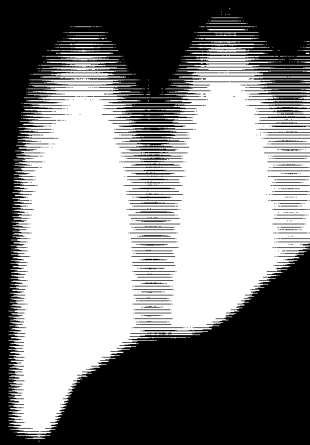
RECORD OF
UMAN RADIATION RESEARCH
1944 - 1994
U.S. ARMY
EALTH SERVICES COMMAND

VOLUME 1 OF 2

ARM1.941221.000



Department of Defense
Radiation Experiments Command Center
6801 Telegraph Road
Alexandria, Virginia 22310-3398

RECC

December 21, 1994

MEMORANDUM FOR ADVISORY COMMITTEE ON HUMAN RADIATION EXPERIMENTS, ATTN: Jim David

SUBJECT: Supplementary Material for the Advisory Committee: ARM1.941221

The RECC recently obtained the enclosed report from the Army. This two-volume report had been misplaced in the system. It summarizes the Army's search strategy in compliance with initial guidance from DoD. A Master Index showing a brief description is attached.

The Committee staff should thoroughly review the material and redact Privacy Act information prior to releasing any information to the public.

If the Committee has any questions regarding this material, do not hesitate to contact me at (703) 442-5675, or Joanne Holiday at (703) 442-5657 for questions on the Master Index.

FOR THE DIRECTOR:

CLAUD BAILEY, JR.
Colonel, AG, USA
Deputy Director,
Command Center

Attachments
as stated

Master Index: Army Items

21-Dec-94

Item Details	Description
ARM1.941221.001 Document Type: Report Document Date: 15 March 1994	From Shannon M. Harrison, Chief, Clinical Investigation Regulatory Office to Office of the Assistant Secretary of the Army for Manpower & Reserve Affairs (Col. David Suttle); Subject: Records of Human Radiation Research.

DEPARTMENT OF THE ARMY
U.S. ARMY MEDICAL DEPARTMENT CENTER AND SCHOOL
FORT SAM HOUSTON, TEXAS 78234-6100

REPLY TO ATTENTION OF

ARM1.941221.001
(vol. 1)

HSMC-GCI (40-38a)

15 March 1994

MEMORANDUM THRU BG John J. Cuddy, Deputy Commander for Healthcare Operations, U.S. Army Medical Command (Provisional), Fort Sam Houston, Texas 78234-6000

FOR Office of the Assistant Secretary of the Army for Manpower & Reserve Affairs, ATTN: SAMR-HP (COL David E. Suttle, GS), 111 Army Pentagon, Washington, DC 20310-0111

SUBJECT: Records of Human Radiation Research

1. Revisions to an earlier report requested by the Assistant to the Secretary of Defense are enclosed: Part I and Part II of the request for records involving experiments with human exposure to ionizing radiation within U.S. Health Services Command (HSC) (Enclosures 1 and 2).

2. Part I is the list of facilities queried. The current version of Part II reports answers obtained to date. Part II is not complete, due to the complexity of thoroughly and responsibly searching for records at 60 sites. We will provide you periodic updates of Part II until it completely reflects each medical treatment facility of HSC. Part III consists of the summaries of raw data collected to date (Enclosure 3).

3. Corporate policy in the United States Army required measures for the protection of human subjects as early as 1962, two years before the original Helsinki declaration on the responsible conduct of human experimentation in medical research. Most existing records consist of short entries in annual reports. Few specific records of informed consent have been found, but we have no reason to believe that any volunteer subjects received any unethical treatment of any sort.

4. In compiling the data provided in this report, we erred on the side of inclusion and disclosure of studies involving human exposure to ionizing radiation. If you desire any details not provided here, we seek those answers. For many of the studies described, the only extant information is the title of the protocol recorded in historical summaries.

5. Contact MAJ John D. Grabenstein, Regulatory Affairs Pharmacist, for additional information: DSN 471-2511, commercial 210-221-2511, fax 210-554-4756.

SHM Harrison COMC

3 Encls

SHANNON M. HARRISON
COL, MC
Chief, Clinical Investigation
Regulatory Office

CF: COL Fetters, HSC
COL Erdtmann, OTSG
CAPT Jemionek, DDRE

Part I: Army Medical Treatment Facilities (MTFs)

The following medical treatment facilities in U.S. Army Health Services Command (HSC) have been queried about the existence of records of human research involving ionizing radiation.

Group A. All Army hospitals within HSC that currently operate or previously operated human-use-review and/or clinical-investigation committees (also known as institutional review boards, IRBs), under the human safeguards of Army Regulation (AR) 40-38, Title 32 Code of Federal Regulations (CFR) 219, and 45 CFR 46. Most of these facilities are "teaching hospitals" that train medical, dental, and other interns, residents, and fellows. Clinical research is common at these locations. We believe that these facilities conducted all human research involving exposure to ionizing radiation with appropriate safeguards of scientific scrutiny and under conditions of informed consent.

Brooke Army Medical Center (MEDCEN), Fort Sam Houston TX 78234-6200
Dwight David Eisenhower Army Medical Center, Fort Gordon GA 30905-5650
Fitzsimons Army Medical Center, Aurora CO 80045-5001
Madigan Army Medical Center, Tacoma WA 98431-5454
Tripler Army Medical Center, Tripler AMC HI 96859-5000
William Beaumont Army Medical Center, El Paso TX 79920-5001
Walter Reed Army Medical Center, Washington DC 20307-5001
Womack Army Medical Center, Fort Bragg NC 28307-5000
Martin Army Community Hospital, Fort Benning GA 31905-6006
Keller Army Community Hospital, West Point NY 10996-1197
Letterman Army Health Clinic, Presidio of San Francisco CA 94129-6700

Group B. All other Army hospitals and stand-alone health clinics within HSC (encompassing the United States and Panama). These facilities may or may not have operated IRBs in the past. Each of these facilities currently receives advice and guidance on the ethical conduct of scientific research, as well as human-protection oversight for the purposes of AR 40-38, 32 CFR 219, and 45 CFR 46 from the Army Medical Center in their geographic region. These facilities are listed in sequence by state. It would be quite unusual for these facilities to conduct any form of organized medical research, let alone radiation research. The probability of radiation experiments at these locations is extremely small, but we queried them for the sake of completeness, to assure the American people that all efforts were made to detect radiation experiments.

NOBLE ARMY COMMUNITY HOSPITAL, FORT MCCLELLAN AL 36205-5083
LYSTER ARMY COMMUNITY HOSPITAL, FORT RUCKER AL 36362-5333
FOX ARMY COMMUNITY HOSPITAL, REDSTONE ARSENAL AL 35809-7000
BASSETT ARMY COMMUNITY HOSPITAL, FORT WAINWRIGHT AK 99703-7300
BLISS ARMY COMMUNITY HOSPITAL, FORT HUACHUCA AZ 85613-7040
U.S. ARMY HEALTH CLINIC, YUMA PROVING GROUND AZ 85365-9106
HAYS ARMY COMMUNITY HOSPITAL, FORT ORD CA 93941-5800
WEED ARMY COMMUNITY HOSPITAL, FORT IRWIN CA 92310-5065
EVANS ARMY COMMUNITY HOSPITAL, FORT CARSON CO 80913-5207
U.S. ARMY HEALTH CLINIC, FORT MCPHERSON GA 30330-5000
WINN ARMY COMMUNITY HOSPITAL, FORT STEWART GA 31314-5300
TUTTLE ARMY HEALTH CLINIC, HUNTER ARMY AIRFIELD, SAVANNAH GA 31409-5180
U.S. ARMY HEALTH CLINIC, SCHOFIELD BARRACKS HI 96857-5460
U.S. ARMY HEALTH CLINIC, ROCK ISLAND ARSENAL, ROCK ISLAND IL 61299-7240
HAWLEY ARMY COMMUNITY HOSPITAL, FORT BENJAMIN HARRISON IN 46216-7000
MUNSON ARMY COMMUNITY HOSPITAL, FORT LEAVENWORTH KS 66027-5400
IRWIN ARMY COMMUNITY HOSPITAL, FORT RILEY KS 66442-5037

Part I: Army Medical Treatment Facilities (MTFs)

Group B (continued)

BLANCHFIELD ARMY COMMUNITY HOSPITAL, FORT CAMPBELL KY 42223-1498
IRELAND ARMY COMMUNITY HOSPITAL, FORT KNOX KY 40121-5520
U.S. ARMY HEALTH CLINIC, LEXINGTON BLUE GRASS ARMY DEPOT KY 40507-5106
BAYNE-JONES ARMY COMMUNITY HOSPITAL, FORT POLK LA 71459-6000
KIMBROUGH ARMY COMMUNITY HOSPITAL, FORT MEADE MD 20755-5800
KIRK ARMY HEALTH CLINIC, ABERDEEN PROVING GROUND MD 21015-5131
U.S. ARMY ENVIRONMENTAL HYGIENE AGENCY, ABERDEEN PRVG GRD MD 21010-5422
U.S. ARMY HEALTH CLINIC, FORT DETRICK MD 21702-5000
U.S. ARMY HEALTH CLINIC, FORT RITCHIE MD 21719
CUTLER ARMY COMMUNITY HOSPITAL, FORT DEVENS MA 01433-6401
U.S. ARMY HEALTH CLINIC, SELFRIDGE AIR NATIONAL GUARD BASE MI 48045-5012
GEN LEONARD WOOD ARMY COMMUNITY HOSPITAL, FT LEONARD WOOD MO 65473-5700
PATTERSON ARMY COMMUNITY HOSPITAL, FORT MONMOUTH NJ 07703-5000
McAFEE ARMY HEALTH CLINIC, WHITE SANDS MISSILE RANGE NM 88002-5520
GUTHRIE ARMY HEALTH CLINIC, FORT DRUM NY 13602-5004
U.S. ARMY HEALTH CLINIC, SENECA ARMY DEPOT, ROMULU.S. NY 14541-5001
U.S. ARMY HEALTH CLINIC, WATERVLIET ARSENAL, WATERVLIET NY 12189-5000
REYNOLDS ARMY COMMUNITY HOSPITAL, FORT SILL OK 73503-6300
DUNHAM ARMY HEALTH CLINIC, CARLISLE BARRACKS PA 17013-5003
U.S. ARMY HEALTH CLINIC, TOBYHANNA PA 18466-6083
U.S. ARMY HEALTH CLINIC, FORT INDIANTOWN GAP PA 17003
MONCRIEF ARMY COMMUNITY HOSPITAL, FORT JACKSON SC 29207-5720
DARNALL ARMY COMMUNITY HOSPITAL, FORT HOOD TX 76544-5063
DUGWAY ARMY HEALTH CLINIC, DUGWAY PROVING GROUND UT 84022-6900
TOOELE HEALTH CLINIC, TOOELE ARMY DEPOT, TOOELE UT 84074-5014
DEWITT ARMY COMMUNITY HOSPITAL, FORT BELVOIR VA 22060-5901
MCDONALD ARMY COMMUNITY HOSPITAL, FORT EUSTIS VA 23604-5548
KENNER ARMY COMMUNITY HOSPITAL, FORT LEE VA 23801-5260
RADER ARMY HEALTH CLINIC, FORT MYER VA 22211-5050
U.S. ARMY HEALTH CLINIC, THE PENTAGON, WASHINGTON DC 20310-5801
GORGAS ARMY HOSPITAL, APO MIAMI 34004-5000
U.S. ARMY MEDICAL DEPARTMENT CENTER & SCHOOL, FORT SAM HOUSTON TX 78234

Steps Taken to Locate Records of Human Radiation Exposure

We tasked each of these MTFs with conducting a comprehensive and thorough search for records of human radiation exposure.

Each MTF appointed a responsible project officer to assemble an inventory of existing research records and statements from records custodians. Most MTFs selected the Radiation Protection Officer (RPO) for their activity. The search included at least the following:

(1) A review of all available annual historical reports.

(2) Inquiries to senior nuclear-medicine physicians, radiologists, nuclear pharmacists, radiation oncologists, and other appropriate officers regarding the existence of administrative or centralized clinical records.

(3) Requests for information at meetings of the administrative, clinical, and other appropriate staffs of the MTF.

We further instructed all project officers to take all other prudent steps to identify records and to itemize searches for records that revealed no evidence of human exposure to ionizing radiation.

We initially asked for information from 1944 to 1974. We supplemented this request with a request for an unlimited search for data.

Part II: Locations of Human Clinical Investigations

Section A. Facilities of U.S. Army Health Services Command at which we are confident that no investigational human exposures to ionizing radiation took place between 1944 and February 1994, based on reports from that facility, 15 March 1994

Group A

Dwight David Eisenhower Army Medical Center, Fort Gordon, GA
Martin Army Community Hospital, Fort Benning, GA
Womack Army Medical Center, Fort Bragg, NC
Keller Army Community Hospital, West Point, NY
Letterman Army Hlth Clinic, Presidio of San Francisco, CA

Group B

Bassett Army Community Hospital, Fort Wainwright, AK
Noble Army Community Hospital, Fort McClellan, AL
Lyster Army Community Hospital, Fort Rucker, AL
Fox Army Community Hospital, Redstone Arsenal, AL
U.S. Army Health Clinic, Yuma Proving Ground, AZ
Weed Army Community Hospital, Fort Irwin, CA
Hays Army Community Hospital, Fort Ord, CA
Evans Army Community Hospital, Fort Carson, CO
U.S. Army Health Clinic, Fort McPherson, GA
Winn Army Community Hospital, Fort Stewart, GA
Tuttle Army Health Clinic, Hunter Army Airfield, Savannah, GA
U.S. Army Health Clinic, Schofield Barracks, HI
U.S. Army Health Clinic, Rock Island Arsenal, Rock Island, IL
Hawley U.S. Army Health Clinic, Fort Benjamin Harrison, IN
U.S. Army Health Clinic, Jefferson Proving Ground, IN
Irwin Army Community Hospital, Fort Riley, KS
Blanchfield Army Community Hospital, Fort Campbell, KY
U.S. Army Health Clinic, Lexington Blue Grass Army Depot, KY
Cutler Army Health Clinic, Fort Devens, MA
Kimbrough Army Community Hospital, Fort Meade, MD
U.S. Army Health Clinic, Fort Ritchie, MD
Kirk Army Health Clinic, Aberdeen Proving Ground, MD
U.S. Army Environmental Hygiene Agency, Aberdeen Proving Ground, MD
General Leonard Wood Army Community Hospital, Fort Leonard Wood, MO
Patterson Army Community Hospital, Fort Monmouth, NJ
Bayne-Jones Army Community Hospital, Fort Polk, LA
McAfee Army Health Clinic, White Sands, NM
Guthrie Army Health Clinic, Fort Drum, NY
U.S. Army Health Clinic, Seneca Army Depot, Romulus, NY
U.S. Army Health Clinic, Watervliet Arsenal, Watervliet, NY
Dunham Army Health Clinic, Carlisle Barracks, PA
U.S. Army Health Clinic, Fort Indiantown Gap, PA
U.S. Army Health Clinic, Tobyhanna, PA
Moncrief Army Community Hospital, Fort Jackson, SC
Darnall Army Community Hospital, Fort Hood, TX
Tooele Health Clinic, Tooele Army Depot, Tooele, UT
DeWitt Army Community Hospital, Fort Belvoir, VA
Kenner Army Community Hospital, Fort Lee, VA
Rader Army Health Clinic, Fort Myer, VA
Gorgas Army Hospital (USA MEDDAC - Panama), Panama
U.S. Army Medical Department Center & School, Fort Sam Houston, TX

Part II: Locations of Human Clinical Investigations

Section A (continued)

Based on informal telephone conversations with officers at the following hospitals and clinics of U.S. Army Health Services Command, project officers identified no experiments of interest yet. We still await a written response.

Bliss Army Community Hospital, Fort Huachuca, AZ (Mr. Campbell)
Munson Army Community Hospital, Fort Leavenworth, KS (CPT Megan)
U.S. Army Health Clinic, Selfridge ANG Base, MI (CPT Kaiermeier)
McDonald Army Community Hospital, Fort Eustis, VA (MAJ Smith)

We still await any response from the following hospitals and clinics. We continue to solicit information from these sites.

U.S. Army Health Clinic, Fort Detrick, MD
Reynolds Army Community Hospital, Fort Sill, OK
Dugway Army Health Clinic, Dugway Proving Ground, UT
U.S. Army Health Clinic, The Pentagon, Washington, DC

Part II: Locations of Human Clinical Investigations

Section B. Facilities of U.S. Army Health Services Command at which investigational human exposures to ionizing radiation took place using health-care delivery resources (Major Defense Program 8) between 1944 and 1978, based on reports from that facility. We identified no evidence of impropriety in any study. 9 March 1994

General Comment: Corporate policy in the U.S. Army required measures for the protection of human subjects (including informed consent) as early as 1962, two years before the original Helsinki declaration on human research ethics.

	Total IR Studies	SE	RT	OG	DTSP	Other	Comment
Brooke Army MEDCEN	22	10	9	5	3	0	
Eisenhower Army MEDCEN	0	0	0	0	0	0	
Fitzsimons Army MEDCEN	18	16	0	0	2	0	
Letterman Army HC/MEDCEN	0	0	0	0	0	0	
Madigan Army MEDCEN	11	6	5	5	0	0	
Tripler Army MEDCEN	21	2	6	6	13	0	
Womack Army MEDCEN	0	0	0	0	0	0	
Wm Beaumont Army MEDCEN	10	10	1	0	0	0	
Walter Reed Army MEDCEN	40	18	20	10	2	0	
Total (1944 to 1978)	122	62	41	26	20	0	

Definitions (not mutually exclusive, except DTSP):

IR - ionizing radiation

SE - projects involving radiopharmaceuticals licensed by the FDA at the time of study or investigational radiopharmaceuticals subsequently licensed as safe and effective.

RT - projects involving external-source radiation therapy (e.g., for cancer or thyroid disease) used at a presumably safe and effective dose.

OG - projects involving collaborative oncology groups [e.g., Cancer & Leukemia Group B (CALGB), Gynecologic Oncology Group (GOG), Pediatric Oncology Group (POG), Southwest Oncology Group (SWOG)]. These groups, often funded by the National Institutes of Health (NIH), offer the advantage of centralized review of the science and ethics of projects conducted at multiple civilian and federal hospitals around the country.

DTSP - other projects involving the diagnosis or treatment of sick people to manage clinical disease. Excludes SE, RT, or OG categories.

Part II: Locations of Human Clinical Investigations

Section C. Facilities of U.S. Army Health Services Command at which investigational human exposures to ionizing radiation took place between 1979 and February 1994, based on entries in the automated Clinical Investigation Research System (CIRS) database. We identified no evidence of impropriety in any study. 9 March 1994

General Comment: Corporate policy in the United States Army required measures for the protection of human subjects (including informed consent) as early as 1962, two years before the original Helsinki declaration on human research ethics.

	Total IR Studies	SE	RT	OG	DTSP	Other	Comment
Brooke Army MEDCEN	136	20	94	89	22	1	ER
Eisenhower Army MEDCEN	40	6	26	24	8	0	
Fitzsimons Army MEDCEN	85	16	63	60	6	0	
Letterman Army MEDCEN (later Health Clinic)	68	22	36	31	11	0	
Madigan Army MEDCEN	78	8	58	54	10	2	ER, XR
Tripler Army MEDCEN	71	8	48	48	15	0	
Womack Army MEDCEN	1	0	0	0	0	1	XR
Wm Beaumont Army MEDCEN	58	21	22	19	15	0	
Walter Reed Army MEDCEN	169	44	90	83	33	0	
Total (1979 to 1994)	706	145	437	408	120	4	
GRAND TOTAL (1944 to 1994) (see also Section D)	828	207	478	434	144	4	

Notes:

ER - Evaluation of occupational radiation exposure of ER personnel.

XR - Field tests of new field X-ray equipment for combat hospitals.

Part II: Locations of Human Clinical Investigations

Section D. Facilities of U.S. Army Health Services Command at which investigational human exposures to ionizing radiation took place between 1944 and February 1994, based on all sources of data. We identified no evidence of impropriety in any study. 9 March 1994

General Comment: Corporate policy in the U.S. Army required measures for the protection of human subjects (including informed consent) as early as 1962, two years before the original Helsinki declaration on human research ethics.

	Total IR Studies	SE	RT	OG	DTSP	Other	Comment
Brooke Army MEDCEN	158	30	103	94	25	1	ER
Eisenhower Army MEDCEN	40	6	26	24	8	0	
Fitzsimons Army MEDCEN	103	32	63	60	8	0	
Letterman Army MEDCEN/HC	68	22	36	31	11	0	PD
Madigan Army MEDCEN	89	14	63	59	10	2	ER, XR
Tripler Army MEDCEN	92	10	54	54	28	0	
Womack Army MEDCEN	1	0	0	0	0	1	XR
Wm Beaumont Army MEDCEN	68	31	23	19	15	0	
Walter Reed Army MEDCEN	209	62	110	93	35	0	
GRAND TOTAL (1944 to 1994)	828	207	478	434	144	4	

Definitions (not mutually exclusive, except DTSP):

IR - ionizing radiation

SE - projects involving radiopharmaceuticals licensed by the FDA at the time of study or investigational radiopharmaceuticals subsequently licensed as safe and effective.

RT - projects involving external-source radiation therapy (e.g., cancer or thyroid disease) used at a presumably safe and effective dose.

OG - projects involving collaborative oncology groups [e.g., Gynecologic Oncology Group (GOG), Pediatric Oncology Group (POG), Southwest Oncology Group (SWOG)]. These groups, often funded by the National Institutes of Health (NIH), offer the advantage of centralized review of the science and ethics of projects conducted at multiple civilian and federal hospitals around the country.

DTSP - other projects involving the diagnosis or treatment of sick people to manage their own clinical disease. Excludes SE, RT, or OG. Includes evaluations of radiographic techniques (e.g., barium enemas), computerized tomography (CT) scans, and other techniques.

ER - Evaluation of occupational radiation exposure of ER personnel.

PD - Preliminary data

XR - Field tests of new field X-ray equipment for combat hospitals.

Part II:

Section D. (continued)

ISOTOPES USED IN RADIOPHARMACEUTICAL STUDIES

Atomic Symbol	Isotope, Salt	1944-1978	1979-1994	Total
Cr	Chromium-51	2	0	2
Co	Cobalt-57 (in Vit B-12)	0	1	1
F	Fluorine-18	1	1	2
Ga	Gallium Citrate-67	10	11	21
Au	Gold, Unspecified	1	0	1
In	Indium-111	3	39	42
P	Chromic Phosphate P-32	1	9	10
I	Sodium Iodide-123	5	8	13
	Sodium Iodide-125	1	1	2
	Sodium Iodide-131	7	19	26
	Iodine, Unspecified	5	5	10
Sr	Strontium-89	0	4	4
Tc	Technetium-99m	15	60	75
Tl	Thallous Chloride-201	3	7	10
Xe	Xenon-133	6	1	7
Indeterminate or Unspecified		12	40	52
Total Number of Studies *		69	204	273

* - columns do not sum arithmetically, because some studies involved more than one isotope

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ONCOLOGY GROUP PROTOCOLS (1944 to 1994)

	Unique Protocols	Iterations of Protocols at Multiple Sites
Cancer & Leukemia Group B (CALGB)	24	27
Gynecologic Oncology Group (GOG)	31	96
Pediatric Oncology Group (POG)	25	62
South Western Oncology Group (SWOG)	86	183
Other Group Projects	59	66
Total	225	434

Part III: Source Documents & References

Summary information on 706 clinical investigations involving human exposure to ionizing radiation in U.S. Army Health Services Command (HSC) medical-treatment facilities (MTFs) between 1979 and 1994. Extracted from the Clinical Investigation Research System (CIRS) database. [Additional information is available about each study listed, but only by calling up each study individually.]	Tab A
Report from Brooke Army Medical Center, Fort Sam Houston, TX	Tab B
Report from D.D. Eisenhower Army Medical Center, Fort Gordon, GA	Tab C
Report from Fitzsimons Army Medical Center, Aurora, CO	Tab D
Report from Madigan Army Medical Center, Tacoma, WA	Tab E
Report from Tripler Army Medical Center, Honolulu, HI	Tab F
Report from William Beaumont Army Medical Center, El Paso, TX	Tab G
Report from Walter Reed Army Medical Center, Washington, DC	Tab H
Report from Womack Army Medical Center, Fort Bragg, NC	Tab I
Report from Martin Army Community Hospital, Fort Benning, GA	Tab J
Report from Keller Army Community Hospital, West Point, NY	Tab K
Report from Letterman Army Health Clinic, Presidio of San Francisco CA	Tab L
Reports from Other HSC Hospitals and Clinics	Tab M
Requests for Information (26 + 28 Jan 1994, 15 Feb 1994)	Tab N
Accomplishments of Army Ionizing Radiation Research	Tab O
Army Regulation 40-7, Use of Investigational Drugs & Devices in Humans and the Use of Schedule I Controlled Drug Substances	Tab P
Army Regulation 40-38, Clinical Investigation Program	Tab Q

A

CODE BOOK FOR HUMAN CLINICAL INVESTIGATIONS INVOLVING IONIZING RADIATION
. ARMY HEALTH SERVICES COMMAND, 1979 to 1994

15 March 1994

DATA RECORDED IN THE CLINICAL INVESTIGATION RESEARCH SYSTEM (CIRS) DATABASE

BAMC	- Brooke Army Medical Center, Fort Sam Houston, TX
CALGB	- Cancer & Leukemia Group B
CCG	- Central Cancer Group
Co	- Cobalt
CSP	- A study involving the care of sick people; also called DTSP - Diagnosis and treatment of sick people.
CT	- Computerized tomography (CT scans, also called computer-assisted tomography or CAT scans)
DDEAMC	- Dwight D. Eisenhower Army Medical Center, Fort Gordon, GA
DTSP	- Diagnosis and treatment of sick people.
ECOG	- Eastern Cooperative Oncology Group
F	- Fluorine
FAMC	- Fitzsimons Army Medical Center, Aurora, CO
FDA	- Food & Drug Administration
Ga	- Gallium citrate
GOG	- Gynecologic Oncology Group
HSC	- Health Services Command
)	- Human Use Review Office, USAMRDC (now called Human Use Review & Regulatory Affairs Directorate)
I	- Iodine
In	- Indium
IND	- Investigational New Drug
LAHC	- Letterman Army Health Clinic
LAMC	- Letterman Army Medical Center, Presidio of San Francisco, CA; now Letterman Army Health Clinic (LACH)
LCSG	- Lung Cancer Study Group
MAMC	- Madigan Army Medical Center, Fort Lewis, WA
N	- No
NBCG	- National Breast Cancer Group
NBCCGA	- National Breast & Colon Cancer Group A
NCI	- National Cancer Institute
NCOG	- Northern California Oncology Group
NPC	- NasoPharyngeal Cancer Group
NPCP	- National Prostatic Cancer Project
NSABP	- National Surgical Adjuvant Breast & Bowel Project
OG	- Oncology group
P	- Phosphorus
PE	- Positron-emission tomography (PET scans)
PET	- Positron-emission tomography
POG	- Pediatric Oncology Group
RT	- Radiation therapy
RTOG	- Radiation Therapy Oncology Group

	- Radiopharmaceuticals determined by FDA to be safe and effective
Sr	- Strontium
SWOG	- Southwestern Oncology Group
TAMC	- Tripler Army Medical Center, Honolulu, HI
Tc	- Technetium
TCMAA	- Technetium-macro-aggregated albumin
Tl	- Thallium
UCOLO	- University of Colorado
UNSPEC	- Unspecified, indeterminate
USAMRDC	- US Army Medical Research & Development Command
UWNG	- University of Washington Neuro-Oncology Group
WAMC	- Womack Army Medical Center, Fort Bragg, NC
WBAMC	- William Beaumont Army Medical Center, El Paso, TX
WOG	- Western Oncology Group
WRAMC	- Walter Reed Army Medical Center, Washington, DC
Xe	- Xenon
XR	- Radiographic studies involving X-rays. Includes CT scans and PET scans.
Y	- Yes

If additional information is needed about these data, please contact
MAJ John D. Grabenstein, MS, Regulatory Affairs Pharmacist,
Clinical Investigation Regulatory Office,
AMEDD Center & School, Fort Sam Houston, TX 78234-6125
-221-2511, fax 210-554-4756

Record number 1

HSC	:	HURO	:		
SITE	: WRAMC	CSP	: Y	SE	: SE
ISOTOPE	: TC 99M	RT	:	OG	:
AME	:				
TITLE1	: STUDY OF 99MTC SULFIDE COLLOID AS AN AGENT FOR RADIOISOTOPE LYMPHOGRAPHY				
TITLE2	:				
TITLE3	:				

Record number 2

HSC	:	HURO	:		
SITE	: WRAMC	CSP	: Y	SE	: SE
ISOTOPE	: IN 111	RT	:	OG	:
OGNAME	:				
TITLE1	: CLINICAL EVALUATION OF INDIUM 111 CHLORIDE				
TITLE2	:				
TITLE3	:				

Record number 3

HSC	:	HURO	:		
SITE	: WRAMC	CSP	: Y	SE	: SE
ISOTOPE	: IN 111	RT	:	OG	:
OGNAME	:				
TITLE1	: CLINICAL EVALUATION OF INDIUM 111 DTPA				
TITLE2	:				
TITLE3	:				

Record number 4

HSC	:	HURO	:		
SITE	: WRAMC	CSP	: Y	SE	: SE
ISOTOPE	: GA 67	RT	:	OG	:
OGNAME	:				
TITLE1	: GALLIUM 67 CITRATE SCANS IN DETECTION OF EXTENT OF TESTICULAR TUMORS				
TITLE2	:				
TITLE3	:				

Record number 5

HSC	:	HURO	:		
SITE	: WRAMC	CSP	: Y	SE	: SE
ISOTOPE	: GA 67	RT	:	OG	:
OGNAME	:				
TITLE1	: GALLIUM 67 CITRATE IN THE DIFFERENTIATION OF COLD NODULES FOUND IN THE LIVER SC				
TITLE2	: AN				
TITLE3	:				

Record number 6

HSC	:	HURO	:		
SITE	: WRAMC	CSP	: Y	SE	: SE
ISOTOPE	: GA 67	RT	:	OG	:
OGNAME	:				
TITLE1	: GALLIUM 67 CITRATE IN THE DIFFERENTIATION OF COLD NODULES FOUND IN THE THYROID				
TITLE2	: SCAN				

TITLE3 :

Record number 7

HSC	:	HURO	:		
SITE	: WRAMC	CSP	: Y	SE	: SE
ISOTOPE	: TC 99M	RT	:	OG	:
OGNAME	:				
TITLE1	: INCREASING TECHNETIUM-99M SULFUR COLLOID UPTAKE IN BONE MARROW				
TITLE2	:				
TITLE3	:				

Record number 8

HSC	:	HURO	:		
SITE	: WRAMC	CSP	: Y	SE	: SE
ISOTOPE	: TC 99M	RT	:	OG	:
OGNAME	:				
TITLE1	: TECHNETIUM-99M POLYPHOSPHATE FOR BONE IMAGING				
TITLE2	:				
TITLE3	:				

Record number 9

HSC	:	HURO	:		
SITE	: WRAMC	CSP	: Y	SE	: SE
TOPE	: TC 99M	RT	:	OG	:
OGNAME	:				
TITLE1	: TECHNETIUM-99M POLYPHOSPHATE COMPLEXES AS POTENTIAL ORGAN IMAGING AND TUMOR LOC				
TITLE2	: ALIZING AGENTS				
TITLE3	:				

Record number 10

HSC	:	HURO	:		
SITE	: WRAMC	CSP	: Y	SE	: SE
ISOTOPE	: I? P32	RT	:	OG	:
OGNAME	:				
TITLE1	: COMPARISON OF THE USE OF RADIOACTIVE PHOSPHORUS AND RADIO-IODINATED CHLOROQUINE				
TITLE2	: IN THE DIAGNOSIS OF MELANOMA TUMORS OF THE EYE				
TITLE3	:				

Record number 11

HSC	:	HURO	:		
SITE	: WRAMC	CSP	: Y	SE	: SE
ISOTOPE	: I 123	RT	:	OG	:
OGNAME	:				
TITLE1	: PRODUCTION OF IODINE 123				
TITLE2	:				
TITLE3	:				

Record number 12

HSC	:	HURO	:

SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG :
OGNAME :
TITLE1 : RADIOTHERAPY OF LOCALIZED AND REGIONALLY ADVANCED NODAL AND EXTRA-NODAL MALIGNA
TITLE2 : NT LYMPHORETICULAR TUMORS AND INTENSIVE RADIOTHERAPY AND CHEMOTHERAPY OF NODULA
TITLE3 : R LYMPHOMAS

Record number 13
HSC : HURO :
SITE : WRAMC CSP : Y SE : SE
ISOTOPE : GA 67 RT : OG :
OGNAME :
TITLE1 : STUDY OF THE USE OF GALLIUM-67 CITRATE IN THE STAGING OF HODGKIN'S DISEASE
TITLE2 :
TITLE3 :

Record number 14
HSC : HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : COMPARISON OF ENDOSCOPIC AND RADIOLOGIC EVALUATION OF THE UPPER GASTROINTESTINA
TITLE2 : L TRACT
TITLE3 :

Record number 15
HSC : HURO :
SITE : WRAMC CSP : Y SE : SE
ISOTOPE : I 131 RT : OG :
OGNAME :
TITLE1 : I-131 INDUCED HYPOTHYROIDISM: RELATIONSHIP TO IODINE METABOLISM AND MEASUREMEN
TITLE2 : T OF ONSET BY RIA-T4 DETERMINATION
TITLE3 :

Record number 16
HSC : HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : WRAMC7601A
TITLE1 : WRAMC #7601-A: TREATMENT OF UNRESECTABLE BRONCHOGENIC CARCINOMA WITH CCNU 2-cH
TITLE2 : LORETHYL)-3-CYCLOHEXYL-1-NITROSOUREA, CYCLOSPHAMIDE, ADRIAMYCIN, PROCARBAZINE,
TITLE3 : HEXAMETHYLMELAMINE, METHOTREXATE, AND IRRADIATION

Record number 17
HSC : HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG :
OGNAME :
TITLE1 : TREATMENT OF WOMEN WITH CERVICAL CANCER STAGE IIB, IIIB, IVA CONFIEND TO THE PE
TITLE2 : LVIS AND/OR PERIAORTIC NODES WITH RADIOTHERAPY ALONE VS RADIOTHERAPY PLUS IMMUN

TITLE3 : OTHERAPY (INTRAVENOUS C. PARVUM), PHASE II

Record number 18

HSC	:		HURO	:			
SITE	:	WRAMC	CSP	:	Y	SE	:
ISOTOPE	:		RT	:	RT	OG	:
OGNAME	:						

TITLE1 : A RANDOMIZED STUDY OF ADRIAMYCIN AS AN ADJUVANT AFTER SURGERY AND RADIATION THE
TITLE2 : RAPY IN PATIENTS WITH HIGH RISK ENDOMETRIAL CARCINOMA STAGE I AND OCCULT STAGE
TITLE3 : II

Record number 19

HSC	:		HURO	:			
SITE	:	WRAMC	CSP	:	Y	SE	: SE
ISOTOPE	:	TL 201	RT	:		OG	:
OGNAME	:						

