh, yeah, I don't see it. You could just introduce yourself. But is that Mark? Hi Mark.

1:14:41.980

Marc Benayoun

Yeah, it's me. I'm a professor, head of nuclear medicine at Wake Forest. So, I've got a lot of radiology residents who are going to be looking at me as their AU preceptor. And I just, you know, looking at it carefully, like if I look at any of these 313 forms, I'm going, it used to be that I would fill out the first part where it said board certification because we were going to provide an AU eligible certificate. I'm assuming now I have to skip down to the third option where it, you know, it doesn't talk about.

1:15:16.730

Maryann Ayoade

Yeah.

1:15:12.330

Marc Benayoun

It's like I think that's what you guys mean by the alternate pathway where I'm putting in all the details of radiation physics and instrumentation training, etcetera, correct, right.

1:15:20.730

Maryann Ayoade

That's correct.

1:15:20.490

Marc Benayoun

I'm just going to fill out the bottom part now instead of the top. That's literally what, that's all we're really doing differently.

1:15:25.890

Maryann Ayoade

Primarily, yes, you do still need to include.

1:15:31.470

Marc Benayoun

Sure.

1:15:28.240

Maryann Ayoade

You know the individual's name and the type of use that that first part of the form. But yes, that's the alternate pathways item, I think I there's three and the first page of the form, so item 3 should be for the alternate pathway.

1:15:42.970

Marc Benayoun

OK.

1:15:44.650

Sarah Lopas (She/Her)

OK. And I think some of these questions might be very now into more kind of specific sort of questions that might be best for your regulator. But maybe we can finish up with a couple of these questions so. 313 -- This is just a statement and I don't know if Maryann or Celimar wanted to comment on this.

313 forms are not designed for microspheres. Those are regulated that are 35.1000 emerging technologies. And then I think a follow up question is can we then use internal preceptor forms for Y-90 microspheres? That's generally what we do. Then have the preceptor write a letter.

1:16:25.570

Maryann Ayoade

Yeah, and that's fine.

1:16:29.330

Sarah Lopas (She/Her)

OK.

1:16:27.410

Maryann Ayoade

There we can take these quickly. So, I think I'm seeing there's a bunch of other comments as well related

to this. Uh, we do not have designated 313 forms for any of the 35.1000 uses, but we have had people try to use the 313 forms to fill out for microspheres. Use. Some people do not enjoy doing that.

We are currently at and I believe Celimar mentioned that we are, there is a potential or ongoing rulemaking for emerging medical technologies. In general, we have chosen not to create forms for the technologies on the 1000 because they're always changing. Microspheres, for example has so many revisions right now, and so those forms would have to have been updated a lot and so our goal is to, once we, depending on the way the rulemaking goes once it's codified, then we will look into having a set 313 forms for the type of use, whether it's microspheres or you know, beyond, so.

1:17:37.950

Sarah Lopas (She/Her)

OK. Thanks, Maryann and 1 last hand raise. Ron, you can go ahead and unmute yourself Ron Parsons.

1:17:48.340

Ron Parsons (Guest)

Uh, yeah. I was just wondering if, uh, seeing you had a little blurb about putting information on the medical list server. Is that an information notice, or are you not doing that?

1:18:3.360

Maryann Ayoade

So some I don't know if you were trying to, if you were about to say something, I could start on the medical list server is not what we call our formal generic communication or type of information notice. It's just a portal of how we send out all kind any or all information related to medical information. Notices are a separate type of NRC generic communications, and so I'm not sure if you're asking if we're putting anything out in an information notice or via the medical list server. We do send all, any kind of announcements that we have to make to the general public using our medical list server portal, so.

1:18:51.180

Celimar Valentin-Rodriguez (She/Her/Hers)

No.

1:18:50.590

Ron Parsons (Guest)

Yeah, I was asking if you were going to send information notice.

1:18:54.220

Celimar Valentin-Rodriguez (She/Her/Hers)

Work.

1:18:54.920

Maryann Ayoade

OK.

1:18:54.600

Celimar Valentin-Rodriguez (She/Her/Hers)

It's something we're considering, Ron. We'll definitely be sharing the STC letter to agreement states, but I

think you're asking for an information notice because that would go to all licensees versus just regulators, so that.

1:19:6.810

Ron Parsons (Guest)

That we send those out pretty quick and we generally attach the NRC information notice. But if y'all don't send one, we're probably going to send our own.

