

FLOYD MEDICAL CENTER
FUNCTIONS REQUESTED

Name in Full

Supervising Physician

Title

Department

Please list detailed description of each activity to be performed and note the degree of supervision, *direct or indirect*, by each.

Functions	Direct	Indirect	Approved
To perform radioactive implants, including ordering of radioactive materials, shipping and receiving of these materials, quality assurance, measurements and assay of these materials, supervision of handling of these materials by nursing staff and physicians, to direct imaging studies related to dosimetry, accountability, and compliance, to provide radiation safety instructions to patients and staff, to provide inventory control, and to perform regulatory compliance tasks.			

Date _____

Signature of Applicant

Date _____

Signature of Supervising Physician

APPROVED FMC:

Department Chairman or Director

Date

MEDICAL EXECUTIVE COMMITTEE RECOMMENDATION

Date

_____ Concur with Department's recommendation and forward to governing body

_____ Return to Department for clarification of the following: _____

BOARD APPROVAL: _____ YES

_____ NO

Date

3192018

Applicant's Name (please print)