TITLE1 : STUDY OF THALLIUM CHLORIDE TL 201 FOR MYOCARDIAL IMAGING IN ACUTE INFARCTION AN
TITLE2 : D/OR ISCHEMIA
TITLE3 :

Record number 20

HSC	:		HURO	:			
SITE	:	WBAMC	CSP	:	Y	SE	: SE
'OPE	:	I 125	RT	:	RT	OG	:
OGNAME	:						

TITLE1 : 125-I BONE SCAN DENSITOMETRY IN THE HYPERTHYROID STATE
TITLE2 :
TITLE3 :

Record number 21

HSC	:		HURO	:			
SITE	:	MAMC	CSP	:	Y	SE	: SE
ISOTOPE	:	GA 67	RT	:		OG	:
OGNAME	:						

TITLE1 : 67-GALLIUM CITRATE BODY SCANNING FOR TUMOR OR ABSCESSES
TITLE2 :
TITLE3 :

Record number 22

HSC	:		HURO	:			
SITE	:	WBAMC	CSP	:	Y	SE	: SE
ISOTOPE	:	TC 99M	RT	:		OG	:
OGNAME	:						

TITLE1 : 99M-TC POLYPHOSPHATE IN THE DIAGNOSIS OF BONE DISEASE IN PATIENTS
TITLE2 :
TITLE3 :

Record number 23

HSC	:		HURO	:			

SITE : WBAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : 99M-TC PYROPHOSPHATE BONE SCANNING AGENTS IN THE DAGNOSIS AND ASSESSMENT OF MYO
TITLE2 : CARDIAL INFARCTION
TITLE3 :

Record number 24
HSC : HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG :
OGNAME :
TITLE1 : A RANDOMIZED COMPARISON OF PELVIC AND ABDOMINAL RADIATION THERAPY VERSUS PELVIC
TITLE2 : RADIATION AND MELPHALAN VS MELPHALAN ALONE IN STAGE II CARCINOMA OF THE OVARY
TITLE3 :

Record number 25
HSC : HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : A ROENTGENOGRAPHIC TECHNIQUE FOR MEASURING LUNG VOLUME
TITLE2 : FAMC # 69/140
TITLE3 :

Record number 26
HSC : HURO :
SITE : FAMC CSP : Y SE : SE
ISOTOPE : I 131 RT : OG :
OGNAME :
TITLE1 : AN EVALUATION OF RENAL FUNCTION UTILIZING RADIOIODINE LABELED DIODRAST
TITLE2 :
TITLE3 :

Record number 27
HSC : HURO :
SITE : BAMC CSP : Y SE : SE
ISOTOPE : I 123 RT : OG :
OGNAME :
TITLE1 : APPROVAL OF IODINE 123 LABELED ROSE BENGAL ORTHO-IODO-HIPPURATE
TITLE2 :
TITLE3 :

Record number 28
HSC : HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : UNSPEC RT : OG :
OGNAME :
TITLE1 : ASSESSMENT OF THYROID HORMONE KINETICS IN THERMALLY INJURED PATIENTS
TITLE2 :

TITLE3 :

Record number 29

HSC	:	HURO	:		
SITE	: BAMC	CSP	: Y	SE	: SE
ISOTOPE	: UNSPEC	RT	:	OG	:
OGNAME	:				
TITLE1	: BONE SCANNING AS A METHOD FOR DETECTING EARLY RENAL OSTEODYSTROPHY				
TITLE2	:				
TITLE3	:				

Record number 30

HSC	:	HURO	:		
SITE	: WRAMC	CSP	: Y	SE	:
ISOTOPE	:	RT	: RT	OG	: OG
OGNAME	: CALGB 7291				
TITLE1	: CALGB #7291 - INTERGROUP RHABDOMYOSARCOMA STUDY: ROLE OF POST OPERATIVE RADIOT				
TITLE2	: HERAPY AND COMBINATIONS OF DACTINOMYCIN, VINCRISTINE, CYCLOPHOSPHAMIDE, AND ADR				
TITLE3	: IAMYCIN IN CHILDHOOD RHABDOMYOSARCOMA				

Record number 31

HSC	:	HURO	:		
SITE	: WRAMC	CSP	: Y	SE	:
ISOTOPE	:	RT	: RT	OG	: OG
OGNAME	: CALGB 6604				
TITLE1	: CALGB 6604 - INTENSIVE RADIOTHERAPY: CHEMOTHERAPY STUDY OF GENERALIZED HODGKIN'				
TITLE2	: S DISEASE				
TITLE3	:				

Record number 32

HSC	:	HURO	:		
SITE	: WRAMC	CSP	: Y	SE	:
ISOTOPE	:	RT	: RT	OG	: OG
OGNAME	: CALGB 7283				
TITLE1	: CALGB 7283 - TREATMENT OF SMALL CELL CARCINOMA OF LUNG: COMBINATION CHEMOTHERAP				
TITLE2	: Y+RADIATION VS SINGLE AGENT CHEMOTHERAPY+RADIATION WITH AND W/O PROPHYLACTIC WH				
TITLE3	: OLE BRAIN RADIATION. COMPARISON OF CYCLOPHOS+VINCRIST+METHOTREX VS CYCLOPHOSPH				

Record number 33

HSC	:	HURO	:		
SITE	: WRAMC	CSP	: Y	SE	:
ISOTOPE	:	RT	: RT	OG	: OG
OGNAME	: CALGB 7299				
TITLE1	: CALGB 7299 - INTERGROUP EWING'S SARCOMA STUDY. CLINICAL TRIAL OF RADIOTHERAPY				
TITLE2	: AND CHEMOTHERAPY IN MANAGING NONMETASTATIC EWING'S SARCOMA				
TITLE3	:				

Record number 34

HSC	:	HURO	:		

SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : CALGB 7411
TITLE1 : CALGB 7411 - COMBINATION CHEMOTHERAPY IN INDUCTION FOR STANDARD RISK AND COMBIN
TITLE2 : ATION CHEMOTHERAPY+CRANIAL IRRADIATION+DAUNORUBICIN FOR INCREASED RISK FOLLOWED
TITLE3 : BY MAINTENANCE W/CONTINUOUS VS INTERMITTENT 6-MP+MTX+SUBSEQUENT IMMUNOTHERAPY

Record number 35
HSC : HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : CALGB 7542
TITLE1 : CALGB 7542 - TREATMENT OF NON-HODGKIN'S LYMPHOMAS IN CHILDREN: METHOTREXATE, V
TITLE2 : INCRISTINE, DEXAMETHASONE, CYCLOPHOSPHAMIDE, 6-MERCAPTOPURINE PLUS RADIATION TH
TITLE3 : ERAPY TO INVOLVED AREAS, A PHASE III STUDY

Record number 36
HSC : HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : CALGB 7652
TITLE1 : CALGB 7652 COMBINATION CHEMOTHERAPY OF STAGE III AND IV HISTIOCYTIC LYMPHOMA (R
TITLE2 : ETICULUM CELL SARCOMA) IN ADULTS WITH OR WITHOUT RADIOTHERAPY OR ADRIAMYCIN CON
TITLE3 : SOLIDATION

Record number 37
HSC : HURO :
SITE : MAMC CSP : Y SE : SE
ISOTOPE : I ? RT : OG :
OGNAME :
TITLE1 : CHROMOSOME CHANGES AFTER DIAGNOSTIC RADIOACTIVE IODINE TESTS
TITLE2 :
TITLE3 :

Record number 38
HSC : HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : AM 241 RT : OG :
OGNAME :
TITLE1 : CLINICAL EVALUATION OF FLUORESCENCE SCANNING OF THE THYROID WITH AN AMERICIUM 2
TITLE2 : 41 SOURCE (EXTERNAL SOURCE)
TITLE3 :

Record number 39
HSC : HURO :
SITE : WRAMC CSP : Y SE : SE
OPE : I 123 RT : OG :
AME :
TITLE1 : CLINICAL EVALUATION OF 123-IODINE
TITLE2 :

TITLE3 :

Record number 40

HSC	:	HURO	:		
SITE	: WRAMC	CSP	: Y	SE	: SE
ISOTOPE	: TC 99M	RT	:	OG	:
OGNAME	:				

TITLE1 : CLINICAL EVALUATION OF 99M-TECHNETIUM ELECTROLYTICALLY LABELED HUMAN SERUM ALBU
TITLE2 : MIN FOR INJECTION 99M TC(E)HSA
TITLE3 :

Record number 41

HSC	:	HURO	:		
SITE	: WRAMC	CSP	: Y	SE	:
ISOTOPE	:	RT	: RT	OG	:
OGNAME	:				

TITLE1 : COMPARATIVE STUDY OF HIGH DOSE (5000 RADS) VS LOW DOSE (2000 RADS) PREOPEATIVE
TITLE2 : RADIATION TO RADICAL CYSTECTOMY FOR CONTROL OF TRANSITIONAL CELL CARCINOMA OF T
TITLE3 : HE BLADDER

Record number 42

HSC	:	HURO	:		
SITE	: TAMC	CSP	: Y	SE	:
ISOTOPE	:	RT	: XR	OG	:
OGNAME	:				

TITLE1 : COMPARISON OF DIAGNOSTIC ACCURACY OF DOUBLE CONTRAST KNEE ARTHROGRAPHY AND COMP
TITLE2 : UTED TOMOGRAPHY OF THE KNEE
TITLE3 :

Record number 43

HSC	:	HURO	:		
SITE	: BAMC	CSP	: Y	SE	:
ISOTOPE	:	RT	: RT	OG	:
OGNAME	:				

TITLE1 : CONSERVATIVE SURGERY FOLLOWING PREOPERATIVE RADIOTHERAPY OF LUNG CANCER
TITLE2 :
TITLE3 :

Record number 44

HSC	:	HURO	:		
SITE	: TAMC	CSP	: Y	SE	:
ISOTOPE	: UNSPEC	RT	: XR	OG	:
OGNAME	:				

TITLE1 : CORRELATION OF CT SCANNING WITH POSITIVE BONE SCANS IN EVALUATION OF METASTATIC
TITLE2 : DISEASE TO BONE
TITLE3 :

Record number 45

HSC	:	HURO	:		

```
SITE      : FAMC                        CSP       : Y       SE        : SE
   TOPE   : I XE                        RT        :         OG        :
OGNAME    :
TITLE1    : DETECTION OF PULMONARY EMBOLI USING 133-XENON AND MACROAGGREGATED HUMAN SERUM A
TITLE2    : LBUMIN (MAAG) 131-I
TITLE3    :


Record number 46
HSC       :                             HURO      :
SITE      : BAMC                        CSP       : Y       SE        : SE
ISOTOPE   : I 125                       RT        :         OG        :
OGNAME    :
TITLE1    : DETERMINATION OF HUMAN GLOMERULAR FILTRATION RATE BY THE SINGLE INJECTION OF GL
TITLE2    : OFIL-125
TITLE3    :


Record number 47
HSC       :                             HURO      :
SITE      : MAMC                        CSP       : Y       SE        : SE
ISOTOPE   : I 123                       RT        :         OG        :
OGNAME    :
TITLE1    : DETERMINATION OF NORMAL RANGE FOR 6-HOUR RADIOACTIVE IODINE UPTAKE USING I123 I
TITLE2    : ODINE IN ORDER TO ELIMINATE NEED FOR 24-HOUR RAIU
TITLE3    :


Record number 48
HSC       :                             HURO      :
SITE      : MAMC                        CSP       : Y       SE        : SE
ISOTOPE   : UNSPEC                      RT        :         OG        :
OGNAME    :
TITLE1    : DEVELOPMENT OF RADIONUCLIDE ANGIOCARDIOGRAPHY AS A CLINICAL DIAGNOSTIC TOOL FOR
TITLE2    :  THE QUANTIFICATION OF LEFT TO RIGHT CARDIOPULMONARY SHUNTS
TITLE3    :


Record number 49
HSC       :                             HURO      :
SITE      : BAMC                        CSP       : Y       SE        :
ISOTOPE   : UNSPEC                      RT        :         OG        :
OGNAME    :
TITLE1    : DISTRIBUTION AND CONTROL OF PERIPHERAL BLOOD FLOW FOLLOWING EXTENSIVE LEG SURFA
TITLE2    : CE INJURY
TITLE3    :


Record number 50
HSC       :                             HURO      :
SITE      : WBAMC                       CSP       : Y       SE        : SE
T   OPE   : TC 99M                      RT        :         OG        :
  AME     :
TITLE1    : EARLY DETECTION OF FATIGUE FRACTURE BY BONE SCANNING WITH TC-99M BONE SCAN AGEN
TITLE2    : TS
```

TITLE3 :

Record number 51

HSC	:	HURO	:		
SITE	: FAMC	CSP	: Y	SE	: SE
ISOTOPE	: XE 133	RT	:	OG	:
OGNAME	:				
TITLE1	: EFFECTS OF SELECTIVE CORONARY ARTERIOGRAPHY ON MYOCARDIAL BLOOD FLOW IN MAN				
TITLE2	:				
TITLE3	:				

Record number 52

HSC	:	HURO	:		
SITE	: TAMC	CSP	: Y	SE	:
ISOTOPE	:	RT	: XR	OG	:
OGNAME	:				
TITLE1	: ENHANCING VISUALIZATION OF SMALL NODULES IN RADIOGRAPHIC EXAMINATIONS				
TITLE2	: TAMC # 31/83				
TITLE3	:				

Record number 53

HSC	:	HURO	:		
SITE	: BAMC	CSP	: Y	SE	: SE
ISOTOPE	: GA 67	RT	:	OG	:
OGNAME	:				
TITLE1	: EVALUATION OF GALLIUM-67 AS A SCANNING AGENT FOR MALIGNANT NEOPLASMS				
TITLE2	:				
TITLE3	:				

Record number 54

HSC	:	HURO	:		
SITE	: WBAMC	CSP	: Y	SE	: SE
ISOTOPE	: UNSPEC	RT	:	OG	:
OGNAME	:				
TITLE1	: EVALUATION OF HEMOLYZING AGENTS ON BACTERIA IN SEPTICEMIA				
TITLE2	:				
TITLE3	:				

Record number 55

HSC	:	HURO	:		
SITE	: TAMC	CSP	: Y	SE	:
ISOTOPE	:	RT	:	OG	:
OGNAME	:				
TITLE1	: EVALUATION OF PATIENTS FOR THYROID DISEASE WHO EXPERIENCED CHILDHOOD IRRADIATIO				
TITLE2	: N TO THE HEAD AND NECK				
TITLE3	: TAMC #8/78				

Record number 56

HSC	:	HURO	:		

SITE : TAMC CSP : Y SE :
TOPE : UNSPEC RT : OG :
OGNAME :
TITLE1 : EVALUATION OF POSTERIOR SPINE FUSIONS IN SCOLIOSIS BY RADIOISOTOPE BONE SCAN
TITLE2 : TAMC 44/76
TITLE3 :

Record number 57
HSC : HURO :
SITE : FAMC CSP : Y SE : SE
ISOTOPE : UNSPEC RT : OG :
OGNAME :
TITLE1 : EVALUATION OF TECHNICAL FACTORS OF THE BRAIN SCAN AND THEIR RELATIONSHIP TO DIA
TITLE2 : GNOSTIC ACCURACY
TITLE3 :

Record number 58
HSC : HURO :
SITE : WBAMC CSP : Y SE : SE
ISOTOPE : F 18 RT : OG :
OGNAME :
TITLE1 : FLUORINE 18 ON THE DIAGNOSIS OF BONE DISEASE
TITLE2 :
TITLE3 :

Record number 59
HSC : HURO :
SITE : WRAMC CSP : Y SE : SE
ISOTOPE : GA 67 RT : OG :
OGNAME :
TITLE1 : GALLIUM 67 CITRATE IN THE STAGING OF CARCINOMA OF THE CERVIX
TITLE2 :
TITLE3 :

Record number 60
HSC : HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 123
TITLE1 : GOG 123 - A RANDOMIZED COMPARISON OF RADIATION THERAPY AND ADJUVANT HYSTERECTOM
TITLE2 : Y VS RADIATION AND WEEKLY CISPLATIN AND ADJUVANT HYSTERECTOMY IN PATIENTS WITH
TITLE3 : BULKY STAGE IB CARCINOMA OF THE CERVIX

Record number 61
HSC : HURO :
SITE : TAMC CSP : Y SE :
OPE : RT : RT OG : OG
AME : GOG 92
TITLE1 : GOG 92 - TREATMENT OF SELECTED INTERMEDIATE RISK PATIENTS WITH STAGE 1B CARCINO
TITLE2 : MA OF THE CERVIX AFTER RADICAL HYSTERECTOMY AND PELVIC LYMPHADENECTOMY: pELVIC

TITLE3 : RADIATION THERAPY VS NO FURTHER TREATMENT

Record number 62

HSC	:	HURO	:		
SITE	: TAMC	CSP	: Y	SE	:
ISOTOPE	: UNSPEC	RT	:	OG	:
OGNAME	:				
TITLE1	: INTERMITTENT L-THYROXINE SUPPRESSION OF THYROID FUNCTION				
TITLE2	: TAMC 3A062110A822				
TITLE3	:				

Record number 63

HSC	:	HURO	:		
SITE	: FAMC	CSP	: Y	SE	: SE
ISOTOPE	: TC 99M	RT	:	OG	:
OGNAME	:				
TITLE1	: JOINT IMAGING WITH 99M-TECHNETIUM PERTECHNETATE				
TITLE2	:				
TITLE3	:				

Record number 64

HSC	:	HURO	:		
SITE	: WBAMC	CSP	: Y	SE	: SE
ISOTOPE	: UNSPEC	RT	:	OG	:
OGNAME	:				
TITLE1	: MOTTLING ON THE COLLOIDAL RADIOGOLD LIVER SCAN				
TITLE2	:				
TITLE3	:				

Record number 65

HSC	:	HURO	:		
SITE	: BAMC	CSP	: Y	SE	: SE
ISOTOPE	: TC 99M	RT	:	OG	:
OGNAME	:				
TITLE1	: MPI 99M TC DIMERCAPTOSUCCINIC ACID FOR INTRAVENOUS ADMINISTRATION				
TITLE2	:				
TITLE3	:				

Record number 66

HSC	:	HURO	:		
SITE	: BAMC	CSP	: Y	SE	: SE
ISOTOPE	: UNSPEC	RT	:	OG	:
OGNAME	:				
TITLE1	: MUSCLE BLOOD FLOW FOLLOWING THERMAL INJURY				
TITLE2	:				
TITLE3	:				

Record number 67

HSC	:	HURO	:

SITE : BAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : NEN 99M-TC STANNOUS GLUCOHEPTONATE FOR INTRAVENOUS ADMINISTRATION
TITLE2 :
TITLE3 :

Record number 68
HSC : HURO :
SITE : BAMC CSP : Y SE : SE
ISOTOPE : GA 67 RT : OG :
OGNAME :
TITLE1 : NEN GALLIUM-67 CITRATE FOR INTRAVENOUS ADMINISTRATION
TITLE2 : NEN = NEW ENGLAND NUCLEAR
TITLE3 :

Record number 69
HSC : HURO :
SITE : FAMC CSP : Y SE : SE
ISOTOPE : I 131 RT : OG :
OGNAME :
TITLE1 : OBSERVATIONS ON THE MECHANISM OF THE RENAL CLEARANCE OF 131-I
TITLE2 :
TITLE3 :

Record number 70
HSC : HURO :
SITE : WBAMC CSP : Y SE : SE
ISOTOPE : I 131 RT : OG :
OGNAME :
TITLE1 : PARATHYROID RESERVES IN 131-I TREATED PATIENTS
TITLE2 :
TITLE3 :

Record number 71
HSC : HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : PERFECTING RADIOLOGICAL TECHNIQUE OF PERCUTANEOUS TRANSHEPATIC PORTAL VENOGRAPH
TITLE2 : Y TAMC # 1T84
TITLE3 :

Record number 72
HSC : HURO :
SITE : FAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : PLACENTAL IMAGING WITH 99M TECHNETIUM PERTECHNETATE
TITLE2 :

TITLE3 :

Record number 73

HSC	:	HURO	:		
SITE	: BAMC	CSP	: Y	SE	: SE
ISOTOPE	: UNSPEC	RT	:	OG	:
OGNAME	:				
TITLE1	: PLATELET TRANSFUSION - EFFICIENCY AND METHODS TO IMPROVE CURRENT RESULTS IN THR				
TITLE2	: OMBOCYTOPENIA PATIENTS				
TITLE3	:				

Record number 74

HSC	:	HURO	:		
SITE	: TAMC	CSP	: Y	SE	:
ISOTOPE	:	RT	: RT	OG	: OG
OGNAME	: POG 7660				
TITLE1	: POG 7660 - COMPARISON OF INVOLVED FIELD RADIOTHERAPY WITH ADJUVANT MOPP CHEM				
TITLE2	: OTHERAPY IN THE TREATMENT OF STAGE I AND II HODGKIN'S DISEASE, PHASE III				
TITLE3	:				

Record number 75

HSC	:	HURO	:		
SITE	: WRAMC	CSP	: Y	SE	:
ISOTOPE	:	RT	: RT	OG	:
OGNAME	:				
TITLE1	: POST OPERATIVE TREATMENT OF WOMEN WITH STAGE III OVARIAN CANCER BY RADIOTHERAPY				
TITLE2	: OR CHLORAMBUCIL EITHER ALONE IN BOTH SEQUENCES				
TITLE3	:				

Record number 76

HSC	:	HURO	:		
SITE	: WRAMC	CSP	: Y	SE	:
ISOTOPE	:	RT	: RT	OG	:
OGNAME	:				
TITLE1	: POST OPERATIVE TREATMENT OF WOMEN WITH RESECTABLE OVARIAN CANCER WITH RADIOTHER				
TITLE2	: APY, CHLORAMBUCIL OR NO FURTHER TREATMENT				
TITLE3	:				

Record number 77

HSC	:	HURO	:		
SITE	: WRAMC	CSP	: Y	SE	:
ISOTOPE	:	RT	: RT	OG	:
OGNAME	:				
TITLE1	: POST OPERATIVE TREATMENT OF WOMEN WITH RESECTABLE OVARIAN CANCER WITH RADIOTHER				
TITLE2	: APY, ALKERAN (MELPHALAN), OR NO FURTHER TREATMENT				
TITLE3	:				

Record number 78

HSC	:	HURO	:

SITE : FAMC CSP : Y SE : SE
ISOTOPE : XE 133 RT : OG :
OGNAME :
TITLE1 : QUANTITATIVE LUNG SCANNING IN PULMONARY TUBERCULOSIS, TUBERCULOUS PLEURAL EFFUS
TITLE2 : ION AND LUNG SURGERY FOR TUBERCULOSIS (XE 133)
TITLE3 :

Record number 79
HSC : HURO :
SITE : FAMC CSP : Y SE : SE
ISOTOPE : I XE RT : OG :
OGNAME :
TITLE1 : RADIOISOTOPES IN PULMONARY PHYSIOLOGY AND PATHOLOGY (I131 & XE 133)
TITLE2 :
TITLE3 :

Record number 80
HSC : HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : UNSPEC RT : OG :
OGNAME :
TITLE1 : RADIOISOTOPIC ESOPHAGEAL CLEARANCE TEST
TITLE2 :
TITLE3 :

Record number 81
HSC : HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : RADIOLOGIC IDENTIFICATION OF COMMON CARDIAC PROSTHETIC VOLVES AND THEIR ASSOCIA
TITLE2 : TED COMPLICATIONS
TITLE3 : FAMC #74/105

Record number 82
HSC : HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : UNSPEC RT : OG :
OGNAME :
TITLE1 : RADIONUCLIDE IMAGING IN CASES OF SUSPECTED CHILD ABUSE
TITLE2 :
TITLE3 :

Record number 83
HSC : HURO :
SITE : FAMC CSP : Y SE : SE
ISOTOPE : XE 133 RT : OG :
OGNAME :
TITLE1 : REGIONAL VENTILATION PERFUSION RELATIONSHIPS OF THE LUNG, ITS MEASUREMENT OF 13
TITLE2 : 133-XENON AND A LINEAR SCANNER

TITLE3 :

Record number 84

HSC	:	HURO	:		
SITE	: FAMC	CSP	: Y	SE	: SE
ISOTOPE	: I 131	RT	:	OG	:
OGNAME	:				
TITLE1	: RENAL FUNCTION AND 131-I CLEARANCE IN HYPERTHYROIDISM AND MYXEDEMA				
TITLE2	:				
TITLE3	:				

Record number 85

HSC	:	HURO	:		
SITE	: FAMC	CSP	: Y	SE	: SE
ISOTOPE	: I 123	RT	:	OG	:
OGNAME	:				
TITLE1	: SCINTIGRAPHIC EVALUATION OF THYROID DISORDERS - CLINICAL EVALUATION OF ORAL				
TITLE2	: 123-I SODIUM IODIDE				
TITLE3	:				

Record number 86

HSC	:	HURO	:		
SITE	: BAMC	CSP	: Y	SE	:
ISOTOPE	:	RT	: RT	OG	:
OGNAME	:				
TITLE1	: SEMINOMA OF THE TESTICLE: PROPHYLACTIC MEDIASTINUM IRRADIATION VS PERIAORTIC				
TITLE2	: AND PELVIC IRRADIATION ALONE				
TITLE3	:				

Record number 87

HSC	:	HURO	:		
SITE	: FAMC	CSP	: Y	SE	: SE
ISOTOPE	: I XE	RT	:	OG	:
OGNAME	:				
TITLE1	: SEQUENTIAL LUNG SCANNING OF TUBERCULOSIS PATIENTS UNDER TREATMENT				
TITLE2	: (I 131 AND XE 133)				
TITLE3	:				

Record number 88

HSC	:	HURO	:		
SITE	: TAMC	CSP	: Y	SE	:
ISOTOPE	:	RT	:	OG	:
OGNAME	:				
TITLE1	: STUDY OF INTERNAL MAMMARY LYMPH NODES IN PATIENTS WITH INNER QUADRANT BREAST CA				
TITLE2	: NCER TAMC # 19/80				
TITLE3	:				

Record number 89

HSC	:	HURO	:

SITE : BAMC CSP : Y SE :
TOPE : RT : RT OG :
OGNAME :
TITLE1 : SURVIVAL RATES OF TESTIS TUMORS (ARMY WIDE INVESTIGATIONAL TREATMENT STUDY)
TITLE2 :
TITLE3 :

Record number 90
HSC : HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG ?
TITLE1 : SWOG .... - PHASE I PROTOCOL FOR THE EVALUATION OF COMBINED RADIOTHERAPY AND CH
TITLE2 : EMOTHERAPY FOR STAGE IIB, IIIA, AND IIIB HODGKIN'S DISEASE
TITLE3 :

Record number 91
HSC : HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 160
TITLE1 : SWOG 160 - EVALUATION OF COMBINED RADIOTHERAPY AND CHEMOTHERAPY FOR STAGES IIB
TITLE2 : , IIIA AND IIIB HODGKIN'S DISEASE
TITLE3 :

Record number 92
HSC : HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 7404
TITLE1 : SWOG 7404 - RADIOTHERAPY, CCNU, AND PROCARBAZINE IN MALIGNANT GLIOMAS OF THE
TITLE2 : BRAIN
TITLE3 :

Record number 93
HSC : HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 7509
TITLE1 : SWOG 7509 - 5-FU, McCCNU, + RADIOTHERAPY WITH OR WITHOUT TESTOLACTONE FOR LOCAL
TITLE2 : IZED ADENOCARCINOMAS OF THE EXOCRINE PANCREAS
TITLE3 :

Record number 94
HSC : HURO :
SITE : BAMC CSP : Y SE :
TOPE : RT : RT OG : OG
OGNAME : SWOG 7509
TITLE1 : SWOG 7509 - 5-FU, MeCCNU + RADIOTHERAPY WITH OR WITHOUT TESTOLACTONE FOR LOCALI
TITLE2 : ZED ADENOCARCINOMA OF THE EXOCRINE PANCREAS

TITLE3 :

Record number 95

HSC	:		HURO	:			
SITE	: BAMC		CSP	: Y	SE	:	
ISOTOPE	:		RT	: RT	OG	: OG	

OGNAME : SWOG 7525
TITLE1 : SWOG 7525 - TREATMENT OF PATIENTS FOR EARLY TESTICULAR CANCER WITH IRRADIATION
TITLE2 : AND CHEMOTHERAPY WITH VINBLASTINE AND BLEOMYCIN
TITLE3 :

Record number 96

HSC	:		HURO	:			
SITE	: MAMC		CSP	: Y	SE	:	
ISOTOPE	:		RT	: RT	OG	: OG	

OGNAME : SWOG 7635
TITLE1 : SWOG 7635 - COMBINED MODALITY TREATMENT OF LIMITED SQUAMOUS CARCINOMA OF THE LU
TITLE2 : NG, PHASE III
TITLE3 :

Record number 97

HSC	:		HURO	:			
SITE	: TAMC		CSP	: Y	SE	:	
TOPE	:		RT	: RT	OG	: OG	

OGNAME : SWOG 7712
TITLE1 : SWOG 7712 - COMPARISON OF TREATMENT REGIMENS FOR FIRST CNS RELAPSE IN CHILDHOOD
TITLE2 : ACUTE LYMPHOBLASTIC LEUKEMIA (CNS LEUKEMIA STUDY #6)
TITLE3 :

Record number 98

HSC	:		HURO	:			
SITE	: BAMC		CSP	: Y	SE	:	
ISOTOPE	:		RT	: RT	OG	: OG	

OGNAME : SWOG 7811
TITLE1 : SWOG 7811 - RADIOTHERAPY-CHEMOTHERAPY (MOPP) FOR STAGES I AND II A AND B HODGKI
TITLE2 : N'S
TITLE3 :

Record number 99

HSC	:		HURO	:			
SITE	: TAMC		CSP	: Y	SE	:	
ISOTOPE	:		RT	: RT	OG	: OG	

OGNAME : SWOG 7901
TITLE1 : SWOG 7901 - RESCUE THERAPY FOR NON-CNS EXTRAMEDULLARY DISEASE IN CHILDREN WITH
TITLE2 : ACUTE LYMPHOBLASTIC LEUKEMIA, PHASE III
TITLE3 :

Record number 100

HSC	:		HURO	:			

Record number 100

HSC	:		HURO	:			
SITE	: TAMC		CSP	: Y	SE	:	
ISOTOPE	:		RT	: RT	OG	: OG	
AME	: SWOG 9132						
TITLE1	: SWOG 9132 - HYPERFRACTIONATED IRRADIATION FOR POSTERIOR FOSSA EPENDYMOMA						
TITLE2	:						
TITLE3	:						

Record number 101

HSC	:		HURO	:			
SITE	: TAMC		CSP	: Y	SE	: SE	
ISOTOPE	: GA 67		RT	:	OG	:	
OGNAME	:						
TITLE1	: TAMC # 13/76: GALLIUM 67 CITRATE IN THE DIAGNOSIS OF TISSUE TUMORS AND/OR ABSC						
TITLE2	: ESSES						
TITLE3	:						

Record number 102

HSC	:		HURO	:			
SITE	: TAMC		CSP	: Y	SE	:	
ISOTOPE	: UNSPEC		RT	:	OG	:	
OGNAME	:						
TITLE1	: TAMC # 29/80: RADIOISOTOPE SCANNING IN THE DIAGNOSIS OF BONE AND JOINT INFECTI						
TITLE2	: ONS						
TITLE3	:						

Record number 103

HSC	:		HURO	:			
SITE	: TAMC		CSP	: Y	SE	:	
ISOTOPE	: IN 111		RT	:	OG	:	
OGNAME	:						
TITLE1	: TAMC #19/77: INDIUM 111 BLEOMYCIN IN THE DIAGNOSIS OF TUMORS						
TITLE2	:						
TITLE3	:						

Record number 104

HSC	:		HURO	:			
SITE	: MAMC		CSP	: Y	SE	: SE	
ISOTOPE	: TC 99M		RT	:	OG	:	
OGNAME	:						
TITLE1	: TCMAA FOR LUNG SCANNING						
TITLE2	:						
TITLE3	:						

Record number 105

HSC	:		HURO	:			
SITE	: BAMC		CSP	: Y	SE	: SE	
ISOTOPE	: TC 99M		RT	:	OG	:	
O ME	:						
TITLE1	: TECHNETIUM 99M SULFUR COLLOID PARTICLES						
TITLE2	:						

TITLE3 :

Record number 106

HSC	:	HURO	:		
SITE	: WBAMC	CSP	: Y	SE	: SE
ISOTOPE	: TL 201	RT	:	OG	:
OGNAME	:				
TITLE1	: THALLIUM 201 CHLORIDE FOR DIAGNOSIS OF MYOCARDIAL ISCHEMIA AND/OR MYOCARDIAL IN				
TITLE2	: FARCTION				
TITLE3	:				

Record number 107

HSC	:	HURO	:		
SITE	: TAMC	CSP	: Y	SE	: SE
ISOTOPE	: TL 201	RT	:	OG	:
OGNAME	:				
TITLE1	: THALLIUM-201 CHLORIDE FOR DIAGNOSIS OF MYOCARDIAL ISCHEMIA AND/OR MYOCARDIAL IN				
TITLE2	: FARCT				
TITLE3	:				

Record number 108

HSC	:	HURO	:		
SITE	: TAMC	CSP	: Y	SE	:
TOPE	:	RT	: XR	OG	:
OGNAME	:				
TITLE1	: THE CLINICAL, RADIOLOGIC, AND PHYSIOLOGIC EFFECTS OF MALARIA ON THE LUNG				
TITLE2	: TAMC # 3A062110A822				
TITLE3	:				

Record number 109

HSC	:	HURO	:		
SITE	: FAMC	CSP	: Y	SE	: SE
ISOTOPE	: I 131	RT	:	OG	:
OGNAME	:				
TITLE1	: THE DIAGNOSIS OF FUNCTIONING METASTASIS FROM THYROID CARCINOMA WITH 131-I AND S				
TITLE2	: CINTILLATION CAMERA				
TITLE3	:				

Record number 110

HSC	:	HURO	:		
SITE	: WRAMC	CSP	: Y	SE	:
ISOTOPE	:	RT	: RT	OG	:
OGNAME	:				
TITLE1	: THE EFFECT OF A DIET CONTROLLED IN LACTOSE, GLUTEN, FAT, AND RESIDUE ON FEMALE				
TITLE2	: ONCOLOGY PATIENTS RECEIVING ABDOMINAL RADIATION TREATMENT				
TITLE3	:				