1:19:17.50

Maryann Ayoade

OK. Right.

1:19:17.20

Ron Parsons (Guest)

Umm, so we were just wondering general what we do is we attach the NRC's information notice, send it to our licensees just to let them know of major changes, something this pretty major change. But if y'all don't do one, then we're probably going to do one here pretty soon because December 31st coming pretty quick. So, I was just wondering if that's in in the works and if you'll have any timeframe on that.

1:19:44.10

Celimar Valentin-Rodriguez (She/Her/Hers)

It's something we're considering. Um, because since we usually use information notices to share operating experience. But in this case, that's something we're considering now. So, if we were to issue that, it would probably be around the time when we send out a notification. So, by the end of the year, if we were to do one.

1:20:3.450

Ron Parsons (Guest)

And that discontinuation of what you said you're going to post on the medical list server when the discontinuation is finalized? That'd be after December 31st, right? That'd be when it actually happens. Or would that be before?

1:20:21.810

Maryann Ayoade

Yeah.

1:20:18.480

Celimar Valentin-Rodriguez (She/Her/Hers)

Maryann, I think we're thinking about sending it before, correct, because that would be a letter to the ABR.

1:20:26.260

Maryann Ayoade

Yes, that's correct. And that's, I believe I mentioned in the presentation in November, December time frame.

1:20:34.380

Ron Parsons (Guest)

OK. Thank you.

1:20:34.420

Celimar Valentin-Rodriguez (She/Her/Hers)

But it will also be updating Ron. We'll be updating our page where we post our specialty boards and we'll make sure that that page is also updated so that letter can be available to anyone on the public website. Yes.

1:20:58.690

Maryann Ayoade

Yeah, that is publicly available, so yeah.

1:20:59.10

Ron Parsons (Guest)

OK. Thanks.

1:21:7.490

Sarah Lopas (She/Her)

OK. Umm, I think with that and I'm looking through the chats again, I'm just seeing some chat amongst the participants. That's great. I wish you all had your own little separate site where you could all share your experiences with filling out these forms and whatnot, but at this point I'm going to turn it back to Maryann or Celimar to close this out.

1:21:33.920

Maryann Ayoade

Tell him.

1:21:34.830

Celimar Valentin-Rodriguez (She/Her/Hers)

You.

1:21:34.280

Maryann Ayoade

I don't know if you wanted to go ahead.

1:21:36.620

Celimar Valentin-Rodriguez (She/Her/Hers)

No, I was just going to say thank you to everyone who stayed past 3 O'clock. I know this meeting was originally scheduled for one hour. We figured we'd provide a lot of information to you all up front because we are recording this. Umm, this meeting. We're also transcribing it, so we hope to make that available to you all. I thank you for sharing your experiences, for sharing your questions. As Maryann has reiterated during her presentation, please reach out to your regulator if you have any specific questions. Also, reach out to us at medicalquestions.resource@nrc.gov if you'd like to sign up for the medical listserv. If you go to the link that was posted for the NRC's medical toolkit in the chat that has an option to subscribe to the medical list server, we usually send out information and any publications that are publicly available through that through that list server. So, you don't expect to be receiving, you won't be

flooded with notifications from the NRC. But that is a way to maintain contact with us here in the medical team.

So again, I want to thank Maryann for her through presentation. She's our subject matter expert on training experience here at the NRC and she is our lead for emerging medical technologies, rubidium-82 generator rulemaking, so she's very busy, but she's also very knowledgeable and I really want to thank her for her command of the information provided today. So, with that, please again if you have any questions. Medicalquestions.resource@nrc.gov and we'll definitely send out a notification through our medical list server when our transcript for this meeting and the slides and the recording is available. And we'll post that to the medical toolkit. So, they will both be publicly available.

So, thank you all. And Maryann, if you want to have some parting words, if not, then we'll adjourn the meeting.

1:23:30.320

Maryann Ayoade

No, thank you all and we look forward to helping to answer any questions that you might have.

1:23:36.360

Traegde, Kenath (DPH)

Thank you.

1:23:39.600

Sarah Lopas (She/Her)

I thank you everybody. Bye bye.

1:23:40.810

Celimar Valentin-Rodriguez (She/Her/Hers)

Thank you.

1:23:44.30

Chelsea L. Smith

Thank you.

The meeting concluded at 3:23 PM.