



Environmental Health and Radiation Safety Radiation Safety Office

Request for Authorized User Status for External Beam Radiation Therapy

Requested Authorization: (Please Check Box):

Use of equipment subject to Chapter 3701:1-67 "External Beam Radiation Therapy Equipment" of the Ohio Administrative Code.

PLEASE NOTE: For any therapy equipment subject to Chapter 3701:1-67 of the Administrative Code, the physician who authorizes use of the therapy equipment is required to be:

- (1) Certified in one of the following:
 - (a) Radiation oncology or therapeutic radiology by the "American Board of Radiology" or combined diagnostic and therapeutic radiology program by the "American Board of Radiology" prior to 1976; or
 - (b) Radiation oncology by the "American Osteopathic Board of Radiology"; or
 - (c) Radiology, with specialization in radiotherapy, as a British "Fellow of the Faculty of Radiology" or "Fellow of the Royal College of Radiology"; or
 - (d) Therapeutic radiology by the "Canadian Royal College of Physicians and Surgeons"

Please sign and date below:

Print name of Applicant: _____

Signature of Applicant: _____

Date: _____

Please submit this application and all supporting materials to the Radiation Safety Office Mailstop #1011 or email to the Radiation Safety Officer at Joseph.Agosti@utoledo.edu

Please include:

- A letter requesting Authorized User status for submission to the University of Toledo X-ray QA Committee.
- Resume or Curriculum Vitae
- Copy of Board Certifications

All requests for Authorized User status must be approved by the University of Toledo X-ray QA Committee.