Record number 111

HSC	:	HURO	:

```
SITE      : BAMC                        CSP       : Y       SE        :
  TOPE    :                             RT        : RT      OG        :
OGNAME    :
TITLE1    : THE EFFECT OF RADIOTHERAPY ON REGIONAL LUNG FUNCTION IN PATIENTS WITH BRONCHOGE
TITLE2    : NIC CANCER
TITLE3    :


Record number 112
HSC       :                             HURO      :
SITE      : WBAMC                       CSP       : Y       SE        : SE
ISOTOPE   : UNSPEC                      RT        :         OG        :
OGNAME    :
TITLE1    : THE USE OF RISA BLOOD VOLUME DETERMINATION TO DETERMINE RED CELL VOLUME
TITLE2    :
TITLE3    :


Record number 113
HSC       :                             HURO      :
SITE      : FAMC                        CSP       : Y       SE        : SE
ISOTOPE   : I 131                       RT        :         OG        :
OGNAME    :
TITLE1    : THE VALUE OF ROSE BENGAL 131-I IN EVALUATING JAUNDICED PATIENTS
TITLE2    :
TITLE3    :


Record number 114
HSC       :                             HURO      :
SITE      : TAMC                        CSP       : Y       SE        :
ISOTOPE   :                             RT        : XR      OG        :
OGNAME    :
TITLE1    : THYROID FUNCTION IN PEDIATRIC PATIENTS ON CHRONIC IODIDE EXPECTORANT MEDICATION
TITLE2    :  TAMC 3A062110A822
TITLE3    :


Record number 115
HSC       :                             HURO      :
SITE      : WRAMC                       CSP       : Y       SE        :
ISOTOPE   :                             RT        : RT      OG        :
OGNAME    :
TITLE1    : TREATMENT OF WOMEN WITH ADVANCED CERVICAL CANCER CONFINED TO THE PELVIS WITH HY
TITLE2    : DROXYUREA OR PLACEBO BOTH IN COMBINATION WITH RADIATION
TITLE3    :


Record number 116
HSC       :                             HURO      :
SITE      : FAMC                        CSP       : Y       SE        : SE
  OPE     : UNSPEC                      RT        :         OG        :
OGNAME    :
TITLE1    : ULTRASOUND IN PLACENTAL LOCALIZATION
TITLE2    :
```

TITLE3 :

Record number 117

HSC	:	HURO	:		
SITE	: MAMC	CSP	: Y	SE	: SE
ISOTOPE	: UNSPEC	RT	:	OG	:

OGNAME :
TITLE1 : USE OF EMERGENCY RISA STUDIES ON THIRD TRIMESTER BLEEDING
TITLE2 :
TITLE3 :

Record number 118

HSC	:	HURO	:		
SITE	: MAMC	CSP	: Y	SE	:
ISOTOPE	:	RT	: RT	OG	: OG

OGNAME : WOG
TITLE1 : WESTERN ONCOLOGY GROUP: HYDROXYUREA + RADIATION +2ND LOOK CRANIOTOMY IN BRAIN T
TITLE2 : UMORS
TITLE3 :

Record number 119

HSC	:	HURO	:		
SITE	: MAMC	CSP	: Y	SE	:
ISOTOPE	:	RT	: RT	OG	: OG

OGNAME : WOG
TITLE1 : WESTERN ONCOLOGY GROUP: PREOPERATIVE HYDROXYUREA + RADIATION IN OSTEOSARCOMA
TITLE2 :
TITLE3 :

Record number 120

HSC	:	HURO	:		
SITE	: WRAMC	CSP	: Y	SE	:
ISOTOPE	:	RT	: RT	OG	: OG

OGNAME : WRAMC 7402
TITLE1 : WRAMC #7402 - PROTOCOL FOR ADJUVANT THERAPY OF STAGE II TESTICULAR CARCINOMA W
TITLE2 : ITH CHEMOTHERAPY (ACTINOMYCIN D+CHLORAMBUCIL, RADIATION, OR CHEMOTHERAPY + RADI
TITLE3 : ATION THERAPY AFTER RETROPERITONEAL LYMPH NODE DISSECTION

Record number 121

HSC	:	HURO	:		
SITE	: WRAMC	CSP	: Y	SE	:
ISOTOPE	:	RT	: RT	OG	: OG

OGNAME : WRAMC 7103
TITLE1 : WRAMC #7103 - COMPARISON OF RADIATION THERAPY PLUS CHEMOTHERAPY IN LOCALIZED BR
TITLE2 : ONCHOGENIC CARCINOMA
TITLE3 :

Record number 122

HSC	:	HURO	:

SITE : WRAMC CSP : Y SE : SE
ISOTOPE : GA 67 RT : OG :
OGNAME :
TITLE1 : WRAMC #7108 - STUDY OF THE USE OF GALLIUM 67 CITRATE TO LOCALIZE LYMPHOMAS
TITLE2 :
TITLE3 :

Record number 123
HSC : 79035 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : THE RADIOGRAPHIC DIFFERENTIAL DIAGNOSIS OF LOWER EXTREMITY BOWING
TITLE2 :
TITLE3 :

Record number 124
HSC : 79149 HURO :
SITE : WRAMC CSP : Y SE : SE
ISOTOPE : P 32 RT : OG : OG
OGNAME : GOG 46
TITLE1 : GOG 46 - A RANDOMIZED COMPARISON OF MEPHALAN VS INTRAPERITONEAL CHROMIC
TITLE2 : PHOSPHATE IN THE TREATMENT OF WOMEN WITH STAGE I EPITHELIAL CARCINOMA OF THE
TITLE3 : OVARY PHASE III

Record number 125
HSC : 79175 HURO :
SITE : BAMC CSP : Y SE : SE
ISOTOPE : P 32 RT : OG : OG
OGNAME : GOG 46
TITLE1 : GOG 46 - A RANDOMIZED COMPARISON OF MELPHALAN VS INTRAPERITONEAL CHROMIC
TITLE2 : PHOSPHATE IN THE TREATMENT OF WOMEN WITH STAGE I EPITHELIAL CARCINOMA OF THE
TITLE3 : OVARY PHASE III

Record number 126
HSC : 79289 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 7965
TITLE1 : SWOG 7965 - TREATMENT OF EARLY SQUAMOUS CELL CARCINOMA OF THE HEAD AND NECK
TITLE2 : WITH INITIAL SURGERY AND/OR RADIOTHERAPY FOLLOWED BY CHEMOTHERAPY VS NO
TITLE3 : FURTHER TREATMENT.

Record number 127
HSC : 79294 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG :
OGNAME :
TITLE1 : EVALUATION OF RADIATION THERAPY IN THE MANAGEMENT OF ENDOSCOPICALLY VISIBLE
TITLE2 : TUMORS OF THE LUNG

TITLE3 :

Record number 128
HSC : 79303 HURO :
SITE : WRAMC CSP : Y SE : SE
ISOTOPE : P 32 RT : OG : OG
OGNAME : GOG 46
TITLE1 : GOG 46 - A RANDOMIZED COMPARISON OF MELPHALAN VS INTRAPERITONEAL CHROMIC
TITLE2 : PHOSPHATE IN THE TREATMENT OF WOMEN WITH STAGE I EPITHELIAL CARCINOMA OF THE
TITLE3 : OVARY

Record number 129
HSC : 79380 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : THE ROLE OF HYPERURICOSURIA IN THE NEPHROTOXICITY OF RADIOCONTRAST AGENTS
TITLE2 :
TITLE3 :

Record number 130
HSC : 79414 HURO :
SITE : WBAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 7703
TITLE1 : SWOG 7703 - RADIATION THERAPY IN COMBINATION WITH BCNU DTIC OR PROCARBAZINE IN
TITLE2 : PATIENTS WITH MALIGNANT GLIOMAS OF THE BRAIN
TITLE3 :

Record number 131
HSC : 79494 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : UNSPEC RT : OG : OG
OGNAME : GOG 7602
TITLE1 : GOG 7602 - A RANDOMIZED COMPARISON OF MELPHALAN VERSUS RADIOISOTOPES IN THE
TITLE2 : TREATMENT OF PATIENTS WITH NO MICROSCOPIC RESIDUAL DISEASE HAVING ALL STAGES
TITLE3 : IC AND II (A, B, AND C) AND SELECTED STAGES IAII AND IBII OVARIAN CANCER

Record number 132
HSC : 80004 HURO :
SITE : LAMC CSP : Y SE :
ISOTOPE : UNSPEC RT : XR OG :
OGNAME :
TITLE1 : COMPARATIVE SENSITIVITY OF TOMOGRAPHIC AND PLANAR SCINTIGRAPHY IN MYOCARDIAL
TITLE2 : PERFUSION AND SMALL ORGAN IMAGING
TITLE3 :

Record number 133
HSC : 80042 HURO :

SITE : LAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : THE NATURAL HISTORY OF THE TECHNETIUM 99MTC MDP BONE SCAN AFTER ELECTIVE JOINT
TITLE2 : REPLACEMENT
TITLE3 :

Record number 134
HSC : 80058 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG :
OGNAME :
TITLE1 : PREVENTION OF GONADAL DAMAGE IN MEN TREATED WITH COMBINATION
TITLE2 : CHEMOTHERAPY/RADIOTHERAPY FOR HODGKINS DISEASE AND NON-HODGKINS LYMPHOMAS
TITLE3 :

Record number 135
HSC : 80078 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : UNSPEC RT : OG :
OGNAME :
TITLE1 : DETERMINATION OF GLOMERULAR FILTRATION RATE USING RADIOTRACER TECHNIQUES
TITLE2 :
TITLE3 :

Record number 136
HSC : 80080 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : CALGB 7551
TITLE1 : CALGB 7551- COMBINATION CHEMOTHERAPY AND RADIOTHERAPY FOR STAGE IV HODGKIN'S
TITLE2 : DISEASE, NO PRIOR TREATMENT
TITLE3 :

Record number 137
HSC : 80133 HURO :
SITE : MAMC CSP : Y SE : SE
ISOTOPE : I 123 RT : OG :
OGNAME :
TITLE1 : EFFECTS OF EXOGENOUS IODINE ON THE I 123 UPTAKE OF PATIENTS WITH
TITLE2 : HYPERTHYROIDISM AND AN ELEVATED I 123 UPTAKE
TITLE3 :

Record number 138
HSC : 80143 HURO :
SITE : TAMC CSP : Y SE : SE
ISOTOPE : TL 201 RT : OG :
OGNAME :
TITLE1 : THALLIUM-201 MYOCARDIAL IMAGING IN DETECTING RIGHT VENTRICULAR DYSFUNCTION IN
TITLE2 : CHRONIC OBSTRUCTIVE PULMONARY DISEASE

TITLE3 :

Record number 139
HSC : 80144 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : MINIMUM EXPOSURE REQUIREMENTS FOR AN EXCRETORY UROGRAM
TITLE2 :
TITLE3 :

Record number 140
HSC : 80149 HURO :
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : EVALUATION OF HEMATOCHEZIA WITH DOUBLE CONTRAST BARIUM ENEMA AND COLONOSCOPY
TITLE2 :
TITLE3 :

Record number 141
HSC : 80171 HURO :
SITE : DDEAMC CSP : Y SE :
ISOTOPE : RT : RT OG :
OGNAME :
TITLE1 : PREVENTION OF GONADAL DAMAGE IN WOMEN TREATED WITH COMBINATION CHEMOTHERAPY OR
TITLE2 : RADIOTHERAPY BELOW THE DIAPHRAGM
TITLE3 :

Record number 142
HSC : 80172 HURO :
SITE : DDEAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : WRAMC 7810
TITLE1 : WRAMC 7810- PREVENTION OF GONADAL DAMAGE IN MEN TREATED WITH COMBINATION
TITLE2 : CHEMOTHERAPY/RADIOGRAPHY FOR HODGKIN'S DISEASE AND NON-HODGKIN'S LYMPHOMAS
TITLE3 : (WRAMC 7810)

Record number 143
HSC : 80191 HURO :
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : RT OG :
OGNAME :
TITLE1 : A PROTOCOL TO COMPARE SEGMENTAL MASTECTOMY AND AXILLARY DISSECTION WITH AND
TITLE2 : WITHOUT RADIATION OF THE BREAST AND TOTAL MASTECTOMY AND AXILLARY DISSECTION
TITLE3 :

Record number 144
HSC : 80198 HURO :

SITE : WBAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : CLINICAL EVALUATION OF 99M-TECHNETIUM DMSA (DIMERCOPTOSUCCINIC AUD) AS A
TITLE2 : KIDNEY IMAGING AGENT.
TITLE3 :

Record number 145
HSC : 80202 HURO :
SITE : WBAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 7915
TITLE1 : SWOG 7915 - PREVENTION OF GONADAL DAMAGE IN WOMEN TREATED WITH COMBINATION
TITLE2 : CHEMOTHERAPY OR RADIOTHERAPY BELOW THE DIAPHRAGM FOR HODGKINS OR NON-HODGKINS
TITLE3 : LYMPHOMA

Record number 146
HSC : 80221 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : CCG 541
TITLE1 : CCG 541 - COMPARISON OF INVOLVED FIELD RADIOTHERAPY WITH INVOLVED FIELD
TITLE2 : RADIOTHERAPY PLUS ADJUVANT CHEMOTHERAPY AND EXTENDED FIELD RADIOTHERAPY IN THE
TITLE3 : TREATMENT OF STAGES I AND II HODGKINS DISEASE IN CHILDREN

Record number 147
HSC : 80232 HURO :
SITE : WBAMC CSP : Y SE :
ISOTOPE : RT : RT OG :
OGNAME :
TITLE1 : TRANSVAGINAL ABSORPTION OF ESTROGENS IN PATIENTS FOLLOWING PELVIC IRRADIATION
TITLE2 :
TITLE3 :

Record number 148
HSC : 80236 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 7965
TITLE1 : SWOG 7965 - CHEMOTHERAPY OR CHEMOTHERAPY AND IMMUNOTHERAPY FOLLOWING INITIAL
TITLE2 : SURGERY AND/OR RADIOTHERAPY FOR TREATMENT OF EARLY SQUAMOUS CELL CANCER OF THE
TITLE3 : HEAD AND NECK

Record number 149
HSC : 80264 HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : STUDY OF COAGULATION PARAMETERS PRIOR TO AND FOLLOWING INTRAVENOUS INJECTION
TITLE2 : OF RADIOGRAPHIC CONTRAST MEDIA

TITLE3 :

Record number 150
HSC : 80331 HURO :
SITE : WBAMC CSP : Y SE :
ISOTOPE : RT : RT OG :
OGNAME :
TITLE1 : A RANDOMIZED TRIAL OF CHEMOTHERAPY AND RADIATION VS RADIATION ALONE IN THE
TITLE2 : TREATMENT OF ADVANCED NON-SMALL CELL LUNG CANCER
TITLE3 :

Record number 151
HSC : 80335 HURO :
SITE : MAMC CSP : Y SE : SE
ISOTOPE : I 131 RT : OG :
OGNAME :
TITLE1 : IN VIVO UPTAKE OF 131-I BY SEMEN AND OTHER BODY FLUIDS
TITLE2 :
TITLE3 :

Record number 152
HSC : 80375 HURO :
SITE : WBAMC CSP : Y SE :
ISOTOPE : UNSPEC RT : OG :
OGNAME :
TITLE1 : DIRECT AND INDIRECT RADIONUCLIDE CYTOGRAPHY IN THE DETECTION OF VESICLE
TITLE2 : URETERAL REFLUX
TITLE3 :

Record number 153
HSC : 80394 HURO :
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : RT OG :
OGNAME :
TITLE1 : DETECTION OF SUBCLINICAL EFFECTS OF RADIATION THERAPY ON THE SPINAL CORD BY
TITLE2 : AVERAGED SOMATOSENSORY EVOKED POTENTIAL
TITLE3 :

Record number 154
HSC : 80399 HURO :
SITE : TAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : IN VIVO EVALUATION OF THE HEPATOBILIARY SYSTEM WITH TECHNETIUM 99M.
TITLE2 :
TITLE3 :

Record number 155
HSC : 80417 HURO :

SITE : WRAMC CSP : Y SE :
TOPE : RT : RT OG : OG
OGNAME : GOG 49
TITLE1 : GOG 49 - A SURGICAL-PATHOLOGIC STUDY OF WOMEN WITH INVASIVE CARCINOMA OF THE
TITLE2 : CERVIX STAGE IB AND RANDOMLY ASSIGNED RADIATION THERAPY VS NO FURTHER THERAPY
TITLE3 : IN SELECTED PATIENTS - GOG 49

Record number 156
HSC : 80503 HURO :
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : NCOG 2091
TITLE1 : NCOG 2091 - A CLINICAL TRIAL OF SEVEN DRUG VS NINE DRUG CHEMOTHERAPY IN
TITLE2 : EXTENSIVE DISEASE, AND A SEVEN DRUG WITH LATE CONSOLIDATIVE RADIOTHERAPY IN
TITLE3 : LIMITED DISEASE OAT CELL LUNG CANCER

Record number 157
HSC : 80568 HURO :
SITE : LAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : STUDY OF GASTRIC EMPTYING BY USE OF TECHNETIUM 99M-TAGGED CHICKEN LIVER AS A
TITLE2 : MARKER OF SOLID FOOD IN PATIENTS WITH REFLUX ESOPHAGITIS.
TITLE3 :

Record number 158
HSC : 80600 HURO :
SITE : WBAMC CSP : Y SE :
ISOTOPE : RT : RT OG :
OGNAME :
TITLE1 : PREVENTION OF GONADAL DAMAGE IN MEN TREATED W/COMBINATION
TITLE2 : CHEMOTHERAPY/RADIOTHERAPY FOR HODGKIN'S DISEASE AND NON-HODGKIN'S LYMPHOMAS.
TITLE3 :

Record number 159
HSC : 80627 HURO :
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : NSABP R-01
TITLE1 : NSABP R-01 - A CLINICAL TRIAL TO EVALUATE POSTOPERATIVE RADIATION AND
TITLE2 : POSTOPERATIVE SYSTEMIC CHEMOTHERAPY IN THE MANAGEMENT OF RESECTABLE RECTAL
TITLE3 : CARCINOMA

Record number 160
HSC : 81095 HURO :
SITE : WRAMC CSP : Y SE :
OPE : RT : RT OG : OG
OGNAME : GOG 56
TITLE1 : GOG 56 - A RANDOMIZED COMPARISON OF HYDROXYUREA VERSUS MISONIDAZOLE AS AN
TITLE2 : ADJUNCT TO RADIATION THERAPY IN PATIENTS WITH STAGES IIB, III AND IVA

TITLE3 : CARCINOMA OF THE CERVIX AND NEGATIVE PARA-AORTIC NODES - GOG 56

Record number 161
HSC : 81114 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 34
TITLE1 : GOG 34 - A RANDOMIZED STUDY OF ADRIAMYCIN AS AN ADJUVANT AFTER SURGERY AND
TITLE2 : RADIATION THERAPY IN PATIENTS WITH HIGH-RISK ENDOMETRIAL CARCINOMA STAGE I AND
TITLE3 : OCCULT STAGE II - GOG 34

Record number 162
HSC : 81135 HURO :
SITE : WBAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : CLINICAL EVALUATION OF TECHNETIUM 99M PIPADA-TIN AS A HEPATOBILIARY AGENT.
TITLE2 :
TITLE3 :

Record number 163
HSC : 81147 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : EVALUATION OF YOUNG AMATEUR BOXERS BY COMPUTED TOMOGRAPHY
TITLE2 :
TITLE3 :

Record number 164
HSC : 81154 HURO :
SITE : LAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : TECHNETIUM TC99M DISOFENIN KIT FOR HEPATOBILIARY IMAGING.
TITLE2 :
TITLE3 :

Record number 165
HSC : 81180 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : WRAMC 8101
TITLE1 : WRAMC 8101 - ADJUVANT CHEMOTHERAPY OF ADVANCED HEAD/NECK CANCER; & PART B,
TITLE2 : INDUCTION CHEMOTHERAPY, SURGERY, RADIATION, AND ADJUVANT CHEMOTHERAPY FOR
TITLE3 : STAGE III AND IV SQUAMOUS CELL CARCINOMA OF THE HEAD AND NECK- WRAMC 8101

Record number 166
HSC : 81242 HURO :

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SITE      : WRAMC                    CSP       : Y       SE        :
ISOTOPE   :                          RT        : RT      OG        : OG
OGNAME    : CALGB 8083
TITLE1    : CALGB 8083 - LOCALIZED SMALL CELL CARCINOMA OF THE LUNG.  A PHASE III
TITLE2    : STUDY.  SIMULTANEOUS CHEMOTHERAPY AND RADIOTHERAPY VS. SEQUENTIAL THERAPY
TITLE3    :


Record number 167
HSC       : 81245                    HURO      :
SITE      : WRAMC                    CSP       : Y       SE        :
ISOTOPE   : UNSPEC                   RT        :         OG        :
OGNAME    :
TITLE1    : RADIONUCLIDE ASSESSMENT OF CARDIAC FUNCTIONAL RESERVE IN PATIENTS WITH
TITLE2    : HYPERTHYROIDISM AND HYPOTHYROIDISM
TITLE3    :


Record number 168
HSC       : 81248                    HURO      :
SITE      : WBAMC                    CSP       : Y       SE        : SE
ISOTOPE   : I 131                    RT        :         OG        :
OGNAME    :
TITLE1    : TRANSFER OF 131 I FROM MALE TO FEMALE DURING SEXUAL INTERCOURSE.
TITLE2    :
TITLE3    :


Record number 169
HSC       : 81255                    HURO      :
SITE      : BAMC                     CSP       : Y       SE        :
ISOTOPE   : UNSPEC                   RT        :         OG        :
OGNAME    :
TITLE1    : THE EFFECT OF PROPRANOLOL ON CARDIAC EJECTION FRACTIONS AS DETERMINED BY GATED
TITLE2    : SCANS IN THYROTOXIC PATIENTS
TITLE3    :


Record number 170
HSC       : 81258                    HURO      :
SITE      : BAMC                     CSP       : Y       SE        :
ISOTOPE   :                          RT        : XR      OG        :
OGNAME    :
TITLE1    : COMPARISON OF GRAY-SEALE ULTRASONOGRAPHY AND COMPUTED TOMOGRAPHY WITH INFUSION
TITLE2    : NEPHROTOMOGRAPHY IN EARLY DIAGNOSIS OF ADULT-TYPE POLYCYSTIC KIDNEY DISEASE
TITLE3    :


Record number 171
HSC       : 81263                    HURO      :
SITE      : TAMC                     CSP       : Y       SE        :
ISOTOPE   :                          RT        : XR      OG        :
OGNAME    :
TITLE1    : STUDY OF THE SIZE OF THE THORACIC AORTA WITH COMPUTERIZED TOMOGRAPHY IN NORMAL
TITLE2    : AND ABNORMAL PATIENTS
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TITLE3 :

Record number 172
HSC : 81507 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8095
TITLE1 : SWOG 8095 - MULTIMODAL THERAPY OF METASTATIC EWINGS SARCOMA WITH CHEMOTHERAPY
TITLE2 : PLUS IRRADIATION AND SURGERY (IF POSSIBLE) INTERGROUP PHASE III
TITLE3 :

Record number 173
HSC : 81508 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG :
OGNAME :
TITLE1 : PROPHYLACTIC ALTERNATE DAY CORTICOSTEROID THERAPY FOLLOWING IRRADIATION FOR
TITLE2 : LUNG CARCINOMA
TITLE3 :

Record number 174
HSC : 81524 HURO :
SITE : WRAMC CSP : Y SE :
TOPE : UNSPEC RT : OG :
OGNAME :
TITLE1 : RADIONUCLIDE ASSESSMENT OF CARDIAC FUNCTIONS IN PATIENTS WITH ACROMEGALY
TITLE2 :
TITLE3 :

Record number 175
HSC : 81526 HURO :
SITE : WBAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : TECHNETIUM-99-PYRIDOXYLIDONEGLUTAMATE (TC-99M-PG) FOR DIAGNOSIS OF
TITLE2 : HEPATOBILIARY DISEASE
TITLE3 :

Record number 176
HSC : 82084 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 56
TITLE1 : GOG 56 - RANDOMIZED COMPARISON OF HYDROXYUREA VS MISONIDAZOLE AS AN ADJUNCT
TITLE2 : TO RADIATION THERAPY IN PATIENTS WITH STAGE IIB, III AND IVA CARCINOMA OF THE
TITLE3 : CERVIX AND NEGATIVE PARA-AORTIC NODES.

Record number 177
HSC : 82098 HURO :

SITE : DDEAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : PREDICTIVE ABILITY OF BODY CT SCAN
TITLE2 :
TITLE3 :

Record number 178
HSC : 82124 HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 53
TITLE1 : GOG 53 - A RANDOMIZED DOUBLE-BLIND CLINICAL TRIAL EVALUATION OF
TITLE2 : CHOLESTYRAMINE PROPHYLAXIS FOR RADIATION-INDUCED DIARRHEA.
TITLE3 :

Record number 179
HSC : 82126 HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 56
TITLE1 : GOG 56 - A RANDOMIZED COMPARISON OF HYDROXYUREA VS MISONIDAZOLE AS AN
TITLE2 : ADJUNCT TO RADIATION THERAPY IN PATIENTS WITH STAGE IIB, III AND IVA CARCINOMA
TITLE3 : OF THE CERVIX AND NEGATIVE PARA-AORTIC NODES, PHASE III.

Record number 180
HSC : 82130 HURO :
SITE : WBAMC CSP : Y SE :
ISOTOPE : UNSPEC RT : OG :
OGNAME :
TITLE1 : RENAL SCANNING AS AN ADJUNCT IN DIFFERENTIAL DIAGNOSIS OF RENAL FAILURE.
TITLE2 :
TITLE3 :

Record number 181
HSC : 82134 HURO :
SITE : WBAMC CSP : Y SE :
ISOTOPE : UNSPEC RT : OG :
OGNAME :
TITLE1 : COMPARISON OF BONE AND JOINT SCANS IN PATIENTS WITH NEW ONSET POLYARTHRITIS OR
TITLE2 : POLYARTHRALGIAS.
TITLE3 :

Record number 182
HSC : 82160 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : SEVERE URINARY TRACT INFECTION-THE ROLE OF ULTRASOUND AND COMPUTERIZED
TITLE2 : TOMOGRAPHY.

TITLE3 :

Record number 183
HSC : 82178 HURO :
SITE : WBAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : EVALUATION OF SALINE PURGE AS CONVENTIONAL BARIUM ENEMA PREPARATION IN
TITLE2 : CLEANSING THE COLON FOR AIR CONTRAST BARIUM ENEMA.
TITLE3 :

Record number 184
HSC : 82233 HURO :
SITE : WRAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : STUDY OF GASTRIC EMPTYING BY USE OF TECHNETIUM 99M-CHICKEN LIVER AS A MARKER
TITLE2 : OF SOLID FOOD IN PATIENTS WITH REFLUX ESOPHAGITIS.
TITLE3 :

Record number 185
HSC : 82310 HURO :
SITE : WRAMC CSP : Y SE : SE
TOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : TECHNITIUM 99M LABELED DI-ISOPROPYL-IDA (DISIDA) FOR HEPATOBILIARY
TITLE2 : SCINTIGRAPHY
TITLE3 :

Record number 186
HSC : 82348 HURO :
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : EFFECT OF GLUCAGON INJECTION ON DIAGNOSTIC ACCURACY OF DOUBLE CONTRAST AND
TITLE2 : BARIUM EXAMINATIONS OF THE UPPER AND LOWER GASTROINTESTINAL TRACT.
TITLE3 :

Record number 187
HSC : 82349 HURO :
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : CT (COMPUTED TOMOGRAPHY) EVALUATION OF RETROPERITONEAL GAS RESORPTION AFTER
TITLE2 : ABDOMINAL AORTIC SURGERY: A PROSPECTIVE STUDY
TITLE3 :

Record number 188
HSC : 82437 HURO :

SITE : LAMC CSP : Y SE :
ISOTOPE : UNSPEC RT : OG :
OGNAME :
TITLE1 : IDENTIFICATION OF TUBULAR ECTASIA AND MEDULLARY SPONGE KIDNEY ON RADIONUCLIDE
TITLE2 : RENAL SCAN.
TITLE3 :

Record number 189
HSC : 82449 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : EVALUATION OF RADIATION EXPOSURE TO PERSONNEL DURING CARDIAC CATHETERIZATION.
TITLE2 :
TITLE3 :

Record number 190
HSC : 82478 HURO :
SITE : WBAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : CLINICAL AND SURGICAL CORRELATIONS BETWEEN COMPUTERIZED AXIAL TOMOGRAPHY (CT)
TITLE2 : VS METRIZAMIDE MYELOGRAPHY IN PATIENTS WITH LOW BACK PAIN
TITLE3 :

Record number 191
HSC : 82501 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : UNSPEC RT : XR OG :
OGNAME :
TITLE1 : COMPARISON OF LIVER/SPLEEN SCINTIGRAPHY, SELECTIVE SPLEEN SCINTIGRAPHY,
TITLE2 : COMPUTER TOMOGRAPHY AND ULTRASOUND IN THE DIAGNOSIS OF SPLENIC TRAUMA.
TITLE3 :

Record number 192
HSC : 82536 HURO :
SITE : FAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : PHARMACOLOGIC ATTEMPTS OF BONE SUPPRESSION IN 99MTC PYROPHOSPHATE MYOCARDIAL
TITLE2 : SCANNING.
TITLE3 :

Record number 193
HSC : 82553 HURO :
SITE : LAMC CSP : Y SE : SE
ISOTOPE : TL 201 RT : OG :
OGNAME :
TITLE1 : REVERSE REDISTRIBUTION ON 201-THALLIUM CHLORIDE STRESS AND REDISTRIBUTION
TITLE2 : IMAGES-REPRODUCIBLE?

TITLE3 :

Record number 194
HSC : 82578 HURO :
SITE : BAMC CSP : N SE :
ISOTOPE : RT : OG :
OGNAME :
TITLE1 : IONIZING RADIATION EXPOSURE OF EMERGENCY ROOM PERSONNEL
TITLE2 :
TITLE3 :

Record number 195
HSC : 82647 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : UNSPEC RT : XR OG :
OGNAME :
TITLE1 : PROSPECTIVE EVALUATION OF CLINICAL, X-RAY, HISTOLOGIC, SCINTIGRAPHIC AND
TITLE2 : MICROBIOLOGIC CHARACTERISTICS OF DIABETIC FEET
TITLE3 :

Record number 196
HSC : 83043 HURO :
SITE : FAMC CSP : Y SE : SE
TOPE : TC 99M RT : OG :
NAME :
TITLE1 : ASSESSMENT OF REGIONAL WALL MOTION ABNORMALITIES BY RADIONUCLIDE ANGIOGRAPHY;
TITLE2 : EFFECT OF SUBLINGUAL NITROGLYCERIN. TC 99M SULPHUR COLLOID
TITLE3 :

Record number 197
HSC : 83044 HURO :
SITE : FAMC CSP : Y SE : SE
ISOTOPE : GA 67 RT : OG :
OGNAME :
TITLE1 : GALLIUM INDEX: QUALITATIVE VS QUANTITATIVE ANALYSIS.
TITLE2 :
TITLE3 :

Record number 198
HSC : 83104 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : UNSPEC RT : XR OG :
OGNAME :
TITLE1 : PROSPECTIVE EVALUATION OF CLINICAL, X-RAY, HISTOLOGIC, SCINTIGRAPHIC AND
TITLE2 : MICROBIOLOGIC CHARACTERISTICS OF DIABETIC FEET.
TITLE3 :

Record number 199
HSC : 83224 HURO :

SITE : WBAMC CSP : Y SE :
ISOTOPE : UNSPEC RT : XR OG :
OGNAME :
TITLE1 : PROSPECTIVE EVALUATION OF CLINICAL, X-RAY, HISTOLOGIC, SCINTIGRAPHIC AND
TITLE2 : MICROBIOLOGIC CHARACTERISTICS OF DIABETIC FEET (A MULTICENTER STUDY).
TITLE3 :

Record number 200
HSC : 83316 HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : CT SCAN OF MEDIAL MENISCUS TEARS OF THE KNEE
TITLE2 :
TITLE3 :

Record number 201
HSC : 83328 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG822930
TITLE1 : SWOG 8229/30 - COMBINED MODALITY THERAPY FOR MULTIPLE MYELOMA. VMCP-VBAP FOR
TITLE2 : REMISSION INDUCTION THERAPY: VMCP AND LEVAMISOLE VS SEQUENTAIL HALF-BODY
TITLE3 : RADIOTHERO-CHEMOTHERAPY ALONE, PHASE III - SWOG 8229/30

Record number 202
HSC : 83332 HURO :
SITE : FAMC CSP : Y SE : SE
ISOTOPE : IN 111 RT : OG :
OGNAME :
TITLE1 : EVALUATION OF INDIUM OXINE-IN-III LABELED CELLULAR BLOOD COMPONENTS.
TITLE2 :
TITLE3 :

Record number 203
HSC : 83335 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : UNSPEC RT : XR OG :
OGNAME :
TITLE1 : PROSPECTIVE EVALUATION OF CLINICAL, X-RAY, HISTOLOGIC, SCINTIGRAPHIC AND
TITLE2 : MICROBIOLOGIC CHARACTERISTICS OF DIABETIC FEET.
TITLE3 :

Record number 204
HSC : 83352 HURO :
SITE : LAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : ASSESSMENT OF REGIONAL WALL MOTION ABNORMALITIES BY RADIONUCLIDE ANGIOGRAPHY:
TITLE2 : EFFECT OF SUBLINGUAL NITROGLYCERIN.

TITLE3 :

Record number 205
HSC : 83442 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : UNSPEC RT : OG :
OGNAME :
TITLE1 : THE EVALUATION OF POSTPRANDIAL SUPINE REFLUX EVENTS BY SIMULTANEOUS ESOPHAGEAL
TITLE2 : MANOMETRY, ESOPHAGEAL PH MONITORING, AND GASTROESOPHAGEAL SCINTISCANNING IN
TITLE3 : PATIENTS WITH HIATUS HERNIA AND ESOPHAGITIS

Record number 206
HSC : 83578 HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 7983
TITLE1 : SWOG 7983 - RADIATION THERAPY IN COMBINATION WITH CCNU IN PATIENTS WITH
TITLE2 : INCOMPLETE RESECTED GLIOMAS OF THE BRAIN GRADE I AND II
TITLE3 :

Record number 207
HSC : 83585 HURO :
SITE : FAMC CSP : Y SE :
TOPE : RT : RT OG : OG
OGNAME : SWOG 8102
TITLE1 : SWOG 8102 - WHOLE BRAIN IRRADIATION AND INTRATHECAL METHOTREXATE IN THE
TITLE2 : TREATMENT OF SOLID TUMOR LEPTOMENINGEAL METASTASES, PHASE II
TITLE3 :

Record number 208
HSC : 83588 HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8124
TITLE1 : SWOG 8124 - TREATMENT OF ACUTE NON-LYMPHOCYTIC LEUKEMIA WITH CONVENTIONAL
TITLE2 : INDUCTION, CONSOLIDATION CHEMOTHERAPY: MAINTENANCE WITH CHEMOTHERAPY VS BONE
TITLE3 : MARROW TRANSPLANTATION FOLLOWING TOTAL BODY IRRADIATION, PHASE III

Record number 209
HSC : 83593 HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8232
TITLE1 : SWOG 8232 - TREATMENT OF SMALL CELL LUNG CANCER WITH VP-16/CIS-PLATINUM
TITLE2 : ALTERNATING WITH VINCRISTINE/ADRIAMYCIN/CYCLOPHOSPHAMIDE AND RADIATION VS
TITLE3 : CONCURRENT VP-16/VINCRISTINE/ADRIAMYCIN/CYCLOPHOSPHAMIDE AND RADIATION THERAPY

Record number 210
HSC : 84026 HURO :

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SITE      : WRAMC                    CSP       : Y       SE        :
  TOPE    :                          RT        : XR      OG        :
OGNAME    :
TITLE1    : AN EVALUATION OF COMPUTERIZED AXIAL TOMOGRAPHY OF THE CHEST IN CHANGING THE
TITLE2    : STAGE OR TREATMENT OF PATIENTS WITH HODGKIN'S DISEASE
TITLE3    :


Record number 211
HSC       : 84028                    HURO      :
SITE      : WBAMC                    CSP       : Y       SE        : SE
ISOTOPE   : TC 99M                   RT        :         OG        :
OGNAME    :
TITLE1    : USE OF IN VITRO LABELED 99MTC RED BLOOD CELLS (RBC) BLOOD POOL IMAGING AND
TITLE2    : COMPUTER AIDED ACQUISITION AND PROCESSING IN LOCALIZATION OF UPPER
TITLE3    : GASTROINTESTINAL (UGI) BLEEDING SITES:  A PILOT STUDY


Record number 212
HSC       : 84036                    HURO      :
SITE      : FAMC                     CSP       : Y       SE        :
ISOTOPE   :                          RT        : RT      OG        :
OGNAME    :
TITLE1    : A PROSPECTIVE EVALUATION OF ESOPHAGEAL CHANGES IN PATIENTS UNDERGOING
TITLE2    : ESOPHAGEAL RADIATION
TITLE3    :


Record number 213
HSC       : 84041                    HURO      :
SITE      : FAMC                     CSP       : Y       SE        :
ISOTOPE   :                          RT        : RT      OG        : OG
OGNAME    : SWOG 8094
TITLE1    : SWOG 8094 - INTERGROUP MESOTHELIOMA STUDY #1 - RADIOTHERAPY WITH AND WITHOUT
TITLE2    : CHEMOTHERAPY FOR MALIGNANT MESOTHELIOMA LOCALIZED TO ONE HEMITHORAX, PHASE III
TITLE3    :


Record number 214
HSC       : 84043                    HURO      :
SITE      : FAMC                     CSP       : Y       SE        :
ISOTOPE   :                          RT        : RT      OG        : OG
OGNAME    : SWOG 8104
TITLE1    : SWOG 8104 - TREATMENT OF ADVANCED SEMINOMA WITH COMBINED CHEMOTHERAPY AND
TITLE2    : RADIATION THERAPY
TITLE3    :


Record number 215
HSC       : 84046                    HURO      :
SITE      : FAMC                     CSP       : Y       SE        :
 OPE      :                          RT        : RT      OG        : OG
 AME      : SWOG 8229
TITLE1    : SWOG 8229 - COMBINED THERAPY FOR MULTIPLE MYELOMA, VMCP-VBAP FOR REMISSION:
TITLE2    : VMCP+LEVAMISOLE VS SEQUENTIAL HALF-BODY RADIOTHERAPY + VINCRISTINE-PREDNISONE
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TITLE3 : FOR MAINTENANCE OR CONSOLIDATION.

Record number 216
HSC : 84061 HURO :
SITE : LAMC CSP : Y SE :
ISOTOPE : UNSPEC RT : OG :
OGNAME :
TITLE1 : REST AND EXERCISE RADIONUCLIDE VENTRICULOGRAPHY IN THE ASSESSMENT OF CORONARY
TITLE2 : ARTERY DISEASE
TITLE3 :

Record number 217
HSC : 84071 HURO :
SITE : WBAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 7983
TITLE1 : SWOG 7983 - RADIATION THERAPY IN COMBINATION WITH CCNU IN PATIENTS WITH
TITLE2 : INCOMPLETELY RESECTED GLIOMAS OF THE BRAIN GRADE I AND II, PHASE III - SWOG
TITLE3 : 7983

Record number 218
HSC : 84076 HURO :
SITE : WBAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8232
TITLE1 : SWOG 8232 - TREATMENT OF LIMITED SMALL CELL LUNG CANCER WITH
TITLE2 : VP-16/CIS-PLATINUM, ALTERNATING WITH VINCRISTINE/ADRIAMYCIN/CYCLOPHOSPHAMIDE
TITLE3 : AND RADIATION THERAPY, PHASE I - SWOG 8232

Record number 219
HSC : 84115 HURO :
SITE : DDEAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8102
TITLE1 : SWOG 8102 - WHOLE BRAIN IRRADIATION AND INTRATHECAL METHOTREXATE IN THE
TITLE2 : TREATMENT OF SOLID TUMOR LEPTOMENINGEAL METASTASES, PHASE II
TITLE3 :

Record number 220
HSC : 84118 HURO :
SITE : DDEAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8232
TITLE1 : SWOG 8232 - TREATMENT OF SMALL CELL LUNG CANCER WITH VP-16/CIS-PLATINUM,
TITLE2 : ALTERNATING WITH VINCRISTINE/ADRIAMYCIN/CYCLOPHOSPHAMIDE AND RADIATION VS
TITLE3 : CONCURRENT VP-16/VINCRISTINE/ADRIAMYCIN/CYCLOPHOSPHAMIDE AND RADIATION, PH III

Record number 221
HSC : 84125 HURO :

SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 75
TITLE1 : GOG 75 - POSTOPERATIVE PELVIC RADIATION IN STAGE I AND II MIXED MESODERMAL
TITLE2 : SARCOMAS OF THE UTERUS - GOG 75
TITLE3 :

Record number 222
HSC : 84153 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8210
TITLE1 : SWOG 8210 - A COMPARISON OF AGGRESSIVE RADIOTHERAPY PLUS CHEMOTHERAPY VERSUS
TITLE2 : AGGRESSIVE CHEMOTHERAPY IN THE TREATMENT OF LIMITED CARCINOMA OF THE PANCREAS,
TITLE3 : PHASE III

Record number 223
HSC : 84154 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8232
TITLE1 : SWOG 8232 - TREATMENT OF SMALL CELL LUNG CANCER WITH VP16/CIS-PLATINUM,
TITLE2 : ALTERNATING WITH VINCRISTINE/ADRIAMYCIN-CYCLOPHOSPHAMIDE AND RADIATION VS
TITLE3 : CONCURRENT VP16/VINCRISTINE/ADRIAMYCIN/ CYCLOPHOSPHAMIDE AND RADIATION, PH III

Record number 224
HSC : 84171 HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8210
TITLE1 : SWOG 8210 - A COMPARISON OF AGGRESSIVE RADIOTHERAPY + CHEMOTHERAPY VS.
TITLE2 : AGGRESSIVE CHEMOTHERAPY IN THE TREATMENT OF LIMITED CARCINOMA OF THE PANCREAS,
TITLE3 : PHASE III

Record number 225
HSC : 84173 HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8221
TITLE1 : SWOG 8221 - TREATMENT OF ADVANCED BLADDER CANCER WITH PREOPERATIVE IRRADIATION
TITLE2 : AND RADICAL CYSTECTOMY VS. RADICAL CYSTECTOMY ALONE, PHASE III - SWOG 8221
TITLE3 :

Record number 226
HSC : 84211 HURO :
SITE : BAMC CSP : Y SE : SE
ISOTOPE : TL 201 RT : XR OG :
OGNAME :
TITLE1 : DIPYRIDAMOLE MUGA STUDIES COMPARED WITH QUANTITATIVE TOMOGRAPHIC STRESS AND
TITLE2 : DIPYRIDAMOLE INFUSION TL 201 SCINTIGRAMS FOR ASSESSING CORONARY ARTERY DISEASE

TITLE3 :

Record number 227
HSC : 84216 HURO :
SITE : LAMC CSP : Y SE :
ISOTOPE : UNSPEC RT : OG :
OGNAME :
TITLE1 : REST AND EXERCISE RADIONUCLIDE ANGIOGRAPHY IN THE ASSESSMENT OF ISCHEMIC HEART
TITLE2 : DISEASE IN PATIENTS WITH AORTO-ILIAC OCCLUSIVE DISEASE
TITLE3 :

Record number 228
HSC : 84217 HURO :
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : CT SCANNING AND MYELOGRAPHY IN THE DIAGNOSIS OF METASTASIS TO THE AXIAL
TITLE2 : SKELETON
TITLE3 :

Record number 229
HSC : 84221 HURO :
SITE : DDEAMC CSP : Y SE :
TOPE : RT : RT OG : OG
OGNAME : SWOG 7983
TITLE1 : SWOG 7983 - RADIATION THERAPY IN COMBINATION WITH CCNU IN PATIENTS WITH
TITLE2 : INCOMPLETELY RESECTED GLIOMAS OF THE BRAIN, GRADE I AND II
TITLE3 :

Record number 230
HSC : 84229 HURO :
SITE : DDEAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8094
TITLE1 : SWOG 8094 - INTERGROUP MESOTHELIOMA STUDY #1 - RADIOTHERAPY WITH AND WITHOUT
TITLE2 : CHEMOTHERAPY FOR MALIGNANT MESOTHELIOMA LOCALIZED TO ONE HEMITHORAX, PHASE III
TITLE3 :

Record number 231
HSC : 84255 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8221
TITLE1 : SWOG 8221 - TREATMENT OF ADVANCED BLADDER CANCER WITH PREOPERATIVE IRRADIATION
TITLE2 : AND RADICAL CYSTECTOMY VERSUS RADICAL CYSTECTOMY ALONE, PHASE III
TITLE3 :

Record number 232
HSC : 84294 HURO :

SITE : WRAMC CSP : Y SE :
TOPE : RT : RT OG :
OGNAME :
TITLE1 : CISPLATIN AND 5-FU INFUSION PRIOR TO DEFINITIVE RADIATION FOR UNRESECTABLE
TITLE2 : NON-SMALL CELL LUNG CANCER
TITLE3 :

Record number 233
HSC : 84296 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG ?
TITLE1 : POG ... - STAGE IV RHABDOMYOSARCOMA: FRACTIONATED TOTAL BODY RADIATION AS AN
TITLE2 : ADJUNCT TO CHEMOTHERAPY- POG PILOT STUDY
TITLE3 :

Record number 234
HSC : 84344 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 8346
TITLE1 : POG 8346 - COMPREHENSIVE THERAPY FOR EWING'S SARCOMA: TAILORED VS. STANDARD
TITLE2 : RADIATION THERAPY
TITLE3 :

Record number 235
HSC : 84396 HURO :
SITE : DDEAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8124
TITLE1 : SWOG 8124 - TREATMENT OF ACUTE NON-LYMPHOCYTIC LEUKEMIA WITH CONVENTIONAL
TITLE2 : INDUCTION, CONSOLIDATION CHEMOTHERAPY: MAINTENANCE WITH CHEMOTHERAPY VERSUS
TITLE3 : BONE MARROW TRANSPLANTATION FOLLOWING TOTAL BODY IRRADIATION, PHASE III

Record number 236
HSC : 84399 HURO :
SITE : DDEAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8210
TITLE1 : SWOG 8210 - A COMPARISON OF AGGRESSIVE RADIOTHERAPY + CHEMOTHERAPY VS.
TITLE2 : AGGRESSIVE CHEMOTHERAPY IN THE TREATMENT OF LIMITED CARCINOMA OF THE PANCREAS,
TITLE3 : PHASE III

Record number 237
HSC : 84403 HURO :
SITE : DDEAMC CSP : Y SE :
TOPE : RT : RT OG : OG
AME : SWOG 8229
TITLE1 : SWOG 8229 - COMBINED THERAPY FOR MULTIPLE MYELOMA, VMCP-VBAP FOR REMISSION:
TITLE2 : VMCP+LEVAMISOLE VS SEQUENTIAL HALF-BODY RADIOTHERAPY + VINCRISTINE-PREDNISONE

TITLE3 : FOR MAINTENANCE OR CONSOLIDATION

Record number 238
HSC : 84410 HURO :
SITE : DDEAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8292
TITLE1 : SWOG 8292 - TREATMENT FOR BRAIN METASTASES, PHASE III. INTERGROUP STUDY
TITLE2 : (SURGERY AND/OR RADIATION THERAPY)
TITLE3 :

Record number 239
HSC : 84419 HURO :
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : NCOG 20831
TITLE1 : NCOG 20831 - PHASE III TRIAL OF 7-DRUG VS 3-DRUG CHEMOTHERAPY REGIMENS WITH OR
TITLE2 : WITHOUT PROPHYLACTIC CRANIAL IRRADIATION (PCI) FOR UNDIFFERENTIATED SMALL CELL
TITLE3 : ANAPLASTIC LUNG CANCER (OAT CELL): EXTENSIVE DISEASE

Record number 240
HSC : 84423 HURO :
SITE : MAMC CSP : Y SE :
TOPE : RT : XR OG :
OGNAME :
TITLE1 : CT SCANNING AND MYELOGRAPHY IN THE DIAGNOSIS OF METASTASIS TO THE AXIAL
TITLE2 : SKELETON
TITLE3 :

Record number 241
HSC : 84425 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : USE OF X-RAY PELVIMETRY AND ULTRASONIC PARAMETERS TO PREDICT CEPHALO-PELVIC
TITLE2 : DISPROPORTION AND SHOULDER DYSTOCIA
TITLE3 :

Record number 242
HSC : 84466 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 75
TITLE1 : GOG 75 - POSTOPERATIVE PELVIC RADIATION IN STATE I & II MIXED MESODERMAL
TITLE2 : SARCOMAS OF THE UTERUS - GOG 75
TITLE3 :

Record number 243
HSC : 84494 HURO :

SITE : BAMC CSP : Y SE :
ISOTOPE : UNSPEC RT : OG :
OGNAME :
TITLE1 : THE VALUE OF PREOPERATIVE SULFUR COLLOID MARROW SCINTIGRAPHY IN THE TREATMENT
TITLE2 : OF ACUTE FRACTURES OF THE FEMORAL NECK
TITLE3 :

Record number 244
HSC : 84495 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : ASSESSMENT OF RADIOCONTRAST INDUCED ACUTE RENAL FAILURE FOLLOWING CORONARY
TITLE2 : ANGIOGRAPHY: AN EVALUATION OF INTRAVENOUS MANNITOL INFUSION AS A PREVENTIVE
TITLE3 : MEASURE

Record number 245
HSC : 84511 HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 75
TITLE1 : GOG 75 - POSTOPERATIVE PELVIC RADIATION IN STAGE I AND II MIXED MESODERMAL
TITLE2 : SARCOMAS OF THE UTERUS - GOG 75
TITLE3 :

Record number 246
HSC : 84522 HURO :
SITE : WBAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : IMPROVED PREGNANCY RATES AFTER USING OIL-SOLUBLE CONTRAST MEDIA (OSCM) FOR
TITLE2 : HYSTEROSALPINGOGRAPHY (HSG)
TITLE3 :

Record number 247
HSC : 84637 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : CCG 861
TITLE1 : CCG 861 - SURGERY, RADIATION, AND CHEMOTX WITH BLEOMYCIN, VINBLASTINE,
TITLE2 : CISPLATINUM DIAMINE DICHLORIDE, ACTINOMYCIN-D, CYCLOPHOSPHAMIDE, & ADRIAMYCIN
TITLE3 : IN LOCAL AND METASTATIC MALIGNANT GERM CELL OVARIAN TUMORS OF CHILDHOOD

Record number 248
HSC : 85011 HURO :
SITE : WRAMC CSP : Y SE : SE
ISOTOPE : I 131 RT : OG :
OGNAME :
TITLE1 : DIAGNOSTIC IMAGING OF ADRENAL MEDULLA (PHEOCHROMOCYTOMA AND NEUROBLASTOMAS)
TITLE2 : WITH I 131 MIBG (METAIODOBENZLGUANIDINE SULFATE)

TITLE3 :

Record number 249
HSC : 85017 HURO :
SITE : WBAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : INTERGROUP
TITLE1 : INTERGROUP - ADJUVANT THERAPY OF SOFT TISSUE SARCOMA WITH RADIATION THERAPY AND
TITLE2 : CHEMOTHERAPY
TITLE3 :

Record number 250
HSC : 85033 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8300
TITLE1 : SWOG 8300 - TREATMENT OF LIMITED NON-SMALL CELL LUNG CANCER: RADIATION VERSUS
TITLE2 : RADIATION PLUS CHEMOTHERAPY (FOMI/CAP), PHASE III
TITLE3 :

Record number 251
HSC : 85064 HURO :
SITE : DDEAMC CSP : Y SE :
'OPE : RT : RT OG : OG
OGNAME : SWOG 8300
TITLE1 : SWOG 8300 - TREATMENT OF LIMITED NON-SMALL CELL LUNG CANCER: RADIATION VERSUS
TITLE2 : RADIATION PLUS CHEMOTHERAPY (FOMI/CAP), PHASE III
TITLE3 :

Record number 252
HSC : 85087 HURO :
SITE : WBAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8300
TITLE1 : SWOG 8300 - TREATMENT OF LIMITED NON-SMALL CELL LUNG CANCER: RADIATION VERSUS
TITLE2 : RADIATION PLUS CHEMOTHERAPY (FOMI/CAP), PHASE III
TITLE3 :

Record number 253
HSC : 85101 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8300
TITLE1 : SWOG 8300 - TREATMENT OF LIMITED NON-SMALL CELL LUNG CANCER: RADIATION VERSUS
TITLE2 : RADIATION PLUS CHEMOTHERAPY (FOMI/CAP), PHASE III
TITLE3 :

Record number 254
HSC : 85115 HURO :

SITE : WRAMC CSP : Y SE :
ISOTOPE : UNSPEC RT : OG :
OGNAME :
TITLE1 : CHARACTERIZATION OF THE POSTOPERATIVE RADIONUCLIDE SCAN PATTERNS IN PATIENTS
TITLE2 : WITH POROUS COATED TOTAL HIP PROSTHESIS
TITLE3 :

Record number 255
HSC : 85130 HURO :
SITE : MAMC CSP : Y SE : SE
ISOTOPE : TL 201 RT : OG :
OGNAME :
TITLE1 : A COMPARISON OF THALLIUM STRESS TESTING AND CARDIAC PACING STRESS TESTING IN
TITLE2 : THE PREOPERATIVE EVALUATION OF PATIENTS UNDERGOING ABDOMINAL AORTIC
TITLE3 : ANEURYSMECTOMY AND/OR AORTOFEMORAL REVASCULARIZATION

Record number 256
HSC : 85151 HURO :
SITE : LAMC CSP : Y SE :
ISOTOPE : UNSPEC RT : OG :
OGNAME :
TITLE1 : LEFT VENTRICULAR DIASTOLIC FUNCTION IN THE ASSESSMENT OF DOXORUBICIN
TITLE2 : CARDIOTOXICITY USING RADIONUCLIDE VENTRICULOGRAPHY
TITLE3 :

Record number 257
HSC : 85156 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : NBCCGA 8
TITLE1 : NBCCGA 8 - CIS-DIAMMINE-DICHLOROPLATINUM (NSC #119875) COMBINED WITH SMALL
TITLE2 : FIELD PELVIC RADIATION THERAPY FOR PATIENTS WITH CLINICALLY LOCALIZED INVASIVE
TITLE3 : PRIMARY CARCINOMA OF THE BLADDR WHO ARE UNSUITABLE FOR CYSTECTOMY - NBCCGA 8

Record number 258
HSC : 85160 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : NBCCGA 16
TITLE1 : NBCCGA 16 - RANDOMIZED TRIAL OF RADICAL CYSTECTOMY COMPARED TO PREOPERATIVE
TITLE2 : RADIATION THERAPY AND RADICAL CYSTECTOMY IN PATIENTS WITH INVASIVE PRIMARY
TITLE3 : CARCINOMA OF THE BLADDER - NBCCGA 16

Record number 259
HSC : 85165 HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : AN EVALUATION OF COMPUTED TOMOGRAPHY OF THE CHEST IN CHANGING THE STAGE OR
TITLE2 : TREATMENT OF PATIENTS WITH HODGKIN'S DISEASE

TITLE3 :

Record number 260
HSC : 85177 HURO :
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8590
TITLE1 : SWOG 8590 - PHASE III STUDY TO DETERMINE THE EFFECT OF COMBINING CHEMOTHERAPY
TITLE2 : (CISPLATIN AND 5FU) WITH SURGERY AND RADIOTHERAPY FOR RESECTABLE SQUAMOUS CELL
TITLE3 : CARCINOMA OF THE HEAD AND NECK

Record number 261
HSC : 85187 HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8492
TITLE1 : SWOG 8492 - RADIATION THERAPY + 5-FLUOROURACIL VS SANDWICH SMF CHEMOTHERAPY +
TITLE2 : RADIATION THERAPY AS ADJUVANT SURGICAL TREATMENT OF PANCREATIC CANCER, PHASE
TITLE3 : III - INTERGROUP

Record number 262
HSC : 85217 HURO :
SITE : BAMC CSP : Y SE :
OPE : RT : RT OG : OG
OGNAME : SWOG 8492
TITLE1 : SWOG 8492 - RADIATION THERAPY + 5-FLUOROURACIL VS. SANDWICH SMF CHEMOTHERAPY
TITLE2 : + RADIATION THERAPY AS ADJUVANT SURGICAL TREATMENT OF PANCREATIC CANCER, PHASE
TITLE3 : III-INTERGROUP - SWOG 8492

Record number 263
HSC : 85230 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME :
TITLE1 : GROUP ... - TRIAL OF CIS-DIAMMINE-DICHLOROPLATINUM (II) (DDP) CONFINED WITH
TITLE2 : SMALL-FIELD PELVIC RADIATION THERAPY FOR PATIENTS WITH CLINICALLY LOCALIZED
TITLE3 : INVASIVE PRIMARY CARCINOMA OF THE BLADDER WHO ARE UNSUITABLE FOR CYSTECTOMY

Record number 264
HSC : 85235 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : NBCCGA 15
TITLE1 : NBCCGA 15 - SMALL FIELD PELVIC, HI-DOSE, EXT BEAM RADIATION FOR PTS W/
TITLE2 : PERSISTENT OR RECURRENT LOW STAGE BLADDER CA FOLLOWING TRANSURETHRAL RESECTION
TITLE3 : AND/OR FULGURATION AND INTRA-VESICAL CHEMOTHERAPY AND/OR IMMUNOTHERAPY

Record number 265
HSC : 85236 HURO :

SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : NBCCGA 16
TITLE1 : NBCCGA 16 - RANDOMIZED TRIAL OF RADICAL CYSTECTOMY COMPARED TO PREOPERATIVE
TITLE2 : RADIATION THERAPY AND RADICAL CYSTECTOMY IN PATIENTS WITH INVASIVE PRIMARY
TITLE3 : CARCINOMA OF THE BLADDER

Record number 266
HSC : 85239 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG :
OGNAME :
TITLE1 : POST-RADIOTHERAPY OVERT AND OCCULT CONSTRICTIVE PERICARDITIS IN PTS POST
TITLE2 : MEDIASTINAL RADIOTHERAPY: EVALUATION BY MICROMANOMETRIC HEMODYNAMICS, PULSED
TITLE3 : DOPPLER ECHOCARDIOGRAPHY, & RIGHT VENTRICULAR ENDOMYOCARDIAL BIOPSY

Record number 267
HSC : 85244 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8460
TITLE1 : SWOG 8460 - COMBINATION CHEMOTHERAPY (COPE) AND RADIATION THERAPY FOR
TITLE2 : EXTENSIVE SMALL CELL LUNG CANCER, PHASE II - PILOT- SWOG 8460
TITLE3 :

Record number 268
HSC : 85261 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8300
TITLE1 : SWOG 8300 - TREATMENT OF LIMITED NON-SMALL CELL LUNG CANCER: RADIATION VERSUS
TITLE2 : RADIATION PLUS CHEMOTHERAPY (FOMI/CAP), PHASE III
TITLE3 :

Record number 269
HSC : 85300 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : U INDIANA
TITLE1 : PHASE II STUDY OF CISPLATIN PLUS CONTINUOUS INFUSION 5 FLUOROURACIL AND
TITLE2 : RADIOTHERAPY IN LOCALLY ADVANCED ESOPHAGEAL CANCER (PART 1 AND 2) TO BE DONE
TITLE3 : IN CONJUNCTION WITH THE UNIVERSITY OF INDIANA

Record number 270
HSC : 85306 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : UNSPEC RT : XR OG :
OGNAME :
TITLE1 : THE USE OF SERIAL BONE SCANS, X-RAYS AND CT SCANS IN ASSESSING THE RESPONSE OF
TITLE2 : BONE METASTASIS TO SYSTEMIC TREATMENT

TITLE3 :

Record number 271
HSC : 85307 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG :
OGNAME :
TITLE1 : THE USE OF SERIAL COMPUTED TOMOGRAPHY (C.T.) SCANS TO EVALUATE RESPONSE TO
TITLE2 : RADIATION THERAPY
TITLE3 :

Record number 272
HSC : 85321 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8293
TITLE1 : SWOG 8293 - MANAGEMENT OF LOCALLY OR REGIONALLY RECURRENT BUTSURGICALLY RESECTA
TITLE2 : BLE BREAST CANCER, PHASE III
TITLE3 :

Record number 273
HSC : 85323 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8493
TITLE1 : SWOG 8493 - SIMULTANEOUS CISPLATINUM PLUS RADIATION THERAPY COMPARED WITH
TITLE2 : STANDARD RADIATION THERAPY IN THE TREATMENT OF UNRESECTABLE SQUAMOUS OR
TITLE3 : UNDIFFERENTIATED CARCINOMA OF THE HEAD AND NECK, PHASE III

Record number 274
HSC : 85339 HURO :
SITE : WRAMC CSP : Y SE : SE
ISOTOPE : IN 111 RT : OG :
OGNAME :
TITLE1 : CHARACTERIZATION OF RADIOACTIVE UPTAKE OF INDIUM III WHITE BLOOD
TITLE2 : CELLS IN FRACTURES
TITLE3 :

Record number 275
HSC : 85342 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : CALGB 8591
TITLE1 : CALGB 8591 - A PHASE III STUDY OF COMBINING CHEMOTHERAPY WITH SURGERY AND
TITLE2 : RADIOTHERAPY FOR RESECTABLE SQUAMOUS CELL CARCINOMA OF THE HEAD AND NECK -
TITLE3 : CALGB 8591

Record number 276
HSC : 85352 HURO :

SITE : WBAMC CSP : Y SE :
ISOTOPE : UNSPEC RT : OG :
OGNAME :
TITLE1 : RADIONUCLIDE DETECTION AND TREATMENT OF PULMONARY CONTUSION IN THE
TITLE2 : PRE-CLINICAL STATE
TITLE3 :

Record number 277
HSC : 85364 HURO :
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : NCOG 2N841
TITLE1 : NCOG 2N-84-1 - PHASE III RANDOMIZED TRIAL OF HEAVY CHARGED PARTICLE
TITLE2 : RADIOTHERAPY VS. STANDARD PHOTON IRRADIATION OF UNRESECTABLE NON-OAT CELL
TITLE3 : CARCINOMA OF THE LUNG - NCOG 2N-84-1

Record number 278
HSC : 85373 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : CALGB 8532
TITLE1 : CALGB 8532 - TREATMENT OF LIMITED STAGE SMALL CELL LUNG CANCER WITH INTENSIVE
TITLE2 : ACE/CEP COMBINATION CHEMOTHERAPY, IRRADIATION, AND WARFARIN - CALGB 8532
TITLE3 :

Record number 279
HSC : 85398 HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8300
TITLE1 : SWOG 8300 - TREATMENT OF LIMITED NON-SMALL CELL LUNG CANCER; RADIATION VERSUS
TITLE2 : RADIATION PLUS CHEMOTHERAPY (FOMI/CAP), PHASE III - SWOG 8300
TITLE3 :

Record number 280
HSC : 85400 HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8493
TITLE1 : SWOG 8493 - PHASE III SIMULTANEOUS CIS-PLATINUM PLUS RADIATION THERAPY
TITLE2 : COMPARED WITH STANDARD RADIATION THERAPY IN THE TREATMENT OF UNRESECTABLE
TITLE3 : SQUAMOUS OR UNDIFFERENTIATED CARCINOMA OF THE HEAD AND NECK

Record number 281
HSC : 85405 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : UNSPEC RT : OG :
OGNAME :
TITLE1 : PLATELET DEPOSITION AT CORONARY ANGIOPLASTY SITES: EFFECT OF AN ANTI-PLATELET
TITLE2 : REGIMEN AND PREDICTIVE VALUE OF PLATELET SCANNING

TITLE3 :

Record number 282
HSC : 85411 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8493
TITLE1 : SWOG 8493 - SIMULTANEOUS CIS-PLATINUM + RADIATION THERAPY COMPARED WITH
TITLE2 : STANDARD THERAPY IN THE TREATMENT OF UNRESECTABLE SQUAMOUS OR UNDIFFERENTIATED
TITLE3 : CARCINOMA OF THE HEAD AND NECK- SWOG 8493

Record number 283
HSC : 85412 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 8426
TITLE1 : POG 8426 - INTENSIVE CHEMOTHERAPY (MOPP-ABVD) PLUS LOW DOSE TOTAL NODAL
TITLE2 : RADIATION THERAPY IN THE TREATMENT OF STAGES IIB, IIIB, IV HODGKIN'S DISEASE
TITLE3 : IN PEDIATRICS

Record number 284
HSC : 85444 HURO :
SITE : WRAMC CSP : Y SE :
OPE : RT : RT OG : OG
OGNAME : POG 8346
TITLE1 : POG 8346 - COMPREHENSIVE THERAPY FOR EWING'S SARCOMA: TAILORED VERSUS
TITLE2 : STANDARD RADIATION THERAPY, PHASE III - POG 8346
TITLE3 :

Record number 285
HSC : 85462 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : GOLYTELY COLON PREPARATION FOR DOUBLE-CONTRAST BARIUM ENEMA
TITLE2 :
TITLE3 :

Record number 286
HSC : 85474 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8269
TITLE1 : SWOG 8269 - CONCURRENT CHEMO-RADIOTHERAPY FOR LIMITED SMALL CELL CARCINOMA OF
TITLE2 : THE LUNG, PHASE II
TITLE3 :

Record number 287
HSC : 85476 HURO :

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SITE      : TAMC                        CSP       : Y       SE        :
ISOTOPE   :                             RT        : RT      OG        : OG
OGNAME    : SWOG 8590
TITLE1    : SWOG 8590 - PHASE III STUDY TO DETERMINE THE EFFECT OF COMBINING CHEMOTHERAPY
TITLE2    : WITH SURGERY AND RADIOTHERAPY FOR RESECTABLE SQUAMOUS CELL CARCINOMA OF THE
TITLE3    : HEAD AND NECK - SWOG 8590


Record number 288
HSC       : 85493                       HURO      :
SITE      : WRAMC                       CSP       : Y       SE        :
ISOTOPE   :                             RT        : RT      OG        : OG
OGNAME    : CALGB 8551
TITLE1    : CALGB 8551- MVPP, IRRADIATION, AND LATE INTENSIFICATION IN ADVANCED BULKY
TITLE2    : MEDIASTINAL HODGKIN'S DISEASE
TITLE3    :


Record number 289
HSC       : 85502                       HURO      :
SITE      : WRAMC                       CSP       : Y       SE        :
ISOTOPE   :                             RT        : XR      OG        :
OGNAME    :
TITLE1    : COMPARISON OF PREGNANCY RATES USING OIL-BASED AND WATER-BASED CONTRAST MEDIUM
TITLE2    : IN THE EVALUATION OF TUBAL PATENCY
TITLE3    :


Record number 290
HSC       : 85503                       HURO      :
SITE      : WRAMC                       CSP       : Y       SE        : SE
ISOTOPE   : I 123                       RT        :         OG        :
OGNAME    :
TITLE1    : I-123 IOFETAMINE IMAGING OF THE BRAIN
TITLE2    :
TITLE3    :


Record number 291
HSC       : 85505                       HURO      :
SITE      : FAMC                        CSP       : Y       SE        :
ISOTOPE   :                             RT        : RT      OG        : OG
OGNAME    : SWOG 8590
TITLE1    : SWOG 8590 - PHASE III STUDY TO DETERMINE THE EFFECT OF COMBINING CHEMOTHERAPY
TITLE2    : WITH SURGERY AND RADIOTHERAPY FOR RESECTABLE SQUAMOUS CELL CARCINOMA OF THE
TITLE3    : HEAD AND NECK - SWOG 8590


Record number 292
HSC       : 85530                       HURO      :
SITE      : MAMC                        CSP       : Y       SE        :
ISOTOPE   :                             RT        : RT      OG        : OG
OGNAME    : SWOG 8460
TITLE1    : SWOG 8460 - COMBINATION CHEMOTHERAPY (COPE) AND RADIATION THERAPY FOR
TITLE2    : EXTENSIVE SMALL CELL LUNG CANCER - SWOG 8460
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TITLE3 :

Record number 293
HSC : 85541 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : AN EVALUATION OF RADIOGRAPHIC AND ELECTRONIC METHODS FOR LOCATING THE APICAL
TITLE2 : TERMINUS OF ROOT CANALS
TITLE3 :

Record number 294
HSC : 85551 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8493
TITLE1 : SWOG 8493 - SIMULTANEOUS CIS-PLATINUM + RADIATION THERAPY COMPARED WITH
TITLE2 : STANDARD RADIATION THERAPY IN THE TREATMENT OF UNRESECTABLE SQUAMOUS OR
TITLE3 : UNDIFFERENTIATED CARCINOMA OF THE HEAD AND NECK, PHASE III, SWOG 8493

Record number 295
HSC : 85556 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 71
TITLE1 : GOG 71 - TREATMENT OF PATIENTS WITH SUB-OPTIMAL ("BULKY") STAGE IB
TITLE2 : CARCINOMA OF THE CERVIX: A RANDOMIZED COMPARISON OF RADIATION THERAPY VERSUS
TITLE3 : RADIATION THERAPY PLUS ADJUVANT EXTRAFASCIAL HYSTERECTOMY (PHASE III)

Record number 296
HSC : 85562 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 75
TITLE1 : GOG 75 - POSTOPERATIVE PELVIC RADIATION IN STAGE I & II MIXED MESODERMAL
TITLE2 : SARCOMA OF THE UTERUS
TITLE3 :

Record number 297
HSC : 85564 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8590
TITLE1 : SWOG 8590 - PHASE III STUDY TO DETERMINE THE EFFECT OF COMBINED CHEMOTHERAPY
TITLE2 : WITH SURGERY AND RADIOTHERAPY FOR RESECTABLE SQUAMOUS CELL CARCINOMA OF THE
TITLE3 : HEAD AND NECK

Record number 298
HSC : 85622 HURO :

SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8590
TITLE1 : SWOG 8590 - PHASE III STUDY TO DETERMINE THE EFFECT OF COMBINING CHEMOTHERAPY
TITLE2 : WITH SURGERY AND RADIOTHERAPY FOR RESECTABLE SQUAMOUS CELL CARCINOMA OF THE
TITLE3 : HEAD AND NECK - SWOG 8590

Record number 299
HSC : 85636 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 71
TITLE1 : GOG 71 - TREATMENT OF PATIENTS WITH SUBOPTIMAL (BULKY) STAGE IB CARCINOMA OF
TITLE2 : THE CERVIX: A RANDOMIZED COMPARISON OF RADIATION THERAPY VS. RADIATION
TITLE3 : THERAPY PLUS ADJUVANT EXTRAFASCIAL HYSTERECTOMY, PHASE III GOG 71

Record number 300
HSC : 85637 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 8314
TITLE1 : POG 8314 - TRIAL OF LOCAL IRRADIATION AND CHOMOTHERAPY VERSUS CHEMOTHERAPY
TITLE2 : ALONE FOR THE TREATMENT OF LOCALIZED NON-HODGKIN'S LYMPHOMA, PHASE III - POG
TITLE3 : 8314

Record number 301
HSC : 85657 HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8269
TITLE1 : SWOG 8269 - CONCURRENT CHEMO-RADIOTHERAPY FOR LIMITED SMALL CELL CARCINOMA OF
TITLE2 : THE LUNG, PHASE II
TITLE3 :

Record number 302
HSC : 86017 HURO :
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : NCOG5C841J
TITLE1 : NCOG 5C841J - PHASE II STUDY OF INFUSION CHEMOTHERAPY (5-FU, MITOMYCIN C,
TITLE2 : CISPLATIN) AND RADIOTHERAPY FOR ADVANCED CARCINOMA OF THE CERVIX
TITLE3 :

Record number 303
HSC : 86028 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 8346
TITLE1 : POG 8346 - COMPREHENSIVE THERAPY FOR EWING'S SARCOMA: TAILORED VERSUS
TITLE2 : STANDARD RADIATION THERAPY, PHASE III - POG 8346

TITLE3 :

Record number 304
HSC : 86041 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : ASSESSMENT OF THE VALUE OF BRAIN SCANS (BS) AND COMPUTERIZED AXIAL TOMOGRAPH
TITLE2 : (CT SCANS) IN THE MANAGEMENT OF PATIENTS WITH TRANSIENT ISCHEMIC ATTACKS
TITLE3 : (TIAS) AND CEREBRAL INFARCTS WITH TRANSIENT SIGNS (CITS)

Record number 305
HSC : 86058 HURO :
SITE : LAMC CSP : Y SE : SE
ISOTOPE : IN 111 RT : OG :
OGNAME :
TITLE1 : EVALUATION OF INDIUM III OXINE LABELED AUTOLOGOUS LEUKOCYTES IN LOCALIZATION
TITLE2 : OF INFLAMMATORY PROCESSES
TITLE3 :

Record number 306
HSC : 86068 HURO :
SITE : MAMC CSP : Y SE :
TOPE : RT : XR OG :
OGNAME :
TITLE1 : CT SCANNING, CT MYELOGRAPHY, AND MAGNETIC RESONANCE IMAGING IN THE DIAGNOSIS
TITLE2 : OF THE METASTASIS TO THE AXIAL SPINE
TITLE3 :

Record number 307
HSC : 86073 HURO :
SITE : LAMC CSP : Y SE : SE
ISOTOPE : I 125 RT : RT OG : OG
OGNAME : NCOG 70851
TITLE1 : NCOG 70-85-1 - RANDOMIZED PHASE III STUDY OF HEAVY CHARGED PARTICLE RADIOTHERAP
TITLE2 : Y VS. IODINE (125-i) PLAQUE RADIOTHERAPY IN THE TREATMENT OF LOCALIZED UVEAL
TITLE3 : MELANOMA - NCOG 70-85-1

Record number 308
HSC : 86115 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 8314
TITLE1 : POG 8314 - TRIAL OF LOCAL IRRADIATION AND CHEMOTHERAPY VERSUS CHEMOTHERAPY
TITLE2 : ALONE FOR THE TREATMENT OF LOCALIZED NON-HODGKIN'S LYMPHOMA
TITLE3 :

Record number 309
HSC : 86119 HURO :

SITE : WBAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : DIAGNOSIS OF DIAPHRAGMATIC DISRUPTION WITH TC-99M-MACROAGGREGATED ALBUMIN
TITLE2 :
TITLE3 :

Record number 310
HSC : 86155 HURO :
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : NCOG 4P851
TITLE1 : NCOG 4P-85-1 - CONTROLLED RANDOMIZED TRIAL COMPARING SUPERVOLTAGE EXTERNAL
TITLE2 : BEAM IRRADIAATION ALONE WITH COMBINED SUPERVOLTAGE X-RAY THERAPY AND HEAVY
TITLE3 : CHARGED PARTICLE THERAPY FOR PATIENTS WITH LOCALIZED STAGE T3-4 PROSTATIC

Record number 311
HSC : 86174 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8221
TITLE1 : SWOG 8221 - TREATMENT OF ADVANCED BLADDER CANCER WITH PREOPERATIVE IRRADIATION
TITLE2 : AND RADICAL CYSTECTOMY VS. RADICAL CYSTECTOMY ALONE, PHASE III
TITLE3 :

Record number 312
HSC : 86195 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : NBCG 18
TITLE1 : NBCG 18 - A TRIAL OF NEOADJUVANT CHEMOTHERAPY FOLLOWED BY COMBINED
TITLE2 : CISPLATINUM AND RADIATION FOR PATIENTS WITH LOCALIZED INVASIVE BLADDER CANCER
TITLE3 : UNSUITABLE FOR CYSTECTOMY, PHASE I/II

Record number 313
HSC : 86213 HURO :
SITE : WBAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : DOES COMPUTERIZED AXIAL TOMOGRAPHY CORRELATE WITH SURGICAL FINDINGS OF
TITLE2 : ESOPHAGEAL TUMOR?
TITLE3 :

Record number 314
HSC : 86276 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 82
TITLE1 : GOG 82 - A PHASE III TRIAL COMPARING COMBINATION CHEMOTHERAPY (CAP) WITH WHOLE
TITLE2 : ABDOMINAL RADIATION THERAPY FOR STAGE III OPTIMAL EPITHELIAL OVARIAN CANCER

TITLE3 : WITH NO GROSS RESIDUAL DISEASE- GOG 82

Record number 315
HSC : 86396 HURO :
SITE : WBAMC CSP : Y SE :
ISOTOPE : UNSPEC RT : OG :
OGNAME :
TITLE1 : INCIDENTAL RENAL SCANNING DURING BRAIN SCINTIGRAPHY
TITLE2 :
TITLE3 :

Record number 316
HSC : 86411 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 8426
TITLE1 : POG 8426 - INTENSIVE CHEMOTHERAPY (MOPP-ABVD) PLUS LOW-DOSE TOTAL NODAL
TITLE2 : RADIATION THERAPY IN THE TREATMENT OF STAGES IIB, III2A, IIIB, IV HODGKIN'S
TITLE3 : DISEASE IN PEDIATRIC PATIENTS, A GROUPWIDE PILOT STUDY - POG 8426

Record number 317
HSC : 86434 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 82
TITLE1 : GOG 82 - PHASE III TRIAL COMPARING COMBINATION CHEMOTHERAPY WITH WHOLE
TITLE2 : ABDOMINAL RADIATION THERAPY FOR STAGE III OPTIMAL EPITHELIAL OVARIAN CANCER
TITLE3 : WITH NO GROSS RESIDUAL DISEASE OR GROSS RESIDUAL DISEASE < OR EQUAL TO 1 CM

Record number 318
HSC : 86453 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : UNSPEC RT : OG :
OGNAME :
TITLE1 : AN EVALUATION OF SCINTIGRAPHY AS A GASTROESOPHAGEAL REFLUX TEST, AND ITS
TITLE2 : COMPARATIVE VALUE TO STANDARD TESTING METHODS IN PATIENTS WITH SYMPTOMATIC
TITLE3 : GASTROESOPHAGEAL REFLUX

Record number 319
HSC : 86461 HURO :
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : NCOG 8H851
TITLE1 : NCOG 8H-85-1 - SUBTOTAL LYMPHOID IRRADIATION (STLI) OR TOTAL LYMPHOID
TITLE2 : IRRADIATION VS INVOLVED FIELD IRRADIATION (IF) PLUS VINBLASTINE, BLEOMYCIN AND
TITLE3 : METHOTREXATE (VBM) CHEMOTHERAPY IN FAVORABLE HODGKIN'S DISEASE -NCOG 8H-85-1

Record number 320
HSC : 86468 HURO :

SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 8426
TITLE1 : POG 8426 - INTENSIVE CHEMOTHERAPY (MOPP-ABVD) PLUS LOW-DOSE TOTAL NODAL
TITLE2 : RADIATION THERAPY IN THE TREATMENT OF STAGES IIB, III2A, IIIB, IV HODGKINS
TITLE3 : DISEASE IN PEDIATRIC PATIENTS, A GROUPWIDE PILOT STUDY - POG 8426

Record number 321
HSC : 86494 HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8573
TITLE1 : SWOG 8573 - TREATMENT OF LIMITED SMALL CELL LUNG CANCER WITH CONCURRENT
TITLE2 : CHEMOTHERAPY, RADIOTHERAPY AND INTENSIFICATION WITH HIGH DOSE
TITLE3 : CYCLOPHOSPHAMIDE- SWOG 8573

Record number 322
HSC : 86497 HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : LCSG 852
TITLE1 : LCSG 852 - LUNG CANCER STUDY GROUP - PHASE II PILOT PROGRAM OF CONCURRENT
TITLE2 : CHEMOTHERAPY AND RADIATION THERAPY BEFORE SURGERY IN PATIENTS WITH STAGE III
TITLE3 : NON-SMALL CELL LUNG CANCER

Record number 323
HSC : 86520 HURO :
SITE : BAMC CSP : Y SE : SE
ISOTOPE : I 123 RT : OG :
OGNAME :
TITLE1 : EVALUATION OF I-123 IOFETAMINE HCL IN BRAIN SCANNING
TITLE2 :
TITLE3 :

Record number 324
HSC : 86539 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8573
TITLE1 : SWOG 8573 - TREATMENT OF LIMITED SMALL CELL CANCER WITH CONCURRENT
TITLE2 : CHEMOTHERAPY, RADIOTHERAPY AND INTENSIFICATION WITH HIGH DOSE CYCLOPHOSPHAMIDE
TITLE3 :

Record number 325
HSC : 86545 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 82
TITLE1 : GOG 82 - PHASE III TRIAL COMPARING COMBINATION CHEMOTHERAPY (CAP) WITH
TITLE2 : WHOLE ABDOMINAL RADIATION THERAPY FOR STAGE III OPTIMAL EPITHELIAL OVARIAN

TITLE3 : CANCER WITH NO GROSS RESIDUAL DISEASE OR GROSS RESIDUAL DISEASE LESS THAN 1 CM

Record number 326
HSC : 86546 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 8426
TITLE1 : POG 8426 - INTENSIVE CHEMOTHERAPY (MOPP-ABVD) PLUS LOW DOSE TOTAL NODAL
TITLE2 : RADIATION THERAPY IN THE TREATMENT OF STAGES IIB, IIIB, IV HODGKIN'S DISEASE
TITLE3 : IN PEDIATRIC PATIENTS, A GROUP-WIDE PILOT STUDY

Record number 327
HSC : 86571 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8596
TITLE1 : SWOG 8596 - A RANDOMIZED PHASE III INTERGROUP STUDY OF RADIATION THERAPY
TITLE2 : VERSUS CISPLATIN PLUS ETOPOSIDE PLUS BLEOMYCIN FOR ADVANCED STAGE II SEMINOMA
TITLE3 :

Record number 328
HSC : 86572 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8597
TITLE1 : SWOG 8597 - RANDOMIZED PHASE III INTERGROUP STUDY OF SUPRADIAPHRAGMATIC
TITLE2 : IRRADIATION IN STAGE II-A SEMINOMA
TITLE3 :

Record number 329
HSC : 86575 HURO :
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : NCOG 71181
TITLE1 : NCOG 71181- A PHASE II STUDY OF RADIOTHERAPY WITH CHEMOTHERAPY FOR INOPERABLE
TITLE2 : ADVANCED SQUAMOUS CELL CARCINOMA OF THE HEAD AND NECK
TITLE3 :

Record number 330
HSC : 86576 HURO :
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : NCOG 8H852
TITLE1 : NCOG 8H852 - PROCARBAZINE, L-PHENYLALANINE MUSTARD, VINBLASTINE, & TOTAL LYMPH
TITLE2 : RADIATION VS NITROGEN MUSTARD, VINCRISTINE, PROCARBAZINE, PREDNISONE &
TITLE3 : ADRIAMYCIN, BLEOMYCIN, VINBLASTINE, DTIC (MOPP/ABVD) IN ADVANCED HODGKIN'S DX

Record number 331
HSC : 86612 HURO :

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SITE      : BAMC                        CSP       : Y       SE        :
ISOTOPE   :                             RT        : RT      OG        :
OGNAME    :
TITLE1    : INTENSIVE CHEMOTHERAPY, DELAYED LOCAL IRRADIATION, TOTAL BODY IRRADIATION,
TITLE2    : TOTAL BODY IRRADIATION AND AUTOLOGOUS BONE MARROW RESCUE IN TREATING HIGH RISK
TITLE3    : EWING'S SARCOMA


Record number 332
HSC       : 86616                       HURO      :
SITE      : BAMC                        CSP       : Y       SE        :
ISOTOPE   :                             RT        : RT      OG        : OG
OGNAME    : SWOG 8510
TITLE1    : SWOG 8510 - INTRA-ARTERIAL CIS-PLATINUM AND RADIATION THERAPY IN PRIMARY BRAIN
TITLE2    : TUMORS:  A PHASE II RANDOMIZED STUDY COMPARING SEQUENTIAL AND COMBINED
TITLE3    : TREATMENTS


Record number 333
HSC       : 86619                       HURO      :
SITE      : BAMC                        CSP       : Y       SE        :
ISOTOPE   :                             RT        : RT      OG        : OG
OGNAME    : POG 8696
TITLE1    : POG 8696 - TREATMENT OF HEPATOBLASTOMA WITH SURGERY, CHEMOTHERAPY AND
TITLE2    : RADIATION THERAPY
TITLE3    :


Record number 334
HSC       : 86643                       HURO      :
SITE      : MAMC                        CSP       : Y       SE        :
ISOTOPE   :                             RT        : RT      OG        : OG
OGNAME    : SWOG 8573
TITLE1    : SWOG 8573 - TREATMENT OF LIMITED SMALL CELL LUNG CANCER WITH CONCURRENT
TITLE2    : CHEMOTHERAPY, RADIOTHERAPY, AND INTENSIFICATION WITH HIGH DOSE
TITLE3    : CYCLOPHOSPHAMIDE, PHASE II PILOT - SWOG 8573


Record number 335
HSC       : 86688                       HURO      :
SITE      : WRAMC                       CSP       : Y       SE        :
ISOTOPE   :                             RT        : RT      OG        : OG
OGNAME    : CALGB 8534
TITLE1    : CALGB 8534 - COMBINATION CHEMOTHERAPY WITH INTENSIVE ACE/PCE AND RADIATION
TITLE2    : THERAPY TO THE PRIMARY TUMOR AND PROPHYLACTIC WHOLE-BRAIN RADIATION THERAPY
TITLE3    : WITH OR WITHOUT WARFARIN IN LIMITED SMALL CELL CARCINOMA OF THE LUNG


Record number 336
HSC       : 87022                       HURO      :
SITE      : TAMC                        CSP       : Y       SE        :
ISOTOPE   :                             RT        : RT      OG        : OG
OGNAME    : SWOG 8597
TITLE1    : SWOG 8597 - RANDOMIZED PHASE III INTERGROUP STUDY OF SUPRADIAPHRAGMATIC
TITLE2    : IRRADIATION IN STAGE II-A SEMINOMA - SWOG 8597
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TITLE3 :

Record number 337
HSC : 87026 HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 82
TITLE1 : GOG 82 - PHASE III TRIAL COMPARING COMBINATION CHEMOTHERAPY WITH WHOLE
TITLE2 : ABDOMINAL RADIATION THERAPY FOR STAGE III OPTIMAL OVARIAN CANCER WITH NO GROSS
TITLE3 : RESIDUAL DISEASE - GOG 82

Record number 338
HSC : 87027 HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 85
TITLE1 : GOG 85 - COMPARISON OF HYDROXYUREA VERSUS CIS-PLATINUM AND 5FU AS AN ADJUNCT
TITLE2 : TO RADIATION THERAPY IN PATIENTS WITH ADVANCED CARCINOMA OF THE CERVIX GOG 85
TITLE3 :

Record number 339
HSC : 87046 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 85
TITLE1 : GOG 85 - RANDOMIZED COMPARISON OF HYDROXYUREA VERSUS 5-FU INFUSION AND BOLUS
TITLE2 : CISPLATIN AS AN ADJUNCT TO RADIATION THERAPY IN PATIENTS WITH STAGES II-B, III
TITLE3 : AND IV-A CARCINOMA OF THE CERVIX AND NEGATIVE PARA-AORTIC NODES - GOG 85

Record number 340
HSC : 87047 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 88
TITLE1 : GOG 88 - A RANDOMIZED STUDY OF RADICAL VULVECTOMY AND BILATERAL GROIN DISEASE
TITLE2 : DISSECTION VERSUS RADICAL VULVECTOMY AND BILATERAL GROIN RADIATION GOG 88
TITLE3 :

Record number 341
HSC : 87056 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG :
OGNAME :
TITLE1 : CHROMOSOMAL RADIOSENSITIVITY DURING THE G2 CELL CYCLE PERIOD OF NORMAL
TITLE2 : LYMPHOCYTES FROM INDIVIDUALS WITH MALIGNANT LYMPHOMA: A PILOT STUDY
TITLE3 :

Record number 342
HSC : 87103 HURO :

SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG :
OGNAME :
TITLE1 : A PROSPECTIVE EVALUATION OF TESTICULAR SHIELDING IN PREVENTING HYPOGONADISM IN
TITLE2 : PROSTATE CANCER PATIENTS RECEIVING EXTERNAL BEAM RADIOTHERAPY
TITLE3 :

Record number 343
HSC : 87105 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : UNSPEC RT : OG :
OGNAME :
TITLE1 : BONE SCAN VERSUS SPINAL MAGNETIC RESONANCE IMAGING IN THE EVALUATION OF NEW
TITLE2 : BACK PAIN IN PATIENTS WITH CANCER
TITLE3 :

Record number 344
HSC : 87113 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : RADIOGRAPHIC EVALUATION OF A NEW DEVICE TO MEASURE ANKLE RANGE OF MOTION: A
TITLE2 : PILOT STUDY
TITLE3 :

Record number 345
HSC : 87129 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8510
TITLE1 : SWOG 8510 - INTRA-ARTERIAL CIS-PLATINUM AND RADIATION THERAPY IN PRIMARY BRAIN
TITLE2 : TUMORS: A PHASE II RANDOMIZED STUDY COMPARING SEQUENTIAL AND COMBINED
TITLE3 : TREATMENTS - SWOG 8510

Record number 346
HSC : 87138 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 85
TITLE1 : GOG 85 - RANDOMIZED COMPARISON OF HYDROXYUREA VS 5-FU INFUSION AND BOLUS
TITLE2 : CISPLATIN AS ADJUNCT TO RADIATION THERAPY IN PATIENTS WITH STAGES IIB, III AND
TITLE3 : IVA CARCINOMA OF THE CERVIX AND NEGATIVE PARA-AORTIC NODES, PH III - GOG 85

Record number 347
HSC : 87242 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : PE OG :
OGNAME :
TITLE1 : INVESTIGATION OF THE YIELD OF SINGLE PHOTON EMISSION TOMOGRAPHY (SPECT) IN
TITLE2 : FOCAL EPILEPSY

TITLE3 :

Record number 348
HSC : 87243 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : UNSPEC RT : OG :
OGNAME :
TITLE1 : THE EVALUATION OF POSTPRANDIAL SUPINE REFLUX EVENTS BY SIMULTANEOUS ESOPHAGEAL
TITLE2 : MANOMETRY, ESOPHAGEAL PH MONITORING AND GASTROESOPHAGEAL SCINTISCANNING IN
TITLE3 : PATIENTS WITH PROGRESSIVE SYSTEMIC SCLEROSIS WITH SEVERE ENDOSCOPIC

Record number 349
HSC : 87251 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : COMPARISON OF PREGNANCY RATES USING OIL-BASED AND WATER-BASED CONTRAST MEDIUM
TITLE2 : IN THE EVALUATION OF TUBAL PATENCY
TITLE3 :

Record number 350
HSC : 87253 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 8631
TITLE1 : POG 8631 - MEDULLOBLASTOMA FAVORABLE PROGNOSIS: RANDOMIZED STUDY OF REDUCED
TITLE2 : DOSE IRRADIATION TO BRAIN AND SPINAL CONTENTS VERSUS STANDARD DOSE IRRADIATION
TITLE3 :

Record number 351
HSC : 87272 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8598
TITLE1 : SWOG 8598 - PROSPECTIVE TRIAL FOR LOCALIZED CANCER OF THE ESOPHAGUS: COMPARING
TITLE2 : RADIATION AS A SINGLE MODALITY TO THE COMBINATION OF RADIATION THERAPY AND
TITLE3 : CHEMOTHERAPY, PHASE III INTERGROUP

Record number 352
HSC : 87285 HURO :
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : NCOG 6G852
TITLE1 : NCOG 6G-85-2 - A RANDOMIZED PHASE III STUDY OF CONVENTIONAL FRACTIONATED
TITLE2 : RADIOTHERAPY VERSUS CONVENTIONAL FRACTIONATED RADIOTHERAPY AND
TITLE3 : BROMODEOXYURIDINE (BUDR) FOR TUMORS METASTATIC TO THE BRAIN - NCOG 6G-85-2

Record number 353
HSC : 87327 HURO :

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SITE      : WRAMC                    CSP       : Y       SE        : SE
ISOTOPE   : IN 111                   RT        :         OG        :
OGNAME    :
TITLE1    : RETROSPECTIVE REVIEW OF INDIUM-111 WHITE BLOOD CELL SCANNING IN ORTHOPAEDIC
TITLE2    : PATIENTS
TITLE3    :


Record number 354
HSC       : 87344                    HURO      :
SITE      : BAMC                     CSP       : Y       SE        :
ISOTOPE   :                          RT        : RT      OG        : OG
OGNAME    : POG 8631
TITLE1    : POG 8631 - MEDULLOBASTOMA FAVORABLE PROGNOSIS: RANDOMIZED STUDY OF REDUCED
TITLE2    : DOSE IRRADIATION TO BRAIN AND SPINAL CONTENTS VERSUS STANDARD DOSE IRRADIATION
TITLE3    :


Record number 355
HSC       : 87345                    HURO      :
SITE      : BAMC                     CSP       : Y       SE        :
ISOTOPE   :                          RT        : RT      OG        : OG
OGNAME    : POG 8633
TITLE1    : POG 8633 - THE TREATMENT OF CHILDREN 3 YEARS OF AGE WITH MALIGNANT BRAIN
TITLE2    : TUMORS USING POSTOPERATIVE CHEMOTHERAPY AND DELAYED IRRADIATION
TITLE3    :


Record number 356
HSC       : 87356                    HURO      :
SITE      : WRAMC                    CSP       : Y       SE        :
ISOTOPE   :                          RT        : XR      OG        :
OGNAME    :
TITLE1    : A RETROSPECTIVE REVIEW OF CLINICAL LABORATORY, RADIOLOGIC AND PATHOLOGIC
TITLE2    : FINDINGS IN ADULT PATIENTS WITH SPLENOMEGALY OF UNKNOWN ORIGIN
TITLE3    :


Record number 357
HSC       : 87367                    HURO      :
SITE      : TAMC                     CSP       : Y       SE        :
ISOTOPE   :                          RT        : RT      OG        : OG
OGNAME    : SWOG 8598
TITLE1    : SWOG 8598 - A PROSPECTIVE TRIAL FOR LOCALIZED CANCER OF THE ESOPHAGUS:
TITLE2    : COMPARING RADIATION AS A SINGLE MODALITY TO THE COMBINATION OF RADIATION AND
TITLE3    : CHEMOTHERAPY, PHASE III - SWOG 8598


Record number 358
HSC       : 87372                    HURO      :
SITE      : DDEAMC                   CSP       : Y       SE        : SE
ISOTOPE   : TC 99M                   RT        :         OG        :
OGNAME    :
TITLE1    : THE EFFECT OF ORAL HYDRATION ON BONE-TO-SOFT TISSUE RATIO AND SUBJECTIVE SCAN
TITLE2    : INTERPRETATION IN TC 99M MEDRONATE BONE SCANS
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TITLE3 :

Record number 359
HSC : 87378 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 94
TITLE1 : GOG 94 - A PHASE II TRUDY OF THE TREATMENT OF PAPILLARY SEROUS CARCINOMA OF
TITLE2 : THE ENDOMETRIUM STAGE I AND II AND MAXIMALLY DEBULKED ADVANCED ENDOMETRIAL
TITLE3 : CARCINOMA WITH TOTAL ABDOMINAL RADIATION THERAPY - GOG 94

Record number 360
HSC : 87429 HURO :
SITE : WBAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8510
TITLE1 : SWOG 8510 - INTRA-ARTERIAL CIS-PLATINUM AND RADIATION THERAPY IN PRIMARY BRAIN
TITLE2 : TUMORS: A PHASE II RANDOMIZED STUDY COMPARING SEQUENTIAL AND COMBINED
TITLE3 : TREATMENTS - SWOG 8510

Record number 361
HSC : 87432 HURO :
SITE : WBAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8590
TITLE1 : SWOG 8590 - PHASE III, STUDY TO DETERMINE THE EFFECT OF COMBINING CHEMOTHERAPY
TITLE2 : WITH SURGERY AND RADIOTHERAPY OF RESECTABLE SQUAMOUS CELL CARCINOMA OF THE
TITLE3 : HEAD AND NECK - SWOG 8590

Record number 362
HSC : 87447 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 8633
TITLE1 : POG 8633 - THE TREATMENT OF CHILDREN LESS THAN 3 YEARS OF AGE WITH MALIGNANT
TITLE2 : BRAIN TUMORS USING POSTOPERATIVE CHEMOTHERAPY AND DELAYED IRRADIATION, A
TITLE3 : PEDIATRIC ONCOLOGY GROUP PHASE III STUDY - POG 8633

Record number 363
HSC : 87449 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 94
TITLE1 : GOG 94 - A PHASE II STUDY OF THE TREATMENT OF PAPILLARY SEROUS CARCINOMA OF
TITLE2 : THE ENDOMETRIUM STAGE I AND II AND MAXIMALLY DEBULKED ADVANCED ENDOMETRIAL
TITLE3 : CARCINOMA WITH TOTAL ABDOMINAL RADIATION THERAPY

Record number 364
HSC : 87469 HURO :

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SITE      : FAMC                        CSP       : Y       SE        :
ISOTOPE   :                             RT        : RT      OG        : OG
OGNAME    : SWOG 8598
TITLE1    : SWOG 8598 - PROSPECTIVE TRIAL FOR LOCALIZED CANCER OF THE ESOPHAGUS:
TITLE2    : COMPARING RADIATION AS A SINGLE MODALITY TO THE COMBINATION OF RADIATION
TITLE3    : THERAPY AND CHEMOTHERAPY, PHASE III INTERGROUP - SWOG 8598


Record number 365
HSC       : 87471                       HURO      :
SITE      : BAMC                        CSP       : Y       SE        :
ISOTOPE   :                             RT        : XR      OG        :
OGNAME    :
TITLE1    : THE ROLE OF ROUTINE RADIOGRAPHS IN THE EVALUATION OF ACUTE KNEE COMPLAINTS IN
TITLE2    : EMERGENCY DEPARTMENT
TITLE3    :


Record number 366
HSC       : 87480                       HURO      :
SITE      : MAMC                        CSP       : Y       SE        :
ISOTOPE   :                             RT        : RT      OG        : OG
OGNAME    : SWOG 8597
TITLE1    : SWOG 8597 - RANDOMIZED PHASE III INTERGROUP STUDY OF SUPRADIAPHRAGMATIC
TITLE2    : IRRADIATION IN STAGE II-A SEMINOMA (RTOG 8514/INTERGROUP 0055) - SWOG 8597
TITLE3    :


Record number 367
HSC       : 87487                       HURO      :
SITE      : MAMC                        CSP       : Y       SE        :
ISOTOPE   :                             RT        : RT      OG        :
OGNAME    :
TITLE1    : HIGH DOSE CISPLATIN, VP-16 WITH OR WITHOUT RADIATION THERAPY IN ADVANCED
TITLE2    : NON-SMALL CELL LUNG CANCER
TITLE3    :


Record number 368
HSC       : 87518                       HURO      :
SITE      : WBAMC                       CSP       : Y       SE        :
ISOTOPE   :                             RT        : RT      OG        : OG
OGNAME    : SWOG 8598
TITLE1    : SWOG 8598 - PROSPECTIVE TRIAL FOR LOCALIZED CANCER OF THE ESOPHAGUS:
TITLE2    : COMPARING RADIATION AS A SINGLE MODALITY TO THE COMBINATION OF RADIATION
TITLE3    : THERAPY AND CHEMOTHERAPY, PHASE III - SWOG 8598


Record number 369
HSC       : 87542                       HURO      :
SITE      : WRAMC                       CSP       : Y       SE        :
ISOTOPE   :                             RT        : RT      OG        : OG
OGNAME    : GOG 88
TITLE1    : GOG 88 - A RANDOMIZED STUDY OF RADICAL VULVECTOMY AND BILATERAL GRAIN
TITLE2    : DISSECTION VERSUS RADICAL VULVECTOMY AND BILATERAL GRAIN RADIATION (PHASE III)
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TITLE3 : - GOG 88

Record number 370
HSC : 87543 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 8631
TITLE1 : POG 8631 - MEDULLOBLASTOMA FAVORABLE PROGNOSIS: RANDOMIZED STUDY OF REDUCED
TITLE2 : DOSE IRRADIATION TO BRAIN AND SPINAL CONTENTS VERSUS STANDARD DOSE
TITLE3 : IRRADIATION, A POG PHASE III STUDY IN CONJUNCTION WITH CCSG POG 8631

Record number 371
HSC : 87581 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 85
TITLE1 : GOG 85 - RANDOMIZED COMPARISON OF HYDROXYUREA VERSUS 5-FU INFUSION AND BOLUS
TITLE2 : CISPLATIN AS AN ADJUNCT TO RADIAITION THERPAY IN PATIENTS WITH STAGES II-B,
TITLE3 : III AND IV-A CARCINOMA OF THE CERVIX AND NEGATIVE PARA-AORTIC NODES - GOG 85

Record number 372
HSC : 87582 HURO :
SITE : BAMC CSP : Y SE :
OPE : RT : RT OG : OG
OGNAME : GOG 88
TITLE1 : GOG 88 - A RANDOMIZED STUDY OF RADICAL VULVECTOMY AND BILATERAL GROIN
TITLE2 : DISSECTION VERSUS RADICAL VULVECTOMY AND BILATERAL GROIN RADIATION - GOG 88
TITLE3 :

Record number 373
HSC : 87584 HURO :
SITE : BAMC CSP : Y SE : SE
ISOTOPE : P 32 RT : OG : OG
OGNAME : GOG 93
TITLE1 : GOG 93 - EVALUATION OF INTRAPERITONEAL CHROMIC PHOPATE SUSPENSION THERAPY
TITLE2 : FOLLOWING NEGATIVE SECOND-LOOK LAPAROTOMY FOR EPITHETAL OVARIAN CARCINOMA
TITLE3 : (STAGE III), PHASE III

Record number 374
HSC : 87643 HURO :
SITE : WRAMC CSP : Y SE : SE
ISOTOPE : P 32 RT : OG : OG
OGNAME : GOG 93
TITLE1 : GOG 93 - EVALUTION OF INTRAPERITONEAL CHROMIC PHOSPHATE SUSPENSION THERAPY
TITLE2 : FOLLOWING NEGATIVE SECOND-LOOK LAPAROTOMY FOR EPITHELIAL OVARIAN CARCINOMA
TITLE3 : (STAGE III), PHASE III

Record number 375
HSC : 87702 HURO :

SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG8696/97
TITLE1 : POG 8696/97 - TREATMENT OF HEPATOBLASTOMA (HB) WITH SURGERY, CHEMOTHERAPY, AND
TITLE2 : RADIATION THERAPY - POG 8696/97
TITLE3 :

Record number 376
HSC : 87704 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : CLINICAL ROENTGENOGRAPHIC, CT AND PATHOLOGICAL CORRELATION OF T1N0N0 LESIONS
TITLE2 : IN THE CHEST
TITLE3 :

Record number 377
HSC : 88019 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 99
TITLE1 : GOG 99 - A PHASE III RANDOMIZED STUDY OF ADJUNCTIVE RADIATION THERAPY IN
TITLE2 : INTERMEDIATE RISK ENDOMETRIAL ADENOCARCINOMA - GOG 99
TITLE3 :

Record number 378
HSC : 88037 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 94
TITLE1 : GOG 94 - TREATMENT OF STAGE III AND IV DISEASE OF ADVANCED ENDOMETRIAL
TITLE2 : CARCINOMA AND ALL STAGES OF PAPILLARY SEROUS CARCINOMA AND CLEAR CELL
TITLE3 : CARCINOMA OF THE ENDOMETRIUM WITH TOTAL ABDOMINAL RADIATION THERAPY

Record number 379
HSC : 88038 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 99
TITLE1 : GOG 99 - A PHASE III RANDOMIZED STUDY OF ADJUNCTIVE RADIATION THERAPY IN
TITLE2 : INTERMEDIATE RISK ENDOMETRIAL ADENOCARCINOMA
TITLE3 :

Record number 380
HSC : 88071 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 92
TITLE1 : GOG 92 - TREATMENT OF SELECTED PATIENTS WITH STAGE 1B CARCINOMA OF THE CERVIX
TITLE2 : AFTER RADICAL HYSTERECTOMY AND PELVIC LYMPHADENECTOMY: PELVIC RADIATION

TITLE3 : THERAPY VERSUS NO FURTHER THERAPY- GOG 92

Record number 381
HSC : 88073 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 101
TITLE1 : GOG 101 - A PHASE II EVALUATION OF PRE-OPERATION CHEMORADIATION FOR ADVANCED
TITLE2 : VULVAR CANCER - GOG 101
TITLE3 :

Record number 382
HSC : 88074 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8598
TITLE1 : SWOG 8598 - PROSPECTIVE TRIAL FOR LOCALIZED CANCER OF THE ESOPHOGUS:
TITLE2 : COMPARING RADIATION AS A SINGLE MODALITY TO THE COMBINATION OF RADIATION
TITLE3 : THERAPY AND CHEMOTHERAPY, PHASE III INTERGROUP - SWOG 8598

Record number 383
HSC : 88135 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 99
TITLE1 : GOG 99 - A PHASE III RANDOMIZED STUDY OF ADJUNCTIVE RADIATION THERAPY IN
TITLE2 : INTERMEDIATE RISK ENDOMETRIAL ADENOCARCINOMA - GOG 99
TITLE3 :

Record number 384
HSC : 88139 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : CALGB 8736
TITLE1 : CALGB 8736 - COMBINED CHEMOTHERAPY AND RADIOTHERAPY FOR STAGE III LUNG CANCER
TITLE2 : - CALGB 8736
TITLE3 :

Record number 385
HSC : 88239 HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 92
TITLE1 : GOG 92 - RADIATION THERAPY VS. NO FURTHER THERAPY IN SELECTED PATIENTS WITH
TITLE2 : STAGE 1B, INVASIVE CARCINOMA OF THE CERVIX
TITLE3 :

Record number 386
HSC : 88240 HURO :

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 TE      : FAMC                          CSP       : Y       SE        :
 TOPE    :                               RT        : RT      OG        : OG
OGNAME   : GOG 94A
TITLE1   : GOG 94A - A PHASE II STUDY OF WHOLE ABDOMINAL RADIATION FOR STAGE I AND II
TITLE2   : PAPILLARY SEROUS CARCINOMA
TITLE3   :


Record number 387
HSC      : 88267                         HURO      :
SITE     : WRAMC                         CSP       : Y       SE        : SE
ISOTOPE  : I131TL                        RT        :         OG        :
OGNAME   :
TITLE1   : POSTOPERATIVE EVALUATION OF PATIENTS WITH DIFFERENTIATED THYROID CANCER:  A
TITLE2   : STUDY COMPARING 131 I, 201TL AND MAGNETIC RESONANCE IMAGING (MRI)
TITLE3   :


Record number 388
HSC      : 88289                         HURO      :
SITE     : DDEAMC                        CSP       : Y       SE        :
ISOTOPE  : UNSPEC                        RT        :         OG        :
OGNAME   :
TITLE1   : DISTAL THIGH PAIN AND STRESS TRANSFER IN UNCEMENTED TOTAL HIP ARTHROPLASTIES.
TITLE2   : A SCINTIGRAPHIC ANALYSIS.
TITLE3   :


Record number 389
HSC      : 88324                         HURO      :
SITE     : WBAMC                         CSP       : Y       SE        : SE
ISOTOPE  : I 131                         RT        :         OG        :
OGNAME   :
TITLE1   : 131I MIBG COMPASSIONATE ONE TIME USE, IND 31,571
TITLE2   :
TITLE3   :


Record number 390
HSC      : 88326                         HURO      :
SITE     : WRAMC                         CSP       : Y       SE        : SE
ISOTOPE  : SR 89                         RT        :         OG        :
OGNAME   :
TITLE1   : STRONTIUM-SR89 CHLORIDE FOR PALLIATION OF BONE PAIN IN SUBJECTS WITH
TITLE2   : METASTATIC BONE DISEASE
TITLE3   :


Record number 391
HSC      : 88348                         HURO      :
SITE     : MAMC                          CSP       : Y       SE        :
 OPE     :                               RT        : RT      OG        : OG
OGNAME   : SWOG 8571
TITLE1   : SWOG 8571 - INDUCTION CHEMOTHERAPY WITH HIGH-DOSE CYCLOPHOSPHAMIDE FOR POOR
TITLE2   : PROGNOSIS, DISSEMINATED BREAST CANCER WITH RADIATION THERAPY IN COMPLETE
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TITLE3 : RESPONDERS, PHASE II PILOT

Record number 392
HSC : 88350 HURO :
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : NCOG 6G871
TITLE1 : NCOG 6G-87-1 (NCI #T86-0226) - A PHASE III STUDY OF NO THERAPY VS. RADIATION
TITLE2 : THERAPY VS. EFLORNITHINE (DFMO) PLUS METHYLBISGUANY-HYDRAZONE (MGBG) FOR
TITLE3 : NON-ENHANCING MODERATELY AND MILDLY ANAPLASTIC GLIOMAS OF THE BRAIN

Record number 393
HSC : 88352 HURO :
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : NSABP R-02
TITLE1 : NSABP R-02 - COMPARE ADJUVANT METHYLCCNU, VINCRISTINE, 5-FLUOROURCIL (MOF)
TITLE2 : WITH AND WITHOUT RADIATION TO ADJUVANT LEUCOVORIN AND 5-FLUOROURCIL(LV-F-FU)
TITLE3 : WITH AND WITHOUT RADIATION IN PATIENTS WITH DUKES' B AND C CARCINOMA OF RECTUM

Record number 394
HSC : 88398 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 8638
TITLE1 : POG 8638 - RANDOMIZED PHASE II STUDY OF CARBOPLATIN (CBDCA) VS CHIP IN THE TREA
TITLE2 : TMENT OF CHILDREN WITH PROGRESSIVE OR RECURRENT BRAIN TUMORS
TITLE3 :

Record number 395
HSC : 88455 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG8696/97
TITLE1 : POG 8696/97: TREATMENT OF HEPATOBLASTOMA (HB) WITH SURGERY, CHEMOTHERAPY, AND
TITLE2 : RADIATION THERAPY
TITLE3 :

Record number 396
HSC : 88471 HURO :
SITE : FAMC CSP : Y SE : SE
ISOTOPE : P 32 RT : OG : OG
OGNAME : GOG 93
TITLE1 : GOG 93 - EVALUATION OF INTRAPERITONEAL CHROMIC PHOSPHATE AFTER NEGATIVE
TITLE2 : SECOND-LOOK LAPAROTOMY IN OVARIAN CARCINOMA (STAGE III), PHASE III
TITLE3 :

Record number 397
HSC : 88472 HURO :

SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 99
TITLE1 : GOG 99 - ADJUNCTIVE RADIATION THERAPY IN INTERMEDIATE RISK ENDOMETRIAL
TITLE2 : CARCINOMA
TITLE3 :

Record number 398
HSC : 88482 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : CLINICAL AND RADIOGRAPHIC EVALUATION OF BASE WEDGE OSTEOTOMIES OF THE FIRST
TITLE2 : METATARSAL
TITLE3 :

Record number 399
HSC : 88504 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : INVESTIGATION INTO THYROID FUNCTION ABNORMALITY ASSOCIATED WITH HEXABRIX, A
TITLE2 : NEW INTRAVENOUS IODINE CONTAINING CONTRAST AGENT
TITLE3 :

Record number 400
HSC : 88520 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8736
TITLE1 : SWOG 8736 - TREATMENT OF LOCALIZED HON-HODGKIN'S LYMPHOMA: COMPARISON OF
TITLE2 : CHEMOTHERAPY (CHOP) TO CHEMOTHERAPY PLUS RADIATION THERAPY
TITLE3 :

Record number 401
HSC : 88527 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : OG : OG
OGNAME :
TITLE1 : MULTI-CENTER RANDOMIZED TRIAL OF ADJUVANT CISPLATIN/BLEOMYCIN PLUS WHOLE
TITLE2 : PELVIS IRRADIATION VERSUS CISPLATIN/BLEOMYCIN ALONE IN HIGH RISK STAGE IB AND
TITLE3 : IIA CARCINOMA OF THE CERVIX

Record number 402
HSC : 88530 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 8725
TITLE1 : POG 8725 - RANDOMIZED INTENSIVE CHEMOTHERAPY (MOPP/ABVD) + LOW DOSE TOTAL
TITLE2 : NODAL RADIATION THERAPY IN TREATMENT OF STAGES IIB, IIIA2, IIIB, IV HODGKIN'S

TITLE3 : DISEASE IN PEDIATRIC PATIENTS - A PEDIATRIC ONCOLOGY GROUP PHASE III STUDY

Record number 403
HSC : 88555 HURO :
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : RTOG 85-31
TITLE1 : RTOG 85-31 - PHASE III STUDY OF ZOLADEX ADJUVANT TO RADIOTHERAPY IN
TITLE2 : UNFAVORABLE PROGNOSIS CARCINOMA OF THE PROSTATE
TITLE3 :

Record number 404
HSC : 88570 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8736
TITLE1 : SWOG 8736 - TREATMENT OF LOCALIZED NON-HODGKIN'S LYMPHOMA: COMPARISON OF
TITLE2 : CHEMOTHERAPY (CHOP) TO CHEMOTHERAPY PLUS RADIATION THERAPY
TITLE3 :

Record number 405
HSC : 88597 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG :
OGNAME :
TITLE1 : A PROSPECTIVE ANALYSIS OF CARDIAC CHANGES RELATED TO RADIATION THERAPY
TITLE2 :
TITLE3 :

Record number 406
HSC : 88600 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8700
TITLE1 : SWOG 8700 - CONSOLIDATION THERAPY WITH HIGH-DOSE CYCLOPHOSPHAMIDE AND TOTAL
TITLE2 : BODY IRRADIATION, FOLLOWED BY AUTOLOGOUS MARROW INFUSION IN METASTATIC BREAST
TITLE3 : CANCER

Record number 407
HSC : 88604 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8733
TITLE1 : SWOG 8733 - EVALUATIONS OF OPERABLE BLADDER CANCER PATIENTS WITH PREOPERATIVE
TITLE2 : IRRADIATION + 5FU ALONE, PHASE II, A PILOT STUDY FOR PATIENTS INELIGIBLE FOR
TITLE3 : SWOG 8710

Record number 408
HSC : 88608 HURO :

SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 8725
TITLE1 : POG 8725 - RANDOMIZED STUDY OF INTENSIVE CHEMOTHERAPY (MOPP/ABVD) +/- LOW DOSE
TITLE2 : TOTAL NODAL RADIATION THERAPY IN THE TREATMENT OF STAGES IIB, IIIA2, IIIB, AND
TITLE3 : IV HODGKINS DISEASE IN PEDIATRIC PATIENTS

Record number 409
HSC : 88613 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 8833
TITLE1 : POG 8833 - PRE-RADIATION CHEMOTHERAPY IN THE TREATMENT OF CHILDREN WITH BRAIN
TITLE2 : STEM TUMORS - A PHASE II STUDY
TITLE3 :

Record number 410
HSC : 88622 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : CALGB 8831
TITLE1 : CALGB 8831 - COMBINED CHEMOTHERAPY AND RADIOTHERAPY FOR STAGE III LUNG CANCER
TITLE2 :
TITLE3 :

Record number 411
HSC : 89005 HURO :
SITE : DDEAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : STRESS RADIOGRAPHY IN THE DETECTION OF SHOULDER INSTABILITY
TITLE2 :
TITLE3 :

Record number 412
HSC : 89040 HURO :
SITE : BAMC CSP : Y SE : SE
ISOTOPE : I 131 RT : OG :
OGNAME :
TITLE1 : EVALUATION OF 131 I-MIBG (131 I-META-IDOBENZYLGRANIDINE SULFATE) IN PATIENTS
TITLE2 : SUSPECTED OF HAVING PHENOCHROMOCYTOMA, PARAGANGLIOMA OR MEDULLARY HYPERPLASIA
TITLE3 :

Record number 413
HSC : 89074 HURO :
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8598
TITLE1 : RTOG 85-01 - PHASE III PROSPECTIVE TRIAL FOR LOCALIZED CANCER OF THE
TITLE2 : ESOPHAGUS: COMPARING RADIATION AS A SINGLE MODALITY TO THE COMBINATION OF

TITLE3 : RADIATION THERAPY AND CHEMOTHERAPY - SWOG 8598

Record number 414
HSC : 89075 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8805
TITLE1 : SWOG 8805 - NEOADJUVANT CISPLATIN AND VP-16 PLUS CONCURRENT CHEST AND BRAIN
TITLE2 : IRRADIATION FOR PATIENTS WITH STATE III NON-SMALL CELL LUNG CARCINOMA
TITLE3 :

Record number 415
HSC : 89080 HURO :
SITE : DDEAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : ASSESSMENT OF SUBCLINICAL CONTRAST NEPHROPATHY USING URINARY ADENOSINE
TITLE2 : DEAMINASE BINDING PROTEIN
TITLE3 :

Record number 416
HSC : 89088 HURO :
SITE : WRAMC CSP : Y SE : SE
ISOTOPE : TC IN RT : OG :
OGNAME :
TITLE1 : EVALUATION OF SPINAL INSTRUMENTATION IN POSTERIOR SPINAL FUSION UTILIZING
TITLE2 : RADIONUCLIDE IMAGING (USING TC 99M AND IN 111-MDP)
TITLE3 :

Record number 417
HSC : 89089 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : UNSPEC RT : OG :
OGNAME :
TITLE1 : A PILOT STUDY: EVALUATION OF THE EFFECTS OF TREATMENT WITH 0.075 TOPICAL
TITLE2 : CAPSAICIN IN PATIENTS WITH REFLEX SYMPATHETIC DYSTROPHY USING THREE PHASE BONE
TITLE3 : SCINTIGRAPHY (PROTOCOL NO. 1015-890-03

Record number 418
HSC : 89109 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8794
TITLE1 : SWOG 8794 - TREATMENT OF PATHOLOGIC STAGE C CARCINOMA OF THE PROSTATE WITH
TITLE2 : ADJUVANT RADIOTHERAPY
TITLE3 :

Record number 419
HSC : 89138 HURO :

SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8896
TITLE1 : SWOG 8896 - SURGICAL ADJUVANT THERAPY OF RECTAL CARCINOMA: A CONTROLLED
TITLE2 : EVALUATION OF A: PROTRACTED INFUSION OF 5-FLUOROURACIL AS A RADIATION ENHANCER
TITLE3 : AND B: 5-FU PLUS METHYL-CCNU CHEMOTHERAPY

Record number 420
HSC : 89147 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : CLINICAL UTILITY OF POSTTHORACENTESIS CHEST ROENTGENOGRAPHY
TITLE2 :
TITLE3 :

Record number 421
HSC : 89176 HURO :
SITE : FAMC CSP : Y SE : SE
ISOTOPE : XE RT : OG :
OGNAME :
TITLE1 : VENTILATORY EFFECTS OF TRANSTRACHEAL OXYGENATION
TITLE2 :
TITLE3 :

Record number 422
HSC : 89184 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 8725
TITLE1 : POG 8725 - RANDOMIZED STUDY OF INTENSIVE CHEMOTHERAPY (MOPP/ABVD) WITH OR
TITLE2 : WITHOUT TOTAL NODAL RADIATION THERAPY IN THE TREATMENT OF STAGES IIB, IIIA2,
TITLE3 : IIIB, IV HODGKIN'S DISEASE IN PEDIATRIC PATIENTS

Record number 423
HSC : 89195 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8736
TITLE1 : SWOG 8736 - TREATMENT OF LOCALIZED NON-HODGKIN'S LYMPHOMA: COMPARISON OF
TITLE2 : CHEMOTHERAPY (CHOP) TO CHEMOTHERAPY PLUS RADIATION THERAPY
TITLE3 :

Record number 424
HSC : 89235 HURO :
SITE : LAMC CSP : Y SE : SE
ISOTOPE : SR 89 RT : OG :
OGNAME :
TITLE1 : GEOGRAPHICALLY DISPERSED PHASE III PROTOCOL FOR STRONTIUM-89 CHLORIDE
TITLE2 : INJECTION

TITLE3 :

Record number 425
HSC : 89283 HURO :
SITE : BAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : EVALUATION OF INTERSTITIAL LYMPHOSCINTIGRAPHY WITH RADIOACTIVE TECHNETIUM
TITLE2 : ANTIMONY TRISULFIDE COLLOID (99MTC - SB2S3) FOR LYMPHOMA, INTERNAL MAMMARY AND
TITLE3 : EXCISED MALIGNANT MELANOMA LYMPHOSCINTIGRAPHY

Record number 426
HSC : 89318 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG8633/34
TITLE1 : POG 8633/34 - THE TREATMENT OF CHILDREN LESS THAN THREE YEARS OF AGE WITH
TITLE2 : MALIGNANT BRAIN TUMORS USING POSTOPERATIVE CHEMOTHERAPY AND DELAYED
TITLE3 : IRRADIATION

Record number 427
HSC : 89320 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8794
TITLE1 : SWOG 8794 - TREATMENT OF PATHOLOGIC STAGE C CARCINOMA OF THE PROSTATE WITH
TITLE2 : ADJUVANT RADIOTHERAPY
TITLE3 :

Record number 428
HSC : 89376 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : UWNG 86-01
TITLE1 : UWNG 86-01 - PHASE II STUDY OF EXTERNAL BRAIN IRRADIATION AND HYDROXYUREA
TITLE2 : FOLLOWED BY PROCARBAZINE, CCNU, AND VINCRISTINE (PCV) FOR THE TREATMENT OF
TITLE3 : PRIMARY MALIGNANT BRAIN TUMORS

Record number 429
HSC : 89406 HURO :
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : A PROSPECTIVE COMPARISON STUDY OF ARTHROGRAPHY, DOUBLE-CONTRAST COMPUTERIZED
TITLE2 : ARTHROTOMOGRAPHY, AND MAGNETIC RESONANCE IMAGING (MRI) OF THE SHOULDER
TITLE3 :

Record number 430
HSC : 89431 HURO :

SITE : WRAMC CSP : Y SE :
TOPE : RT : RT OG : OG
OGNAME : POG 8832
TITLE1 : POG 8832 - PRE-IRRADIATION COMBINATION CHEMOTHERAPY WITH CISPLATIN AND ARA-C
TITLE2 : FOR CHILDREN WITH INCOMPLETELY RESECTED SUPRATENTORIAL MALIGNANT TUMORS: A
TITLE3 : PHASE II STUDY

Record number 431
HSC : 89453 HURO :
SITE : BAMC CSP : Y SE : SE
ISOTOPE : TL 201 RT : OG :
OGNAME :
TITLE1 : ASSESSMENT OF REVASCULARIZATION VIA CORONARY ARTERY BYPASS GRAFTING BY
TITLE2 : DIPYRIDAMOLE-THALLIUM SCINTIGRAPHY
TITLE3 :

Record number 432
HSC : 89465 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 8833
TITLE1 : POG 8833 - PRE-RADIATION CHEMOTHERAPY IN THE TREATMENT OF CHILDREN WITH BRAIN
TITLE2 : STEM TUMORS - A PHASE II STUDY
TITLE3 :

Record number 433
HSC : 89517 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME :
TITLE1 : GROUP ... - A PHASE II STUDY OF SIMULTANEOUS RADIOTHERAPY AND CISPLATIN
TITLE2 : CHEMOTHERAPY FOLLOWED BY 5FU AND CISPLATIN CHEMOTHERAPY IN PATIENTS WITH
TITLE3 : LOCALLY ADVANCED INOPERABLE SQUAMOUS CELL CARCINOMA OF THE HEAD AND NECK

Record number 434
HSC : 89522 HURO :
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : NCOGD6G872
TITLE1 : NCOG D6G-87-2 - RANDOMIZED PHASE II STUDY OF EXTERNAL BRAIN IRRADIATION WITH
TITLE2 : NEON IONS FOLLOWED BY PROCARBAZINE, CCNU AND VINCRISTINE (PCV) FOR THE
TITLE3 : TREATMENT OF PRIMARY GLIOBLASTOMA MULTIFORME

Record number 435
HSC : 89523 HURO :
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : NCOG 6G822
TITLE1 : NCOG 6G-82-2 - PHASE II STUDY OF EXTERNAL BRAIN IRRADIATION AND HYDROXYUREA
TITLE2 : WITH AN INTERSTITIAL "BOOST" FOLLOWED BY PROCARBAZINE, CCNU AND VINCRISTINE

TITLE3 : (PCV) FOR THE TREATMENT OF PRIMARY BRAIN TUMORS

Record number 436

HSC	: 89581	HURO	:				
SITE	: WRAMC	CSP	: Y	SE	: SE		
ISOTOPE	: IN 111	RT	:	OG	:		
OGNAME	:						
TITLE1	: INDIUM-111 LABELED WHITE BLOOD CELL UPTAKE IN PRIMARY MUSCULOSKELETAL TUMORS						
TITLE2	:						
TITLE3	:						

Record number 437

HSC	: 89630	HURO	:				
SITE	: BAMC	CSP	: Y	SE	:		
ISOTOPE	:	RT	: RT	OG	: OG		
OGNAME	: SWOG 8805						
TITLE1	: SWOG 8805 - NEOADJUVANT CISPLATIN AND VP-16 PLUS CONCURRENT CHEST AND OPTIONAL						
TITLE2	: BRAIN IRRADIATION FOR PATIENTS WITH STAGE III NON-SMALL CELL LUNG CARCINOMA.						
TITLE3	: A PHASE II PILOT						

Record number 438

HSC	: 89632	HURO	:				
SITE	: BAMC	CSP	: Y	SE	:		
ISOTOPE	:	RT	: RT	OG	: OG		
OGNAME	: SWOG 8812						
TITLE1	: SWOG 8812 - TREATMENT OF LIMITED SMALL CELL LUNG CANCER WITH CONCURRENT						
TITLE2	: CHEMOTHERAPY, RADIOTHERAPY, WITH OR WITHOUT GM-CSF AND SUBSEQUENT						
TITLE3	: RANDOMIZATION TO MAINTENANCE INTERFERON OR NO MAINTENANCE						

Record number 439

HSC	: 89637	HURO	:				
SITE	: BAMC	CSP	: Y	SE	:		
ISOTOPE	:	RT	: RT	OG	: OG		
OGNAME	: SWOG 8892						
TITLE1	: SWOG 8892 - A STUDY OF RADIOTHERAPY WITH OR WITHOUT CONCURRENT CISPLATIN IN						
TITLE2	: PATIENTS WITH NASOPHARYNGEAL CANCER, PHASE III						
TITLE3	:						

Record number 440

HSC	: 89689	HURO	:				
SITE	: BAMC	CSP	: Y	SE	:		
ISOTOPE	:	RT	: RT	OG	: OG		
OGNAME	: POG 8832						
TITLE1	: POG 8832 - PRE-IRRADIATION COMBINATION CHEMOTHERAPY WITH CISPLATIN AND ARA-C						
TITLE2	: FOR CHILDREN WITH INCOMPLETELY-RESECTED SUPRATENTORIAL MALIGNANT TUMORS, PHASE						
TITLE3	: II						

Record number 441

HSC	: 89706	HURO	:

SITE : LAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : ASSESSMENT OF GLOMERULAR FILTRATION RATE IN INTENSIVE CARE PATIENTS WITH RENAL
TITLE2 : DYSFUNCTION USING 99TC-DTPA CLEARANCE
TITLE3 :

Record number 442
HSC : 89712 HURO :
SITE : MAMC CSP : Y SE : SE
ISOTOPE : P 32 RT : OG : OG
OGNAME : GOG 93
TITLE1 : GOG 93 - EVALUATION OF INTRAPERITONEAL CHROMIC PHOSPHATE SUSPENSION THERAPY
TITLE2 : FOLLOWING NEGATIVE SECOND-LOOK LAPAROTOMY FOR EPITHELIAL OVARIAN CARCINOMA
TITLE3 : (STAGE III), PHASE III

Record number 443
HSC : 89723 HURO :
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : NSABP B-21
TITLE1 : NSABP B-21 - A CLINICAL TRIAL TO DETERMINE THE WORTH OF TAMOXIFEN AND THE
TITLE2 : WORTH OF BREAST RADIATION IN THE MANAGEMENT OF PATIENTS WITH NODE-NEGATIVE,
TITLE3 : CLINICALLY OCCULT, INVASIVE BREAST CANCER TREATED BY LUMPECTOMY

Record number 444
HSC : 89737 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8812
TITLE1 : SWOG 8812 - TREATMENT OF LIMITED SMALL CELL LUNG CANCER WITH CONCURRENT
TITLE2 : CHEMOTHERAPY, RADIOTHERAPY, WITH OR WITHOUT GM-CSF AND SUBSEQUENT
TITLE3 : RANDOMIZATION TO MAINTENANCE INTERFERON OR NO MAINTENANCE

Record number 445
HSC : 89741 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : UWNG 88-01
TITLE1 : UWNG 88-01 - PHASE II STUDY OF HIGH DOSE METHOTREXATE AND CRANIOSPINAL
TITLE2 : IRRADIATION FOR THE TREATMENT OF PRIMARY LYMPHOMA OF THE CENTRAL NERVOUS
TITLE3 : SYSTEM

Record number 446
HSC : 89748 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : UNSPEC RT : OG :
OGNAME :
TITLE1 : THE EFFECT OF FACE MASK CPAP ON RADIONUCLIDE VENTILATION-PERFUSION
TITLE2 : SCANNING OF THE LUNG IN THE SETTING OF POST-OPERATIVE ATELECTASIS

TITLE3 :

Record number 447
HSC : 89757 HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 101
TITLE1 : GOG 101 - EVALUATION OF PREOPERATIVE CHEMORADIATION FOR ADVANCED VULVAR CANCER
TITLE2 :
TITLE3 :

Record number 448
HSC : 89782 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8892
TITLE1 : SWOG 8892 - A STUDY OF RADIOTHERAPY WITH AND WITHOUT CONCURRENT CISPLATIN IN
TITLE2 : PATIENTS WITH NASOPHARYNGEAL CANCER, PHASE III
TITLE3 :

Record number 449
HSC : 89791 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8891
TITLE1 : SWOG 8891 - LOW-GRADE GLIOMA PHASE III: SURGERY AND IMMEDIATE RADIOTHERAPY
TITLE2 : VS. SURGERY AND DELAYED RADIOTHERAPY
TITLE3 :

Record number 450
HSC : 89794 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : ACUTE SERUM POTASSIUM ELEVATION AFTER INTRAVENOUS HYPERTONIC CONTRAST IN
TITLE2 : PATIENTS WITH NORMAL, IMPAIRED, AND ABSENT RENAL FUNCTION
TITLE3 :

Record number 451
HSC : 89795 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : SHOULDER IMPINGEMENT SYNDROME: RESPONSE TO CONSERVATIVE TREATMENT AND THE
TITLE2 : PREDICTIVE VALUE OF SOME ASSOCIATED CLINICAL AND RADIOGRAPHIC FINDINGS
TITLE3 :

Record number 452
HSC : 89811 HURO :

SITE : DDEAMC CSP : Y SE :
ISOTOPE : UNSPEC RT : OG :
OGNAME :
TITLE1 : CORRELATION OF CLINICAL HIP EXAMINATION FINDINGS WITH SCINTIGRAPHIC AND
TITLE2 : RADIOGRAPHIC RESULTS IN ARMY TRAINEES WITH HIP PAIN
TITLE3 : Performed at Fort Jackson

Record number 453
HSC : 90092 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : I ? RT : OG :
OGNAME :
TITLE1 : NASAL RADIOIODINE ACTIVITY: A STUDY OF FREQUENCY, INTENSITY AND PATTERN
TITLE2 :
TITLE3 :

Record number 454
HSC : 90099 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8812
TITLE1 : SWOG 8812 - TREATMENT OF LIMITED SMALL CELL LUNG CANCER WITH CONCURRENT
TITLE2 : CHEMOTHERAPY, RADIOTHERAPY, WITH OR WITHOUT GM-CSF AND SUBSEQUENT
TITLE3 : RANDOMIZATION TO MAINTENANCE INTERFERON OR NO MAINTENANCE

Record number 455
HSC : 90103 HURO :
SITE : DDEAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : TECHNETIUM 99M ANTIMONY TRISULFIDE COLLOID FOR INVESTIGATION OF LYMPHATIC
TITLE2 : DRAINAGE
TITLE3 :

Record number 456
HSC : 90129 HURO :
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8736
TITLE1 : SWOG 8736 - TREATMENT OF LOCALIZED NON-HODGKIN'S LYMPHOMA: COMPARISON OF
TITLE2 : CHEMOTHERAPY (CHOP) TO CHEMOTHERAPY PLUS RADIATION THERAPY
TITLE3 :

Record number 457
HSC : 90144 HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 109
TITLE1 : GOG 109 - 5-FU INFUSION AND BOLUS CISPLATIN AS ADJUNCT TO RADIATION THERAPY VS
TITLE2 : RADIATION ALONE IN SELECTED PATIENTS WITH STAGE 1A-2, 1B OR 2A CARCINOMA OF

TITLE3 : THE CERVIX FOLLOWING RADICAL HYSTERECTOMY AND NODDE DISSECTION.

Record number 458
HSC : 90249 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8999
TITLE1 : SWOG 8999 - EVALUATION OF RADIATION TREATMENT FOLLOWING SURGICAL RESECTION OF
TITLE2 : SOLITARY BRAIN METASTASIS
TITLE3 :

Record number 459
HSC : 90280 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 8801
TITLE1 : GOG 8801 - A PHASE I EVALUATION OF MULTIPLE DAILY FRACTION RADIATION AND
TITLE2 : HYDROXYUREA IN PATIENTS WITH STAGE IIB, III, AND IVA CARCINOMA OF THE CERVIX
TITLE3 : WITH NEGATIVE PARA-AORTIC NODES

Record number 460
HSC : 90281 HURO :
SITE : WRAMC CSP : Y SE :
OPE : RT : RT OG : OG
OGNAME : GOG 8901
TITLE1 : GOG 8901 - A PHASE I EVALUATION OF MULTIPLE DAILY FRACTION RADIATION AND
TITLE2 : 5-FLUOROURACIL PLUS CISPLATIN IN STAGE IIB, III, AND IVA CARCINOMA OF THE
TITLE3 : CERVIX WITH NEGATIVE PARA-AORTIC NODES

Record number 461
HSC : 90305 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : PROSTAGLANDIN EXCRETION IN RADIOCONTRAST INDUCED ACUTE RENAL FAILURE
TITLE2 :
TITLE3 :

Record number 462
HSC : 90322 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG :
OGNAME :
TITLE1 : A CONTROLLED, COVARIATE ANALYSIS OF RADICAL PROSTATECTOMY VERSUS RADIATION
TITLE2 : THERAPY FOR ADENOCARCINOMA OF THE PROSTATE
TITLE3 :

Record number 463
HSC : 90407 HURO :

SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 8725
TITLE1 : POG 8725 - RANDOMIZED STUDY OF INTENSIVE CHEMOTHERAPY (MOPP/ABVD) +- LOW DOSE
TITLE2 : TOTAL NODAL RADIATION THERAPY IN THE TREATMENT OF STAGES IIB, IIIA2, IIIB, IV
TITLE3 : HODGKIN'S DISEASE IN PEDIATRIC PATIENTS

Record number 464
HSC : 90425 HURO :
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : RTOG 88-08
TITLE1 : RTOG 88-08/ECOG EST 4588 - PHASE III STUDY OF RADIATION THERAPY ALONE OR IN
TITLE2 : COMBINATION WITH CHEMOTHERAPY FOR PATIENTS WITH NON-SMALL CELL LUNG CANCER
TITLE3 :

Record number 465
HSC : 90430 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG :
OGNAME :
TITLE1 : MAGNETIC RESONANCE IMAGING (MRI) CHARACTERISTICS FOLLOWING SURGICAL EXCISION
TITLE2 : OF SOFT TISSUE SARCOMAS AND RADIATION THERAPY IN DETERMINING "NORMAL"
TITLE3 : POSTSURGICAL AND RADIATION CHANGES FROM RECURRENT DISEASE: RETROSPECTIVE STUDY

Record number 466
HSC : 90442 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 8832
TITLE1 : POG 8832 - PRE-IRRADIATION CHEMOTHERAPY IN SUPRATENTORIAL MALIGNANT TUMORS
TITLE2 :
TITLE3 :

Record number 467
HSC : 90457 HURO :
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : RTOG 87-04
TITLE1 : RTOG 87-04/ECOG 1289 - A PHASE III RANDOMIZED STUDY EMPLOYING 5 FLUOROURACIL
TITLE2 : AND RADIOTHERAPY VERSUS 5 FLUOROURACIL, MITOMYCIN-C AND RADIOTHERAPY IN
TITLE3 : CARCINOMA OF THE ANAL CANAL

Record number 468
HSC : 90470 HURO :
SITE : DDEAMC CSP : Y SE :
ISOTOPE : RT : RT OG :
OGNAME :
TITLE1 : THE RELATIONSHIP OF THE SENSE OF COHERENCE AND HARDINESS TO THE NUTRITIONAL
TITLE2 : STATUS OF ANORECTIC HEAD AND NECK CANCER PATIENTS CURRENTLY UNDERGOING

TITLE3 : RADIATION THERAPY

Record number 469
HSC : 90471 HURO :
SITE : DDEAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : IN VITRO LABELING OF RED BLOOD CELLS WITH TECHNETIUM 99 UTILIZING A
TITLE2 : PRE-PREPARED "KIT"
TITLE3 :

Record number 470
HSC : 90494 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8890
TITLE1 : SWOG 8890 - RADICAL PROSTATECTOMY VERSUS RADIATION THERAPY FOR CLINICAL STAGE
TITLE2 : A2 AND B ADENOCARCINOMA OF THE PROSTATE (NO MO)
TITLE3 :

Record number 471
HSC : 90516 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG :
OGNAME :
TITLE1 : THE RELATIONSHIP OF THE SENSE OF COHERENCE AND HARDINESS TO THE NUTRITIONAL
TITLE2 : STATUS OF ANORECTIC HEAD AND NECK CANCER PATIENTS CURRENTLY UNDERGOING
TITLE3 : RADIATION THERAPY

Record number 472
HSC : 90546 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : RADIOLOGIC EVALUATION OF CERVICAL SPINE TRAUMA: A SELECTIVE APPROACH
TITLE2 :
TITLE3 :

Record number 473
HSC : 90580 HURO :
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8957
TITLE1 : SWOG 8957 - FEASIBILITY TRIAL OF POST-OPERATIVE RADIOTHERAPY PLUS CISPLATIN
TITLE2 : FOLLOWED BY THREE COURSES OF 5-FU PLUS CISPLATIN IN PATIENTS WITH RESECTED
TITLE3 : HEAD AND NECK CANCER, PHASE II PILOT

Record number 474
HSC : 90582 HURO :

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SITE      : LAMC                        CSP       : Y       SE        :
   TOPE   :                             RT        : RT      OG        :
OGNAME    :
TITLE1    : THE RELATIONSHIP OF THE SENSE OF COHERENCE AND HARDINESS TO THE NUTRITIONAL
TITLE2    : STATUS OF ANORECTIC HEAD AND NECK CANCER PATIENTS CURRENTLY UNDERGOING
TITLE3    : RADIATION THERAPY


Record number 475
HSC       : 90602                       HURO      :
SITE      : FAMC                        CSP       : Y       SE        :
ISOTOPE   : UNSPEC                      RT        :         OG        :
OGNAME    :
TITLE1    : COMPARISON OF LIVER BIOPSY VERSUS NON-INVASIVE TESTING USING HEPATIC
TITLE2    : ULTRASOUND, RADIONUCLIDE SCANNING, ERYTHROCYTE FOLATE LEVELS AND METHOTREXATE
TITLE3    : LEVELS FOR THE DETERMINATION OF METHOTREXATE-INDUCED HEPATOTOXICITY


Record number 476
HSC       : 90615                       HURO      :
SITE      : BAMC                        CSP       : Y       SE        :
ISOTOPE   :                             RT        : RT      OG        : OG
OGNAME    : SWOG 8957
TITLE1    : SWOG 8957 - FEASIBILITY TRIAL OF POST-OPERATIVE RADIOTHERAPY AND CISPLATIN
TITLE2    : FOLLOWED BY THREE COURSES OF 5-FU AND CISPLATIN IN PATIENTS WITH RESECTED HEAD
TITLE3    : AND NECK CANCER, PHASE II PILOT


Record number 477
HSC       : 90617                       HURO      :
SITE      : BAMC                        CSP       : Y       SE        :
ISOTOPE   :                             RT        : RT      OG        : OG
OGNAME    : GOG 85
TITLE1    : GOG 85 - A RANDOMIZED COMPARISON OF HYDROXYUREA VERSUS 5-FU INFUSION AND BOLUS
TITLE2    : CISPLATIN AS AN ADJUNCT TO RADIATION THERAPY IN PATIENTS WITH STAGES II-B, III
TITLE3    : AND IV-A CARCINOMA OF THE CERVIX AND NEGATIVE PARA-AORTIC NODES


Record number 478
HSC       : 90618                       HURO      :
SITE      : BAMC                        CSP       : Y       SE        :
ISOTOPE   :                             RT        : RT      OG        : OG
OGNAME    : GOG 92
TITLE1    : GOG 92 - TREATMENT OF SELECTED PATIENTS WITH STAGE IB CARCINOMA OF THE CERVIX
TITLE2    : AFTER RADICAL HYSTERECTOMY AND PELVIC LYMPHADENECTOMY: PELVIC RADIATION
TITLE3    : THERAPY VERSUS NO FURTHER THERAPY


Record number 479
HSC       : 90619                       HURO      :
SITE      : BAMC                        CSP       : Y       SE        : SE
   OPE    : P 32                        RT        :         OG        : OG
OGNAME    : GOG 93
TITLE1    : GOG 93 - EVALUATION OF INTRAPERITONEAL CHROMIC PROSPHATE SUSPENSION
TITLE2    :
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TITLE3 :

Record number 480
HSC : 90631 HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8736
TITLE1 : SWOG 8736 - TREATMENT OF LOCALIZED NON-HODGKIN'S LYMPHOMA: COMPARISON OF
TITLE2 : CHEMOTHERAPY (CHOP) TO CHEMOTHERAPY PLUS RADIATION THERAPY
TITLE3 :

Record number 481
HSC : 90633 HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8794
TITLE1 : SWOG 8794 - TREATMENT OF PATHOLOGIC STAGE C CARCINOMA OF THE PROSTATE WITH
TITLE2 : ADJUVANT RADIOTHERAPY
TITLE3 :

Record number 482
HSC : 90637 HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8836
TITLE1 : SWOG 8836 - A STUDY OF CHEST IRRADIATION PLUS CONCURRENT DAILY LOW-DOSE
TITLE2 : CISPLATIN FOLLOWED BY HIGH-DOSE CONSOLIDATION FOR LOCALLY ADVANCED NON-SMALL
TITLE3 : CELL LUNG CANCER

Record number 483
HSC : 90638 HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8896
TITLE1 : SWOG 8896 - INTERGROUP, SURGICAL ADJUVANT THERAPY OF RECTAL CARCINOMA: A
TITLE2 : CONTROLLED EVALUATION OF (A) PROTRACTED INFUSION OF 5-FLUOROURACIL AS A
TITLE3 : RADIATION ENHANCER AND (B) 5-FLUOROURACIL PLUS METHYL-CCNU CHEMOTHERAPY

Record number 484
HSC : 90665 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8896
TITLE1 : SWOG 8896 - PROTOCOL FOR SURGICAL ADJUVANT THERAPY OF RECTAL CARCINOMA: A
TITLE2 : CONTROLLED EVALUATION OF A) PROTRACTED INFUSION 5-FU AS A RADIATION ENHANCER,
TITLE3 : AND B) 5-FU PLUS METHYL-CCNU CHEMOTHERAPY

Record number 485
HSC : 90666 HURO :

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SITE      : TAMC                        CSP       : Y       SE        :
   TOPE   :                             RT        : RT      OG        : OG
OGNAME    : SWOG 8957
TITLE1    : SWOG 8957 - FEASIBILITY TRIAL OF POST-OPERATIVE RADIOTHERAPY PLUS CISPLATIN
TITLE2    : FOLLOWED BY THREE COURSES OF 5-FU PLUS CISPLATIN IN PATIENTS WITH RESECTED
TITLE3    : HEAD AND NECK CANCER, PHASE II


Record number 486
HSC       : 90673                       HURO      :
SITE      : FAMC                        CSP       : Y       SE        :
ISOTOPE   :                             RT        : RT      OG        : OG
OGNAME    : SWOG 8892
TITLE1    : SWOG 8892 - A STUDY OF RADIOTHERAPY WITH OR WITHOUT CONCURRENT CISPLATIN IN
TITLE2    : PATIENTS WITH NASOPHARYNGEAL CANCER, PHASE III
TITLE3    :


Record number 487
HSC       : 90676                       HURO      :
SITE      : FAMC                        CSP       : Y       SE        :
ISOTOPE   :                             RT        : RT      OG        : OG
OGNAME    : SWOG 8812
TITLE1    : SWOG 8812 - TREATMENT OF LIMITED SMALL CELL LUNG CANCER WITH CONCURRENT
TITLE2    : CHEMOTHERAPY, RADIOTHERAPY, WITH OR WITHOUT GM-CSF AND SUBSEQUENT
TITLE3    : RANDOMIZATION TO MAINTENANCE INTERFERON OR NO MAINTENANCE


Record number 488
HSC       : 90688                       HURO      :
SITE      : WRAMC                       CSP       : Y       SE        :
ISOTOPE   :                             RT        : RT      OG        : OG
OGNAME    : ECOG 9887
TITLE1    : ECOG-EST 9887 - A PHASE III TRIAL OF TREATMENT OF PATHOLOGIC STAGE C CARCINOMA
TITLE2    : OF THE PROSTATE WITH ADJUVANT RADIOTHERAPY
TITLE3    :


Record number 489
HSC       : 90689                       HURO      :
SITE      : WRAMC                       CSP       : Y       SE        :
ISOTOPE   :                             RT        : RT      OG        : OG
OGNAME    : POG 9031
TITLE1    : POG 9031 - THE TREATMENT OF CHILDREN WITH HIGH STAGE MEDULLOBLASTOMA:
TITLE2    : CISPLATIN/VP-16 PRE-VS POST-IRRADIATION:  A POG PHASE III STUDY
TITLE3    :


Record number 490
HSC       : 90721                       HURO      :
SITE      : BAMC                        CSP       : Y       SE        :
   OPE    :                             RT        : RT      OG        : OG
OGNAME    : SWOG 8942
TITLE1    : SWOG 8942 - HIGH DOSE ETOPOSIDE, CYCLOPHOSPHAMIDE AND EITHER FRACTIONATED
TITLE2    : TOTAL BODY IRRADIATION OR CARMUSTINE COMBINED WITH AUTOLOGOUS BONE MARROW
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TITLE3 : RESCUE FOR REFRACTORY OR RELAPSED NON-HODGKIN'S LYMPHOMA

Record number 491
HSC : 90722 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 9011
TITLE1 : SWOG 9011 - HIGH DOSE ETOPOSIDE, CYCLOPHOSPHAMIDE, AND EITHER FRACTIONATED
TITLE2 : TOTAL BODY IRRADIATION OR CARMUSTINE COMBINED WITH AUTOLOGOUS BONE MARROW
TITLE3 : RESCUE FOR REFRACTORY OR RELAPSED HODGKIN'S DISEASE

Record number 492
HSC : 90724 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 94
TITLE1 : GOG 94 - A PHASE II STUDY OF WHOLE ABDOMINAL RADIATION IN STAGE I AND II
TITLE2 : PAPILLARY SEROUS CARCINOMA
TITLE3 :

Record number 493
HSC : 90726 HURO :
SITE : BAMC CSP : Y SE :
OPE : RT : RT OG : OG
OGNAME : GOG 99
TITLE1 : GOG 99 - A PHASE III RANDOMIZED STUDY OF SURGERY VS. SURGERY PLUS ADJUNCTIVE
TITLE2 : RADIATION THERAPY IN INTERMEDIATE RISK ENDOMETRIAL ADENOCARCINOMA
TITLE3 :

Record number 494
HSC : 90728 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 9031
TITLE1 : POG 9031 - TREATMENT OF CHILDREN WITH HIGH-STAGE MEDULLOBLASTOMA:
TITLE2 : CISPLATIN/VP-16 PRE- VS POST-IRRADIATION
TITLE3 :

Record number 495
HSC : 91060 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8892
TITLE1 : SWOG 8892 (EST-2388, RTOG-8817, INT-0099) - A STUDY OF RADIOTHERAPY WITH OR
TITLE2 : WITHOUT CONCURRENT CISPLATIN IN PATIENTS WITH NASOPHARYNGEAL CANCER, PHASE III
TITLE3 :

Record number 496
HSC : 91112 HURO :

SITE : LAMC CSP : Y SE : SE
ISOTOPE : SR 89 RT : OG :
OGNAME :
TITLE1 : USE OF STRONTIUM-89 CHLORIDE: A PATIENT WITH PROSTATE CANCER WITH METASTASES
TITLE2 : TO BONE
TITLE3 :

Record number 497
HSC : 91114 HURO :
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : RTOG 8815
TITLE1 : RTOG 8815 - CISPLATIN PLUS ETOPOSIDE COMBINED WITH STANDARD FRACTIONATION
TITLE2 : THORACIC RADIOTHERAPY VS CISPLATIN PLUS ETOPOSIDE COMBINED WITH MULTIPLE DAILY
TITLE3 : FRACTIONATED THORACIC RADIOTHERAPY FOR LIMITED STAGE SMALL CELL LUNG CANCER

Record number 498
HSC : 91115 HURO :
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : RTOG 8903
TITLE1 : RTOG 8903 - THE ROLE OF NEOADJUVANT MCV CHEMOTHERAPY COMBINED WITH
TITLE2 : TRANSURETHRAL SURGERY PLUS CISPLATIN WITH RADIATION THERAPY FOR THE SELECTED
TITLE3 : BLADDER PRESERVATION IN PATIENTS WITH MUSCLE-INVADING BLADDER CANCER

Record number 499
HSC : 91153 HURO :
SITE : DDEAMC CSP : Y SE : SE
ISOTOPE : I 131 RT : OG :
OGNAME :
TITLE1 : SCRINTIGRAPHY OF TUMORS OF NEUROECTODERMAL ORIGIN WITH
TITLE2 : 131-IODINE-META-IODOBENZYLGUANIDINE SULFATE (131 I-MIBG)
TITLE3 :

Record number 500
HSC : 91190 HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8957
TITLE1 : SWOG 8957 - FEASIBILITY TRIAL OF POST-OPERATIVE RADIOTHERAPY PLUS CISPLATIN
TITLE2 : FOLLOWED BY THREE COURSES OF 5-FU PLUS CISPLATIN IN PATIENTS WITH RESECTED
TITLE3 : HEAD AND NECK CANCER

Record number 501
HSC : 91198 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : CALGB 9051
TITLE1 : CALGB 9051 - A STUDY OF COMBINATION CHEMOTHERAPY PLUS IRRADIATION FOR EARLY
TITLE2 : STAGE HODGKIN'S DISEASE

TITLE3 :

Record number 502
HSC : 91204 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG :
OGNAME :
TITLE1 : HIGH-DOSE CYTOSINE ARABINOSIDE, FRACTIONATED TOTAL BODY IRRADIATION, AND
TITLE2 : AUTOLOGOUS BONE MARROW TRANSPLANTATION IN PATIENTS WITH ACUTE LYMPHOBLASTIC
TITLE3 : LEUKEMIA IN SECOND HEMATOLOGIC REMISSION: A PHASE II STUDY

Record number 503
HSC : 91207 HURO :
SITE : BAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : CHANGES IN HEPATOCYTE FUNCTION MEASURED BY TECHNETIUM TC-99M MEBROFENIN
TITLE2 :
TITLE3 :

Record number 504
HSC : 91271 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8695
TITLE1 : SWOG 8695 - A RANDOMIZED COMPARISON OF HYDROXYUREA VERSUS 5-FU INFUSION AND
TITLE2 : BOLUS CISPLATIN AS AN ADJUVANT TO RADIATION THERAPY IN PATIENTS WITH STAGES
TITLE3 : II-B, III AND IV-A CARCINOMA OF THE CERVIX AND NEGATIVE PARA-AORTIC NODES

Record number 505
HSC : 91316 HURO :
SITE : DDEAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8812
TITLE1 : SWOG 8812 - TREATMENT OF LIMITED SMALL CELL LUNG CANCER WITH CONCURRENT
TITLE2 : CHEMOTHERAPY, RADIOTHERAPY, WITH OR WITHOUT GM-CSF AND SUBSEQUENT
TITLE3 : RANDOMIZATION TO MAINTENANCE INTERFERON OR NO MAINTENANCE

Record number 506
HSC : 91397 HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 109
TITLE1 : GOG 109 - 5-FU INFUSION AND BOLUS CISPLATIN AS AN ADJUNCT TO RADIATION THERAPY
TITLE2 : VS RADIATION THERAPY ALONE IN SELECTED PATIENTS WITH STAGE 1A-2, 1B OR 2A
TITLE3 : CARCINOMA OF THE CERVIX FOLLOWING RADICAL HYSTERECTOMY AND NODE DISSECTION

Record number 507
HSC : 91415 HURO :

SITE : WRAMC CSP : Y SE : SE
ISOTOPE : I 131 RT : OG :
OGNAME :
TITLE1 : RESPONSE OF MULTINODULAR GOITERS TO THERAPEUTIC DOSES OF IODINE-131
TITLE2 :
TITLE3 :

Record number 508
HSC : 91437 HURO :
SITE : MAMC CSP : N SE :
ISOTOPE : RT : OG :
OGNAME :
TITLE1 : MEASUREMENT OF RADIATION EXPOSURE TO ALL PERSONNEL IN AN EMERGENCY DEPARTMENT
TITLE2 :
TITLE3 :

Record number 509
HSC : 91456 HURO :
SITE : DDEAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : STABILITY OF TECHNETIUM SULFUR COLLOID LABELED EGG SUBSTITUTE IN GASTRIC ACID:
TITLE2 :
TITLE3 : COMPARISON TO IN VIVO LABELED CHICKEN LIVER

Record number 510
HSC : 91457 HURO :
SITE : DDEAMC CSP : Y SE :
ISOTOPE : I 131 RT : OG :
OGNAME :
TITLE1 : ADRENAL IMAGING WITH 131 IODINE-6-BETA-IODOMETHYL-NORCHOLESTEROL (NP-59)
TITLE2 :
TITLE3 :

Record number 511
HSC : 91460 HURO :
SITE : DDEAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8736
TITLE1 : SWOG 8736 - TREATMENT OF LOCALIZED NON-HODGKIN'S LYMPHOMA: COMPARISON OF
TITLE2 : CHEMOTHERAPY (CHOP) TO CHEMOTHERAPY PLUS RADIATION THERAPY
TITLE3 :

Record number 512
HSC : 91478 HURO :
SITE : DDEAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8598
TITLE1 : SWOG 8598 (RTOG 85-01) - PROSPECTIVE TRIAL FOR LOCALIZED CANCER OF THE
TITLE2 : ESOPHAGUS: COMPARING RADIATION AS A SINGLE MODALITY TO THE COMBINATION OF

TLE3 : RADIATION THERAPY AND CHEMOTHERAPY, PHASE III INTERGROUP

Record number 513
HSC : 91514 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 8901
TITLE1 : GOG 8901 - A PHASE I EVALUATION OF MULTIPLE DAILY FRACTION RADIATION AND
TITLE2 : 5-FLUOROURACIL PLUS CISPLATIN IN STAGE II-B, III AND IV-A CARCINOMA OF THE
TITLE3 : CERVIX WITH NEGATIVE PARA-AORTIC NODES

Record number 514
HSC : 91515 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 8801
TITLE1 : GOG 8801 - A PHASE I EVALUATION OF MULTIPLE DAILY FRACTION RADIATION AND
TITLE2 : HYDROXYUREA IN STAGE II-B, III AND IV-A CARCINOMA OF THE CERVIX WITH NEGATIVE
TITLE3 : PARA-AORTIC NODES

Record number 515
HSC : 91555 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : NCOG 6G902
TITLE1 : NCOG 6G-90-2 - A PHASE II STUDY OF EXTERNAL BEAM RADIATION THERAPY AND IMPLANT
TITLE2 : BOOST WITH OR WITHOUT HYPERTHERMIA FOR PRIMARY GLIOBLASTOMA MULTIFORME
TITLE3 :

Record number 516
HSC : 91570 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : NPC-1
TITLE1 : NPC-1: A PHASE II STUDY OF PRE-IRRADIATION CHEMOTHERAPY FOR PEDIATRIC AND
TITLE2 : ADOLESCENT PATIENTS WITH NASOPHARYNGEAL CARCINOMA
TITLE3 :

Record number 517
HSC : 91577 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 9139
TITLE1 : POG 9139 - A DOSE-ESCALATING STUDY OF CISPLATIN USED CONCOMITANTLY WITH
TITLE2 : HYPERFRACTIONATED IRRADIATION IN THE TREATMENT OF CHILDREN WITH
TITLE3 : NEWLY-DIAGNOSED BRAIN STEM GLIOMAS

Record number 518
HSC : 91595 HURO :

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'  'E      : TAMC                          CSP       : Y       SE        :
   TOPE    :                               RT        : RT      OG        : OG
OGNAME     : POG 9139
TITLE1     : POG 9139 - A DOSE-ESCALATING STUDY OF CISPLATIN, USED CONCOMITANTLY WITH
TITLE2     : HYPERFRACTIONATED IRRADIATION IN THE TREATMENT OF CHILDREN WITH
TITLE3     : NEWLY-DIAGNOSED BRAIN STEM GLIOMAS.  A PHASE I STUDY


Record number 519
HSC        : 91604                         HURO      :
SITE       : WRAMC                         CSP       : Y       SE        :
ISOTOPE    :                               RT        : RT      OG        : OG
OGNAME     : POG 9139
TITLE1     : POG 9139 - A DOSE-ESCALATING STUDY OF CISPLATIN USED CONCOMITANTLY WITH
TITLE2     : HYPERFRACTIONATED IRRADIATION IN THE TREATMENT OF CHILDREN WITH NEWLY
TITLE3     : DIAGNOSED BRAIN STEM GLIOMA CANCER:  A PHASE I STUDY


Record number 520
HSC        : 91607                         HURO      :
SITE       : WRAMC                         CSP       : Y       SE        : SE
ISOTOPE    : TC 99M                        RT        :         OG        :
OGNAME     :
TITLE1     : PROSPECTIVE EVALUATION OF 99MTECHNETIUM (99MTC) SULFUR COLLOID LIVER-SPLEEN
TITLE2     : SCAN (LSS) AND 99MTC MEBROFENIN HEPATOBILIARY (BIDA) RADIONUCLIDE SCAN FOR
T''LE3     : DIAGNOSIS OF DIFFUSE HEPATOCELLULAR DISEASE


Record number 521
HSC        : 91676                         HURO      :
SITE       : WRAMC                         CSP       : Y       SE        :
ISOTOPE    :                               RT        : RT      OG        : OG
OGNAME     : POG 9135
TITLE1     : POG 9135 - PRE-RADIATION CHEMOTHERAPY FOR CHILDREN WITH SUPRATENTORIAL
TITLE2     : MALIGNANT GLIOMAS AND POORLY DIFFERENTIATED EMBRYONAL TUMORS OF CHILDHOOD
TITLE3     :


Record number 522
HSC        : 91677                         HURO      :
SITE       : WRAMC                         CSP       : Y       SE        :
ISOTOPE    :                               RT        : RT      OG        : OG
OGNAME     : POG 9136
TITLE1     : POG 9136 - PHASE I/II DOSE ESCALATING TRIAL OF HYPERFRACTIONATED IRRADIATION
TITLE2     : IN THE TREATMENT OF SUPRATENTORIAL MALIGNANT TUMORS OF CHILDHOOD
TITLE3     :


Record number 523
HSC        : 91697                         HURO      :
SITE       : BAMC                          CSP       : Y       SE        :
  'OPE     :                               RT        : RT      OG        : OG
OGNAME     : POG 9136
TITLE1     : POG 9136 - PHASE I/II DOSE ESCALATING TRIAL OF HYPERFRACTIONATED IRRADIATION
TITLE2     : IN THE TREATMENT OF SUPRATENTORIAL MALIGNANT TUMORS OF CHILDHOOD
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TLE3 :

Record number 524
HSC : 91704 HURO :
SITE : BAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : A COMPARISON OF EXERCISE TC-99M SESTAMIBI MYOCARDIAL SCINTIGRAPHY AND
TITLE2 : ADENOSINE TC-99M SESTAMIBI MYOCARDIAL SCINTIGRAPHY FOR THE DIAGNOSIS OF
TITLE3 : CORONARY ARTERY DISEASE IN PATIENTS WITH LEFT BUNDLE BRANCH BLOCK

Record number 525
HSC : 91726 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG :
OGNAME :
TITLE1 : THE RELATIONSHIP OF THE SENSE OF COHERENCE AND HARDINESS TO THE NUTRITIONAL
TITLE2 : STATUS OF ANORECTIC HEAD AND NECK CANCER PATIENTS CURRENTLY UNDERGOING
TITLE3 : RADIATION THERAPY

Record number 526
HSC : 92011 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : OG :
OGNAME :
TITLE1 : DOCUMENTATION OF IRRADIATED LYMPHOCYTE INACTIVATION USING THE CD69 SURFACE
TITLE2 : MARKER AND FLOW CYTOMETRY
TITLE3 :

Record number 527
HSC : 92013 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : ROENTGENOGRAPHIC EVALUATION OF THE AML POROUS COATED ACETABULAR COMPONENT: A
TITLE2 : SIX-YEAR MINIMUM FOLLOW-UP STUDY
TITLE3 :

Record number 528
HSC : 92036 HURO :
SITE : WBAMC CSP : Y SE : SE
ISOTOPE : P 32 RT : OG : OG
OGNAME : GOG 93
TITLE1 : GOG 93 - EVALUATION OF INTRAPERITONEAL CHROMIC PHOSPHATE SUSPENSION OVARIAN
TITLE2 : CARCINOMA
TITLE3 :

Record number 529
HSC : 92066 HURO :

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S  'E      : BAMC                          CSP       : Y       SE        :
  TOPE     :                               RT        : RT      OG        : OG
OGNAME     : GOG 120
TITLE1     : GOG 120 - RANDOMIZED COMPARISON OF 5-FU INFUSION AND BOLUS CISPLATIN VS WEEKLY
TITLE2     : CISPLATIN AS ADJUNCTION TO RADIATION THERAPY IN PATIENTS WITH STAGES II-B,
TITLE3     : III-A, III-B, AND IV-A CARCINOMA OF THE CERVIX AND NEGATIVE PARA-AORTIC NODES


Record number 530
HSC        : 92069                         HURO      :
SITE       : BAMC                          CSP       : Y       SE        :
ISOTOPE    :                               RT        : RT      OG        : OG
OGNAME     : SWOG 9021
TITLE1     : SWOG 9021 - POSTOPERATIVE RADIOTHERAPY FOR SINGLE BRAIN METASTASES, PHASE III
TITLE2     :
TITLE3     :


Record number 531
HSC        : 92070                         HURO      :
SITE       : BAMC                          CSP       : Y       SE        :
ISOTOPE    :                               RT        : RT      OG        : OG
OGNAME     : SWOG 9016
TITLE1     : SWOG 9016 - STUDY OF EXTERNAL BRAIN IRRADIATION AND CISPLATIN/BCNU FOLLOWED BY
TITLE2     : BCNU FOR THE TREATMENT OF PRIMARY MALIGNANT BRAIN TUMOR, PHASE II
T  LE3     :


Record number 532
HSC        : 92071                         HURO      :
SITE       : BAMC                          CSP       : Y       SE        :
ISOTOPE    :                               RT        : RT      OG        : OG
OGNAME     : SWOG 9008
TITLE1     : SWOG 9008 - TRIAL OF ADJUVANT CHEMORADIATION AFTER GASTRIC RESECTION FOR
TITLE2     : ADENOCARCINOMA
TITLE3     :


Record number 533
HSC        : 92111                         HURO      :
SITE       : TAMC                          CSP       : Y       SE        :
ISOTOPE    :                               RT        : RT      OG        : OG
OGNAME     : POG 9031
TITLE1     : POG 9031 - HIGH-STAGE MEDULLOBLASTOMA
TITLE2     :
TITLE3     :


Record number 534
HSC        : 92112                         HURO      :
SIT  E     : TAMC                          CSP       : Y       SE        :
I   OPE    :                               RT        : RT      OG        : OG
OGNAME     : POG 9135
TITLE1     : POG 9135 - PRE-RADIATION CHEMOTHERAPY FOR CHILDREN WITH SUPRATENTORIAL
TITLE2     : MALIGNANT GLIOMAS AND POORLY-DIFFERENTIATED EMBRYONAL TUMORS
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TITLE3 :

Record number 535
HSC : 92113 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 9136
TITLE1 : POG 9136 - PHASE I/II DOSE ESCALATING TRIAL OF HYPERFRACTIONATED IRRADIATION
TITLE2 : IN THE TREATMENT OF SUPRATENTORIAL MALIGNANT TUMORS OF CHILDHOOD
TITLE3 :

Record number 536
HSC : 92118 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : NSABP B-24
TITLE1 : NSABP B-24 - A CLINICAL TRIAL TO EVALUATE THE WORTH OF TAMOXIFEN IN
TITLE2 : CONJUNCTION WITH LUMPECTOMY AND BREAST IRRADIATION FOR THE TREATMENT OF
TITLE3 : NONINVASIVE INTRADUCTAL CARCINOMA (DCIS) OF THE BREAST

Record number 537
HSC : 92123 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 9008
TITLE1 : SWOG 9008 - TRIAL OF ADJUVANT CHEMOIRRADIATION AFTER GASTRIC RESECTION FOR
TITLE2 : ADENOCARCINOMA, PHASE III
TITLE3 :

Record number 538
HSC : 92141 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 8906
TITLE1 : GOG 8906 - EXTENDED FIELD RADIATION THERAPY WITH CONCOMINANT 5-FU INFUSION AND
TITLE2 : CISPLATIN CHEMOTHERAPY IN PATIENTS WITH CERVICAL CARCINOMA METASTASTIC TO
TITLE3 : PARA-AORTIC LYMPH NODES

Record number 539
HSC : 92162 HURO :
SITE : DDEAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 9008
TITLE1 : SWOG 9008 - TRIAL OF ADJUVANT CHEMOIRRADIATION AFTER GASTRIC RESECTION FOR
TITLE2 : ADENOCARCINOMA, PHASE III
TITLE3 :

Record number 540
HSC : 92167 HURO :

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SITE      : WBAMC                    CSP       : Y       SE        :
ISOTOPE   :                          RT        : RT      OG        : OG
OGNAME    : GOG 99
TITLE1    : GOG 99 - A PHASE III RANDOMIZED STUDY OF SURGERY VERSUS SURGERY PLUS
TITLE2    : ADJUNCTIVE RADIATION THERAPY IN INTERMEDIATE RISK ENDOMETRIAL ADENOCARCINOMA
TITLE3    :


Record number 541
HSC       : 92168                    HURO      :
SITE      : WBAMC                    CSP       : Y       SE        :
ISOTOPE   :                          RT        : RT      OG        : OG
OGNAME    : GOG 8901
TITLE1    : GOG 8901 - A PHASE I EVALUATION OF MULTIPLE DAILY FRACTION RADIATION AND
TITLE2    : 5-FLUOROURACIL PLUS CISPLATIN IN STAGE II-B, III AND IV-A CARCINOMA OF THE
TITLE3    : CERVIX WITH NEGATIVE PARA-AORTIC NODES


Record number 542
HSC       : 92183                    HURO      :
SITE      : BAMC                     CSP       : Y       SE        :
ISOTOPE   :                          RT        : RT      OG        : OG
OGNAME    : GOG 122
TITLE1    : GOG 122 - WHOLE ABDOMINAL RADIOTHERAPY VERSUS CIRCADIAN-TIMED COMBINATION
TITLE2    : DOXORUBICIN-CISPLATIN CHEMOTHERAPY IN ADVANCED ENDOMETRIAL CARCINOMA
TITLE3    :


Record number 543
HSC       : 92184                    HURO      :
SITE      : BAMC                     CSP       : Y       SE        :
ISOTOPE   :                          RT        : RT      OG        : OG
OGNAME    : GOG 123
TITLE1    : GOG 123 - A RANDOMIZED COMPARISON OF RADIATION THERAPY AND ADJUVANT
TITLE2    : HYSTERECTOMY VS RADIATION THERAPY AND WEEKLY CISPLATIN AND ADJUVANT
TITLE3    : HYSTERECTOMY IN PATIENTS WITH BULKY STAGE 1B CARCINOMA OF THE CERVIX, PH III


Record number 544
HSC       : 92216                    HURO      :
SITE      : FAMC                     CSP       : Y       SE        :
ISOTOPE   :                          RT        : RT      OG        : OG
OGNAME    : SWOG 9016
TITLE1    : SWOG 9016 - STUDY OF EXTERNAL BRAIN IRRADIATION AND CISPLATIN/BCNU FOLLOWED BY
TITLE2    : BCNU FOR THE TREATMENT OF PRIMARY MALIGNANT BRAIN TUMORS, PHASE II
TITLE3    :


Record number 545
HSC       : 92232                    HURO      :
SITE      : FAMC                     CSP       : Y       SE        :
ISOTOPE   :                          RT        : RT      OG        :
OGNAME    :
TITLE1    : EFFECT OF SMOKING, ALCOHOL INGESTION, RADIATION THERAPY AND B-CAROTENE ON
TITLE2    : LANGERHANS CELLS IN HUMAN ORAL MUCOSA:  A PILOT STUDY
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TITLE3 :

Record number 546
HSC : 92257 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : CALGB 9130
TITLE1 : CALGB 9130 - A TRIAL OF CHEMOTHERAPY AND RADIATION WITH OR WITHOUT CARBOPLATIN
TITLE2 : FOR INOPERABLE LUNG CANCER
TITLE3 :

Record number 547
HSC : 92260 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : CALGB 9195
TITLE1 : CALGB 9195 - A TRIAL OF ADJUVANT CHEMORADIATION VERSUS OBSERVATION AFTER
TITLE2 : GASTRIC RESECTION OF ADENOCARCINOMA
TITLE3 :

Record number 548
HSC : 92303 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 9132
TITLE1 : POG 9132 - HYPERFRACTIONATED IRRADIATION FOR POSTERIOR FOSSA EPENDYMOMA: A
TITLE2 : PHASE II/III STUDY
TITLE3 :

Record number 549
HSC : 92362 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8957
TITLE1 : SWOG 8957 - FEASIBILITY TRIAL OF POST-OPERATIVE RADIOTHERAPY PLUS CISPLATIN
TITLE2 : FOLLOWED BY THREE COURSES OF 5-FU PLUS CISPLATIN IN PATIENTS WITH RESECTED
TITLE3 : HEAD AND NECK CANCER, PHASE II PILOT

Record number 550
HSC : 92364 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8999
TITLE1 : SWOG 8999 - EVALUATION OF RADIATION TREATMENT FOLLOWING SURGICAL RESECTION OF
TITLE2 : SOLITARY BRAIN METASTASIS, PHASE II
TITLE3 :

Record number 551
HSC : 92369 HURO :

SITE : DDEAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : A CLINICAL STUDY OF THE RELATIONSHIP BETWEEN COMPUTED TOMOGRAPHY AND BONE
TITLE2 : SOUNDING
TITLE3 :

Record number 552
HSC : 92382 HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 9139
TITLE1 : POG 9139 - A DOSE-ESCALATING STUDY OF CISPLATIN, USED CONCOMITANTLY WITH
TITLE2 : HYPERFRACTIONATED IRRADIATION IN THE TREATMENT OF CHILDREN WITH
TITLE3 : NEWLY-DIAGNOSED BRAIN STEM GLIOMAS, A PHASE I STUDY

Record number 553
HSC : 92383 HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 9132
TITLE1 : POG 9132 - HYPERFRACTIONATED IRRADIATION FOR POSTERIOR FOSSA EPENDYOMA
TITLE2 :
TITLE3 :

Record number 554
HSC : 92385 HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 9136
TITLE1 : POG 9136 - PHASE I/II DOSE-ESCALATING TRIAL OF HYPERFRACTIONATED IRRADIATION
TITLE2 : IN THE TREATMENT OF SUPRATENTORIAL MALIGNANT TUMORS OF CHILDHOOD
TITLE3 : ----------

Record number 555
HSC : 92386 HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 9135
TITLE1 : POG 9135 - PRE-RADIATION CHEMOTHERAPY FOR CHILDREN WITH SUPRATENTORIAL
TITLE2 : MALIGNANT GLIOMAS AND POORLY-DIFFERENTIATED EMBRYONAL TUMORS. A RANDOMIZED
TITLE3 : PHASE II STUDY

Record number 556
HSC : 92418 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 101
TITLE1 : GOG 101 - A PHASE II EVALUATION OF PREOPERATIVE CHEMORADIATION FOR ADVANCED
TITLE2 : VULVAR CANCER

TLE3 :

Record number 557
HSC : 92437 HURO :
SITE : WBAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 109
TITLE1 : GOG 109 - RANDOMIZED COMPARISON OF 5-FU INFUSION & BOLUS CISPLATIN AS ADJUNCT
TITLE2 : TO RADIATION THERAPY, VS RADIATION ALONE IN PATIENTS WITH STAGES IA2, IB, &
TITLE3 : IIA CARCINOMA OF THE CERVIX FOLLOWING RADICAL HYSTERECTOMY & NODE DISSECTION

Record number 558
HSC : 92439 HURO :
SITE : WBAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 125
TITLE1 : GOG 125 - EXTENDED FIELD RADIATION THERAPY WITH CONCOMITANT 5-FU INFUSION AND
TITLE2 : CISPLATIN CHEMOTHERAPY IN PATIENTS WITH CERVICAL CARCINOMA METASTATIC TO
TITLE3 : PARA-AORTIC LYMPH NODES (PHASE II)

Record number 559
HSC : 92441 HURO :
SITE : WBAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 122
TITLE1 : GOG 122 - WHOLE ABDOMINAL RADIOTHERAPY VERSUS CIRCADIAN-TIMED COMBINATION
TITLE2 : DOXORUBICIN-CISPLATIN CHEMOTHERAPY IN ADVANCED ENDOMETRIAL CARCINOMA
TITLE3 : ----------

Record number 560
HSC : 92477 HURO :
SITE : DDEAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8991
TITLE1 : SWOG 8991 - CISPLATIN PLUS EOPOSIDE COMBINED WITH STANDARD FRACTIONATION
TITLE2 : THORACIC RADIOTHERAPY VS CISPLATIN PLUS ETOPOSIDE COMBINED WITH MULTIPLE DAILY
TITLE3 : FRANCTIONATED THORACIC RADIOTHERAPY FOR LIMITED STAGE SMALL CELL LUNG CANCER

Record number 561
HSC : 92509 HURO :
SITE : DDEAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 9019
TITLE1 : SWOG 9019 - RANDOMIZED, PROSPECTIVE COMPARISON OF CHEMOTHERAPY PLUS
TITLE2 : RADIOTHERAPY AND THE SAME CHEMOTHERAPY PLUS RADIOTHERAPY TOGETHER WITH SURGERY
TITLE3 : FOR STAGE IIIA AND STAGE IIIB NON-MEDIASTINAL NON-SMALL CELL LUNG CANCER

Record number 562
HSC : 92539 HURO :

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SITE      : WRAMC                    CSP       : Y       SE        :
ISOTOPE   :                          RT        : RT      OG        : OG
OGNAME    : POG9233/34
TITLE1    : POG 9233/34 - A PHASE III RANDOMIZED TRIAL OF STANDARD VERSUS DOSE-INTENSIFIED
TITLE2    : CHEMOTHERAPY <3 YEARS OF AGE WITH A CNS MALIGNANCY TREATED WITH OR WITHOUT
TITLE3    : RADIATION THERAPY


Record number 563
HSC       : 92541                    HURO      :
SITE      : WRAMC                    CSP       : Y       SE        :
ISOTOPE   :                          RT        : RT      OG        : OG
OGNAME    : GOG 125
TITLE1    : GOG 125 - EXTENDED FIELD RADIATION THERAPY WITH CONCOMITANT 5-FU INFUSION AND
TITLE2    : CISPLATIN CHEMOTHERAPY IN PATIENTS WITH CERVICAL CARCINOMA METASTATIC TO THE
TITLE3    : PARA-AORTIC LYMPH NODES


Record number 564
HSC       : 92544                    HURO      :
SITE      : WRAMC                    CSP       : Y       SE        :
ISOTOPE   : I ?                      RT        :         OG        :
OGNAME    :
TITLE1    : ACUTE CHANGES IN TOTAL AND FREE THYROID HORMONE LEVELS FOLLOWING RADIOIODINE
TITLE2    : ABLATION THERAPY IN THE TREATMENT OF GRAVES' DISEASE
TITLE3    : ----------


Record number 565
HSC       : 92557                    HURO      :
SITE      : MAMC                     CSP       : Y       SE        :
ISOTOPE   :                          RT        : RT      OG        : OG
OGNAME    : GOG 113
TITLE1    : GOG 113 - AN EVALUATION OF HYDROXYUREA 5-FU INFUSION AND BOLUS CISPLATIN AS AN
TITLE2    : ADJUNCT TO RADIATION THERAPY IN PATIENTS WITH STAGES II-B, III, AND IV-A
TITLE3    : CARCINOMA OF THE CERVIX AND NEGATIVE PARA-AORTIC NODES


Record number 566
HSC       : 92590                    HURO      :
SITE      : FAMC                     CSP       : Y       SE        :
ISOTOPE   :                          RT        : RT      OG        :
OGNAME    :
TITLE1    : RANDOMIZED COMPARISON OF RADIATION VERSUS RADIATION PLUS CONTINUOUS
TITLE2    : 5-FLUOROURACIL INFUSION FOR PALLIATION OF BONE METASTASES:  PHASE II STUDY
TITLE3    : ----------


Record number 567
HSC       : 92598                    HURO      :
SITE      : TAMC                     CSP       : Y       SE        :
ISOTOPE   :                          RT        : XR      OG        :
OGNAME    :
TITLE1    : CONTRAST RADIOGRAPHY IN SMALL BOWEL OBSTRUCTION:  A PROSPECTIVE RANDOMIZED
TITLE2    : TRIAL
```

TITLE3 :

Record number 568
HSC : 92602 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG9233/34
TITLE1 : POG 9233/34 - A PHASE III RANDOMIZED TRIAL OF STANDARD VS. DOSE-INTENSIFIED
TITLE2 : CHEMOTHERAPY FOR CHILDREN 3 YEARS OF AGE WITH A CENTRAL NERVOUS SYSTEM (CNS)
TITLE3 : MALIGNANCY TREATED WITH OR WITHOUT RADIATION THERAPY

Record number 569
HSC : 92606 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 9239
TITLE1 : POG 9239 - TREATMENT OF CHILDREN WITH NEWLY DIAGNOSED BRAINSTEM GLIOMA USING
TITLE2 : CISPLATIN AS A RADIOSENSITIZER WITH EITHER CONVENTIONAL OR HYPERFRACTIONATED
TITLE3 : RADIOTHERAPY: A PEDIATRIC ONCOLOGY GROUP PHASE III STUDY

Record number 570
HSC : 92607 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 120
TITLE1 : GOG 120 - RANDOMIZED COMPARISON OF HYDROXYUREA VS HYDROXYUREA, 5-FU INFUSION &
TITLE2 : CISPLATIN VS WEEKLY CISPLATIN AS ADJUNCT TO RADIATION THERAPY IN PATIENTS WITH
TITLE3 : STAGES II-B, III, OR IV-A CARCINOMA OF CERVIX AND NEGATIVE PARA-AORTIC NODES

Record number 571
HSC : 92619 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 109
TITLE1 : GOG 109 (SWOG 8797) - RANDOMIZED COMPARISON OF 5-FU AND CISPLATIN AS ADJUNCT
TITLE2 : TO RADIATION THERAPY VS RADIATION ALONE IN SELECTED PATIENTS WITH STAGES I-A2,
TITLE3 : I-B, & II-A CARCINOMA OF CERVIX AFTER RADICAL HYSTERECTOMY AND NODE DISSECTION

Record number 572
HSC : 92650 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : I ? RT : OG :
OGNAME :
TITLE1 : A PROSPECTIVE EVALUATION OF GONADAL DAMAGE IN THYROID CANCER PATIENTS
TITLE2 : TREATED WITH RADIOACTIVE IODINE
TITLE3 :

Record number 573
HSC : 92658 HURO :

SITE : DDEAMC CSP : Y SE :
TOPE : RT : RT OG : OG
OGNAME : SWOG 9059
TITLE1 : SWOG 9059 - COMPARISON OF STANDARD RADIOTHERAPY VS RADIOTHERAPY PLUS
TITLE2 : CISPLATIN, VS SPLIT-COURSE RADIOTHERAPY PLUS SIMULTANEOUS CISPLATIN AND 5-FU,
TITLE3 : IN PTS WITH UNRESECTABLE SQUAMOUS CELL CARCINOMA OF HEAD & NECK

Record number 574
HSC : 92662 HURO :
SITE : DDEAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : EVALUATION OF THE USE OF 99M-TECHNETIUM PERTECHNETATE WITH POTASSIUM
TITLE2 : PERCHLORATE WASH-OUT AND 99M-TECHNETIUM MIBI IN PARATHYROID IMAGING IN
TITLE3 : PATIENTS WITH SUSPECTED PARATHYROID NEOPLASIA OR HYPERPLASIA

Record number 575
HSC : 92689 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : COMPARISON OF FILM SCREEN RADIOGRAPHY, COMPUTER RADIOGRAPHY, AND KODAK INSIGHT
TITLE2 : FILMSCREEN IN DEMONSTRATING MEDIASTINAL ANATOMY
TITLE3 :

Record number 576
HSC : 92704 HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8991
TITLE1 : SWOG 8991 - CISPLATIN PLUS ETOPOSIDE COMBINED WITH STANDARD FRACTIONATION
TITLE2 : THORACIC RADIOTHERAPY VS CISPLATIN PLUS ETOPOSIDE COMBINED WITH MULTIPLE DAILY
TITLE3 : FRACTIONATED THORACIC RADIOTHERAPY FOR LIMITED STAGE SMALL CELL LUNG CANCER

Record number 577
HSC : 92707 HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : A CLINICAL AND RADIOGRAPHIC COMPARISON OF PARENTERAL GOLD VERSUS PARENTERAL
TITLE2 : METHOTREXATE IN THE TREATMENT OF EARLY RHEUMATOID ARTHRITIS
TITLE3 :

Record number 578
HSC : 93003 HURO :
SITE : DDEAMC CSP : Y SE :
I OPE : UNSPEC RT : OG :
O ME :
TITLE1 : A COMPARATIVE STUDY OF LIVER BIOPSIES AND QUANTITATIVE HEPATOBILIARY SCANNING
TITLE2 : IN PATIENTS WITH HEPATITIS C

TITLE3 :

Record number 579
HSC : 93016 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : THE POSTOPERATIVE SCAPHOID: A COMPARISON OF MAGNETIC RESONANCE IMAGING (MRI),
TITLE2 : COMPUTED TOMOGRAPHY (CT), AND CONVENTIONAL RADIOGRAPHY IN THE DIAGNOSIS OF
TITLE3 : FRACTURE HEALING

Record number 580
HSC : 93017 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : UNSPEC RT : OG :
OGNAME :
TITLE1 : CHRONIC WRIST PAIN: DIAGNOSTIC ACCURACY OF MAGNETIC RESONANCE IMAGING (MRI)
TITLE2 : AND RADIONUCLIDE BONE SCANNING
TITLE3 :

Record number 581
HSC : 93018 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 9019
TITLE1 : SWOG 9019 - RANDOMIZED, PROSPECTIVE COMPARISON BETWEEN CHEMOTHERAPY PLUS
TITLE2 : RADIOTHERAPY TOGETHER WITH SURGERY FOR SELECTED STAGE IIIA AND SELECTED STAGE
TITLE3 : IIIB (NO MALIGNANT EFFUSION) NON-SMALL CELL LUNG CANCER

Record number 582
HSC : 93019 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 9239
TITLE1 : POG 9239 - TREATMENT OF CHILDREN WITH NEWLY-DIAGNOSED BRAIN STEM GLIOMA (BSG)
TITLE2 : USING CISPLATIN AS A RADIOSENSITIZER WITH EITHER CONVENTIONAL OR
TITLE3 : HYPERFRACTIONATED RADIOTHERAPY

Record number 583
HSC : 93031 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 120
TITLE1 : GOG 120 - RANDOMIZED COMPARISON OF HYDROXYUREA VS HYDROXYUREA, 5-FU AND
TITLE2 : CISPLATIN VS WEEKLY CISPLATIN AS ADJUNCT TO RADIATION THERAPY IN PATIENTS WITH
TITLE3 : STAGES II-B, III, IV-A CARCINOMA OF THE CERVIX AND NEGATIVEPARA-AORTIC NODES

Record number 584
HSC : 93068 HURO :

SITE : MAMC CSP : Y SE :
TOPE : RT : RT OG : OG
OGNAME : SWOG 9016
TITLE1 : SWOG 9016 - STUDY OF EXTERNAL BRAIN IRRADIATION AND CISPLATIN/BCNU FOLLOWED BY
TITLE2 : BCNU FOR THE TREATMENT OF PRIMARY MALIGNANT BRAIN TUMORS
TITLE3 :

Record number 585
HSC : 93079 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 9226
TITLE1 : POG 9226 - TREATMENT OF STAGE I, IIA AND IIIA1 HODGKIN'S DISEASE WITH ABVE AND
TITLE2 : LOW-DOSE IRRADIATION
TITLE3 :

Record number 586
HSC : 93096 HURO :
SITE : DDEAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 9133
TITLE1 : SWOG 9133 - RANDOMIZED TRIAL OF SUBTOTAL NODAL IRRADIATION VERSUS DOXORUBICIN
TITLE2 : PLUS VINBLASTINE AND SUBTOTAL NODAL IRRADIATION FOR STAGE I-IIA HODGKIN'S
TITLE3 : DISEASE, PHASE III

Record number 587
HSC : 93111 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 122
TITLE1 : GOG 122 - WHOLE ABDOMINAL RADIOTHERAPY VERSUS COMBINATION
TITLE2 : DOXORUBICIN-CISPLATIN CHEMOTHERAPY IN ADVANCED ENDOMETRIAL CARCINOMA
TITLE3 :

Record number 588
HSC : 93123 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : I 131 RT : OG :
OGNAME :
TITLE1 : 131 I 6-BETA-IODOMETHYL-19-NORCHOLESTEROL (NP59) FOR PRIMARY
TITLE2 : HYPERALDOSTERONISM AND BILATERAL ADRENAL MASSES, ONE TIME USE
TITLE3 :

Record number 589
HSC : 93127 HURO :
SITE : MAMC CSP : Y SE : SE
I OPE : TC 99M RT : OG : OG
OGNAME :
TITLE1 : A MULTICENTER CLINICAL STUDY USING A TECHNETIUM-LABELLED MONOCLONAL ANTIBODY
TITLE2 : FOR IMAGING PATIENTS WITH SMALL CELL LUNG CANCER

TITLE3 :

Record number 590
HSC : 93129 HURO :
SITE : FAMC CSP : Y SE : SE
ISOTOPE : SR 89 RT : OG :
OGNAME :
TITLE1 : STRONTIUM-89 THERAPY FOR INTRACTABLE BONE PAIN FROM METASTATIC BREAST AND
TITLE2 : PROSTATE CANCER
TITLE3 :

Record number 591
HSC : 93159 HURO :
SITE : DDEAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 9201
TITLE1 : SWOG 9201 - PHASE III TRIAL TO PRESERVE THE LARYNX: INDUCTION CHEMOTHERAPY
TITLE2 : AND RADIATION THERAPY VERSUS CONCOMITANT CHEMO-THERAPY AND RADIATION THERAPY
TITLE3 : VERSUS RADIATION

Record number 592
HSC : 93170 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : EFFECTS OF ADMINISTRATION OF THE CONTRAST AGENT HEXABRIX ON THYROID FUNCTION
TITLE2 : TESTS AND THYROID UPTAKE OF IODINE
TITLE3 :

Record number 593
HSC : 93191 HURO :
SITE : WRAMC CSP : Y SE : SE
ISOTOPE : IN 111 RT : OG : OG
OGNAME :
TITLE1 : ADMINISTRATION OF INTRAVENOUS DOSES OF 111 IN-CYT-356 IN THE DETECTION OF
TITLE2 : OCCULT PROSTATE CARCINOMA (PROTOCOL 356IN14)
TITLE3 :

Record number 594
HSC : 93192 HURO :
SITE : WRAMC CSP : Y SE : SE
ISOTOPE : IN 111 RT : OG : OG
OGNAME :
TITLE1 : MULTICENTER STUDY OF INTRAVENOUSLY ADMINISTERED 111 IN-CYT-356 IN THE
TITLE2 : EVALUATION OF PATIENTS WITH PRIMARY PROSTATE CANCER PRIOR TO STAGING PELVIC
TITLE3 : LYMPH NODE DISSECTION (PROTOCOL 356IN15)

Record number 595
HSC : 93231 HURO :

SITE : DDEAMC CSP : Y SE :
TOPE : RT : RT OG : OG
OGNAME : SWOG 9216
TITLE1 : SWOG 9216 - A RANDOMIZED PHASE III STUDY OF CODE PLUS THORACIC IRRADIATION
TITLE2 : VERSUS ALTERNATING CAV AND EP FOR EXTENSIVE STAGE SMALL CELL LUNG CANCER
TITLE3 : ----------

Record number 596
HSC : 93242 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : OG :
OGNAME :
TITLE1 : RADIATION EFFECTS ON SALIVARY EPITHELIAL GROWTH FACTOR (EGF): A PILOT STUDY
TITLE2 :
TITLE3 :

Record number 597
HSC : 93304 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 9133
TITLE1 : SWOG 9133 - RANDOMIZED TRIAL OF SUBTOTAL NODAL IRRADIATION VERSUS DOXORUBICIN
TITLE2 : PLUS VINBLASTINE AND SUBTOTAL NODAL IRRADIATION FOR STAGE 1-11A HODGKIN'S
TITLE3 : DISEASE, PHASE III

Record number 598
HSC : 93309 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 9216
TITLE1 : SWOG 9216 - INT-0131, NCIC-CTG-BR.8, A RANDOMIZED PHASE III STUDY OF CODE
TITLE2 : PLUS THORACIC IRRADIATION VERSUS ALTERNATING CAV AND EP FOR EXTENSIVE STAGE
TITLE3 : SMALL CELL LUNG CANCER, (NCIC CTG)

Record number 599
HSC : 93325 HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 9031
TITLE1 : POG 9031 - TREATMENT OF CHILDREN WITH HIGH-STAGE MEDULLOBLASTOMA:
TITLE2 : CISPLATIN/VP-16 PRE- VS POST-IRRADIATION: A PHASE III STUDY
TITLE3 : ----------

Record number 600
HSC : 93328 HURO :
SITE : WRAMC CSP : Y SE :
TOPE : RT : RT OG : OG
OGNAME : POG 9226
TITLE1 : POG 9226, TREATMENT OF STAGE I, IIA, AND IIIA1 HODGKIN'S DISEASE WITH
TITLE2 : ADRIAMYCIN, BLEOMYCIN,, VINCRISTINE & ETOPOSIDE & LOW-DOSE IRRADIATION: A

TITLE3 : PHASE II STUDY

Record number 601

HSC	: 93334	HURO	:				
SITE	: FAMC	CSP	: Y	SE	:		
ISOTOPE	:	RT	: RT	OG	: OG		
OGNAME	: POG9233/34						
TITLE1	: POG 9233/34 - A PHASE III RANDOMIZED TRIAL OF STANDARD VERSUS DOSE-INTENSIFIED						
TITLE2	: CHEMOTHERAPY FOR CHILDREN 3 YEARS OF AGE WITH A CNS MALIGNANCY TREATED WITH OR						
TITLE3	: WITHOUT RADIATION THERAPY						

Record number 602

HSC	: 93339	HURO	:				
SITE	: FAMC	CSP	: Y	SE	: SE		
ISOTOPE	: I 131	RT	:	OG	:		
OGNAME	:						
TITLE1	: IODINE 131 META-IODOBENZYLGUANIDINE (MIBG) TO RULE						
TITLE2	: OUT PHEOCHROMOCYTOMA, ONE-TIME, EMERGENCY USE						
TITLE3	:						

Record number 603

HSC	: 93348	HURO	:				
SITE	: BAMC	CSP	: Y	SE	:		
ISOTOPE	: UNSPEC	RT	:	OG	:		
OGNAME	:						
TITLE1	: AN EVALUATION OF RADIONUCLIDE ANGIOGRAPHY AND ECHO-CARDIOGRAPHY FOR ASSESSMENT						
TITLE2	: OF DOXORUBICIN INDUCED VENTRICULAR DYSFUNCTION						
TITLE3	:						

Record number 604

HSC	: 93352	HURO	:				
SITE	: BAMC	CSP	: Y	SE	:		
ISOTOPE	:	RT	: PE	OG	:		
OGNAME	:						
TITLE1	: MYOCARDIAL IMAGING UTILIZING POSITRON EMISSION TOMOGRAPHY TO DETECT AND ASSESS						
TITLE2	: CORONARY ARTERY DISEASE						
TITLE3	:						

Record number 605

HSC	: 93357	HURO	:				
SITE	: FAMC	CSP	: Y	SE	:		
ISOTOPE	:	RT	: RT	OG	: OG		
OGNAME	: UCOLO, NCI						
TITLE1	: DAILY CARBOPLATIN AND SIMULTANEOUS ACCELERATED, HYPERFRACTIONATED CHEST						
TITLE2	: IRRADIATION FOLLOWED BY CARBOPLATIN IN PATIENTS WITH INOPERABLE (STAGES IIIA &						
TITLE3	: IIIB) NON-SMALL CELL LUNG CANCER (COOP STUDY WITH U COLO CANCER CTR & NCI)						

Record number 606

HSC	: 93358	HURO	:

SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : UCOLO, NCI
TITLE1 : INDUCTION THERAPY WITH DAILY ETOPOSIDE, DAILY CISPLATIN AND SIMULTANEOUS CHEST
TITLE2 : IRRADIATION FOLLOWED BY CONSOLIDATION CISPLATIN/ETOPOSIDE THERAPY IN LIMITED
TITLE3 : STAGE SMALL CELL LUNG CANCER (COOPERATIVE STUDY WITH U COLO CANCER CTR & NCI)

Record number 607
HSC : 93359 HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 9226
TITLE1 : POG 9226 - TREATMENT OF STAGE I, IIA AND IIIA1 HODGKIN'S DISEASE WITH ABVE AND
TITLE2 : LOW-DOSE IRRADIATION
TITLE3 :

Record number 608
HSC : 93367 HURO :
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 9239
TITLE1 : POG 9239 - CISPLATIN AND HYPERFRACTIONATED VERSUS CONVENTIONAL RADIOTHERAPY
TITLE2 : FOR BRAIN STEM GLIOMA
TITLE3 :

Record number 609
HSC : 93369 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 9218
TITLE1 : SWOG 9218: MEASUREMENT OF O 6 MGMT IN PATIENTS WITH HIGH GRADE PRIMARY BRAIN
TITLE2 : TUMORS TREATED WITH RADIATION THERAPY AND BCNU, ANCILLARY STUDY
TITLE3 :

Record number 610
HSC : 93382 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : NSABP B-21
TITLE1 : NSABP B-21 - A CLINICAL TRIAL TO DETERMINE THE WORTH OF TAMOXIFEN AND THE
TITLE2 : WORTH OF BREAST RADIATION IN THE MANAGEMENT OF PATIENTS WITH NODE-NEGATIVE,
TITLE3 : CLINICALLY OCCULT, INVASIVE BREAST CANCER TREATED BY LUMPECTOMY

Record number 611
HSC : 93405 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG :
OGNAME :
TITLE1 : DEVELOPMENT OF GRAVES' DISEASE AND GRAVES' OPHTHALMOPATHY IN PATIENTS WITH
TITLE2 : HODGKIN'S DISEASE: RELATIONSHIP TO PRIOR HISTORY OF RADIATION THERAPY

TITLE3 :

Record number 612
HSC : 93412 HURO :
SITE : TAMC CSP : Y SE : SE
ISOTOPE : IN 111 RT : OG :
OGNAME :
TITLE1 : IN-CYT-103 AS DIAGNOSTIC IMAGING AGENT IN THE PREOPERATIVE DIFFERENTIATION OF
TITLE2 : BENIGN AND MALIGNANT MAMMOGRAPHIC ABNORMALITIES
TITLE3 :

Record number 613
HSC : 93413 HURO :
SITE : TAMC CSP : Y SE : SE
ISOTOPE : I 131 RT : OG :
OGNAME :
TITLE1 : EVALUATION OF 131 I-MIBG (131 I-META-IODOBENZYLGUANIDINE SULFATE) IN PATIENTS
TITLE2 : SUSPECTED OF HAVING PHEOCHROMOCYTOMA, NEUROBLASTOMA OR MEDULLARY HYPERPLASIA
TITLE3 :

Record number 614
HSC : 93436 HURO :
SITE : BAMC CSP : Y SE :
TOPE : RT : RT OG :
OGNAME :
TITLE1 : HIGH-DOSE CHEMOTHERAPY AND TOTAL BODY IRRADIATION WITH AUTOLOGOUS STEM CELL
TITLE2 : SUPPORT AND ALPHA INTERFERON CONSOLIDATION IN THE TREATMENT OF PATIENTS WITH
TITLE3 : NON-HODGKIN'S LYMPHOMA WITH A POOR PROGNOSIS

Record number 615
HSC : 93471 HURO :
SITE : WBAMC CSP : Y SE :
ISOTOPE : UNSPEC RT : OG :
OGNAME :
TITLE1 : THE EFFECT OF MEAL CONSUMPTION BEFORE RADIONUCLIDE VENTRICULOGRAPHY
TITLE2 :
TITLE3 :

Record number 616
HSC : 93473 HURO :
SITE : WRAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : EVALUATION OF BREAST MASSES USING TECHNETIUM-99M-SESTAMIBI SCINTIGRAPHY
TITLE2 :
TITLE3 :

Record number 617
HSC : 93486 HURO :

SITE : FAMC CSP : Y SE : SE
ISOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : COMPARISON OF THREE QUALITY CONTROL METHODS USED IN THE PREPARATION OF TC-99M
TITLE2 : EXAMETAZINE (CERETEC)
TITLE3 :

Record number 618
HSC : 93517 HURO :
SITE : TAMC CSP : Y SE :
ISOTOPE : UNSPEC RT : OG :
OGNAME :
TITLE1 : ULTRASOUND VERSUS BONE SCAN IN THE EVALUATION OF SHIN SPLINTS AND STRESS
TITLE2 : FRACTURES
TITLE3 :

Record number 619
HSC : 93563 HURO :
SITE : FAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : A PROSPECTIVE EVALUATION OF TECHNETIUM 99M SESTAMIBI IN THE DETECTION OF
TITLE2 : BREAST CANCER
TITLE3 :

Record number 620
HSC : 93633 HURO :
SITE : MAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : A MULTICENTER CLINICAL STUDY TO COMPARE IMAGING OF NON-SMALL CELL LUNG CANCER
TITLE2 : WITH A TECHNETIUM-LABELLED MONOCLONAL ANTIBODY PRODUCED BY TWO DIFFERENT
TITLE3 : MANUFACTURERS

Record number 621
HSC : 94007 HURO :
SITE : WBAMC CSP : Y SE : SE
ISOTOPE : IN 111 RT : OG :
OGNAME :
TITLE1 : PHASE II STUDY OF INTERFERON-MODULATED INDIUM-111-LABELED B72.3 MONOCLONAL
TITLE2 : ANTIBODY (MOAB) SCINTIGRAPHY IN THE STAGING AND FOLLOW-UP OF BREAST CANCER
TITLE3 : PATIENTS OF POOR PROGNOSIS

Record number 622
HSC : 94055 HURO :
SITE : WRAMC CSP : Y SE :
OPE : RT : OG :
AME :
TITLE1 : THE EFFECT OF IRRADIATION ON RED BLOOD CELL ANTIGEN DENSITIES: A FLOW
TITLE2 : CYTOMETRIC ANALYSIS

TITLE3 :

Record number 623
HSC : 94065 HURO :
SITE : FAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : PROTOCOL FOR EVALUATION OF CEDARS-SINAI AND EMORY ALGORITHM FOR ANALYSIS OF
TITLE2 : MYOCARDIAL TC99M SESTAMIBI TOMOGRAPHS
TITLE3 :

Record number 624
HSC : 94076 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : A METHOD FOR RADIOGRAPHIC EVALUATION OF PEDICLE SCREW VIOLATION OF THE
TITLE2 : VERTEBRAL ENDPLATE: A PILOT STUDY
TITLE3 :

Record number 625
HSC : 94108 HURO :
SITE : DDEAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 9303
TITLE1 : SWOG 9303 - PHASE III STUDY OF RADIATION THERAPY, LEVAMISOLE AND
TITLE2 : 5-FLUOROURACIL VERSUS 5-FLUOROUROCIL AND LEVAMISOLE IN SELECTED PATIENTS WITH
TITLE3 : COMPLETELY RESECTED COLON CANCER

Record number 626
HSC : 94109 HURO :
SITE : DDEAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 9306
TITLE1 : SWOG 9306 - CONSERVATIVE TREATMENT OF ADENOCARCINOMA OF THE DISTAL RECTUM:
TITLE2 : LOCAL RESECTION PLUS ADJUVANT 5-FU/RADIATION THERAPY, A PHASE II INTERGROUP
TITLE3 : STUDY

Record number 627
HSC : 94158 HURO :
SITE : DDEAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 9312
TITLE1 : SWOG 9312 - PHASE II EVALUATION OF CISPLATIN + 5-FU + RADIATION THERAPY IN
TITLE2 : PATIENTS WITH LOCALLY ADVANCED/INOPERABLE BLADDER CANCER
TITLE3 :

Record number 628
HSC : 94167 HURO :

SITE : WRAMC CSP : Y SE :
TOPE : RT : XR OG :
OGNAME :
TITLE1 : TUMORAL CALCINOSIS: A CLINICAL AND RADIOGRAPHIC REVIEW
TITLE2 :
TITLE3 :

Record number 629
HSC : 94239 HURO :
SITE : MAMC CSP : Y SE : SE
ISOTOPE : IN 111 RT : OG :
OGNAME :
TITLE1 : INDIUM-111 LABELED PENTETREOTIDE FOR CARCINOID
TITLE2 : TUMOR FOR PATIENT T.A., ONE-TIME EMERGENCY USE
TITLE3 :

Record number 630
HSC : 94278 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG109/SWO
TITLE1 : GOG 109/SWOG 8797 - RANDOMIZED COMPARISON OF 5-FU AND CISPLATIN AS ADJUNCT TO
TITLE2 : RADIATION THERAPY IN PATIENTS WITH STAGES 1-A2, 1-B AND II-A CARCINOMA OF THE
TITLE3 : CERVIX FOLLOWING RADICAL HYSTERECTOMY AND NODE DISSECTION PHASE III INTERGROUP

Record number 631
HSC : 94279 HURO :
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 123
TITLE1 : GOG 123 - A RANDOMIZED COMPARISON OF RADIATION THERAPY AND ADJUVANT
TITLE2 : HYSTERECTOMY VERSUS RADIATION AND WEEKLY CISPLATIN AND ADJUVANT HYSTERECTOMY
TITLE3 : IN PTS WITH BULKY STAGE 1B CARCINOMA OF THE CERVIX (PHASE III), GOG 123

Record number 632
HSC : 94307 HURO :
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 125
TITLE1 : GOG 125 - EXTENDED FIELD RADIATION THERAPY WITH CONCOMITANT 5-FU INFUSION AND
TITLE2 : CISPLATIN CHEMOTHERAPY IN PATIENTS WITH CERVICAL CARCINOMA METASTATIC TO
TITLE3 : PARA-AORTIC LYMPH NODES, PHASE II

Record number 633
HSC : 94322 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 9008
TITLE1 : SWOG 9008 - TRIAL OF ADJUVANT CHEMORADIATION AFTER GASTRIC RESECTION FOR
TITLE2 : ADENOCARCINOMA, PHASE II

TITLE3 :

Record number 634
HSC : 94333 HURO :
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : COMPARISON OF A HIGH RESOLUTION COMPUTED TOMOGRAPHY TECHNIQUE AND FIBEROPTIC
TITLE2 : BRONCHOSCOPY IN THE EVALUATION OF HEMOPTYSIS
TITLE3 :

Record number 635
HSC : 0 HURO : A0069
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : OG :
OGNAME :
TITLE1 : EFFECT OF IODINE AND LITHIUM ON THE RELEASE OF THYROXINE FROM THE THYROID
TITLE2 : GLAND OF PATIENTS WITH THYROTOXICOSIS.
TITLE3 :

Record number 636
HSC : 0 HURO : A0079
SITE : WRAMC CSP : Y SE :
TOPE : RT : RT OG : OG
OGNAME : CALGB 7451
TITLE1 : CALGB 7451- COMBINATION RADIOTHERAPY AND CHEMOTHERAPY OF STAGE III HODGKIN'S
TITLE2 : DISEASE (PHASE III).
TITLE3 :

Record number 637
HSC : 0 HURO : A0151
SITE : WRAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : BROAD CLINICAL EVALUATION OF TECHNETIUM 99M LABELED STANNOUS GLUCOHEPLONATE AS
TITLE2 : A DIAGNOSTIC AGENT FOR STUDYING THE KIDNEY
TITLE3 :

Record number 638
HSC : 0 HURO : A0221
SITE : WBAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : 99MTC-SN-DTPA CHELATE IN THE DETECTION OF VESICOURETERAL REFLUX.
TITLE2 :
TITLE3 :

Record number 639
HSC : 0 HURO : A0342

SITE : WRAMC CSP : Y SE : SE
ISOTOPE : I ? RT : OG :
OGNAME :
TITLE1 : USE OF FLUORESCENT THYROID SCANNING TO EVALUATE IODINE KINETICS DURING
TITLE2 : PROPYLITHIOURACIL THERAPY OF GRAVES DISEASE.
TITLE3 :

Record number 640
HSC : 0 HURO : A0374
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : CALGB 7291
TITLE1 : CALGB 7291- CLINICAL EVALUATION OF POST-OPERATIVE RADIOTHERAPY AND DRUG
TITLE2 : COMBINATION IN THE TREATMENT OF CHILDHOOD RHABDOMYOSARCOMA.
TITLE3 :

Record number 641
HSC : 0 HURO : A0404
SITE : BAMC CSP : Y SE : SE
ISOTOPE : IN 111 RT : OG :
OGNAME :
TITLE1 : CLINICAL EVALUATION OF CISTERNOGRAPHY UTILIZING 111 INDIUM DTPA.
TITLE2 :
TITLE3 :

Record number 642
HSC : 0 HURO : A0498
SITE : TAMC CSP : Y SE : SE
ISOTOPE : IN 111 RT : OG :
OGNAME :
TITLE1 : CLINICAL EVALUATION OF CISTERNOGRAPHY, UTILIZING INDIUM-111 DTPA.
TITLE2 :
TITLE3 :

Record number 643
HSC : 0 HURO : A0512
SITE : LAMC CSP : Y SE : SE
ISOTOPE : TL 201 RT : OG :
OGNAME :
TITLE1 : THALLIUM-201 CHLORIDE FOR DIAGNOSIS OF MYOCARDIAL ISCHEMIA AND/OR MYOCARDIAL
TITLE2 : INFARCTION.
TITLE3 :

Record number 644
HSC : 0 HURO : A0596
SITE : WBAMC CSP : Y SE :
ISOTOPE : UNSPEC RT : OG :
OGNAME :
TITLE1 : MYOCARDIAL PERFUSION SCANNING WITH RADIOACTIVE PARTICLES.
TITLE2 :

TITLE3 :

Record number 645
HSC : 0 HURO : A0768
SITE : TAMC CSP : Y SE : SE
ISOTOPE : I 123 RT : OG :
OGNAME :
TITLE1 : CLINICAL EVALUATION OF THE THYROID BY IN VIVO RADIONUCLIDIC STUDIES UTILIZING
TITLE2 : 123I.
TITLE3 :

Record number 646
HSC : 79490 HURO : A0809
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : CALGB 7651
TITLE1 : CALGB 7651 - COMBINATION CHEMOTHERAPY FOR STAGES III AND IV LYMPHOCYTIC
TITLE2 : LYMPHOMA IN ADULTS WITH OR WITHOUT RADIOTHERAPY CONSOLIDATION - CALGB 7651
TITLE3 :

Record number 647
HSC : 0 HURO : A0825
SITE : TAMC CSP : Y SE :
ISOTOPE : AM 241 RT : OG :
OGNAME :
TITLE1 : CLINICAL EVALUATION OF FLUORESCENT SCANNING OF THE THYROID WITH AMERICIUM
TITLE2 : (EXTERNAL SOURCE)
TITLE3 :

Record number 648
HSC : 0 HURO : A0891
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG :
OGNAME :
TITLE1 : THE TREATMENT OF UNRESECTABLE BRONCHOGENIC CARCINOMA WITH CCNU,
TITLE2 : CYCLOPHOSPHAMIDE, ADRIAMYCIN, PROCARBAZINE, HEXAMETHYLMELAMINE, METHOTREXATE
TITLE3 : AND IRRADIATION.

Record number 649
HSC : 0 HURO : A1031
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 24
TITLE1 : GOG 24 - TREATMENT OF WOMEN WITH CERVICAL CANCER STAGE IIB, IIIB, IVA
TITLE2 : CONFINED TO THE PELVIS AND/OR PARA-AORTIC WITH RADIOTHERAPY ALONE VS.
TITLE3 : RADIOTHERAPY AND IMMUNOTHERAPY (INTRAVENOUS C-PARVUM) (PHASE II).

Record number 650
HSC : 0 HURO : A1034

SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 29
TITLE1 : GOG 29 - A RANDOMIZED COMPARISON OF PELVIC AND ABDOMINAL RADIATION THERAPY
TITLE2 : VS. PELVIC RADIATION AND MELPHALAN ALONE IN STAGE II CARCINOMA OF THE OVARY,
TITLE3 : PHASE III.

Record number 651
HSC : 79131 HURO : A1049
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : CALGB 7612
TITLE1 : CALGB 7612- ACUTE LYMPHOCYTIC LEUKEMIA IN ADULTS: COMPARISON OF VINCRISTINE,
TITLE2 : PREDNISONE AND L-ASPARAGINASE WITH OR WITHOUT DAUNORUBICIN FOR INDUCTION WITH
TITLE3 : CENTRAL NERVOUS SYSTEM PROPHYLAXIS WITH RADIOTHERAPY AND INTRATHECAL METHO*

Record number 652
HSC : 79480 HURO : A1053
SITE : WRAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : ESOPHAGEAL CLEARING, QUANTITATED BY RADIOISOTOPE SCAN.
TITLE2 :
TITLE3 :

Record number 653
HSC : 79481 HURO : A1054
SITE : WRAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : ESOPHAGEAL EMPTYING IN ACHALASIA, QUANTITATED BY A RADIOISOTOPE METHOD.
TITLE2 :
TITLE3 :

Record number 654
HSC : 0 HURO : A1073
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 7628
TITLE1 : SWOG 7628 - COMBINED CHEMOTHERAPY/RADIATION THERAPY/IMMUNOTHERAPY FOR SMALL
TITLE2 : CELL (OAT CELL) CARCINOMA OF THE LUNG, PHASE III.
TITLE3 :

Record number 655
HSC : HURO : A1093
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 7618
TITLE1 : SWOG 7618 - COMBINED PREOPERATIVE ADJUVANT THERAPY IN RECTAL CARCINOMA
TITLE2 :

TITLE3 :

Record number 656

HSC	: 0	HURO	: A1127		
SITE	: MAMC	CSP	: Y	SE	:
ISOTOPE	:	RT	: RT	OG	: OG

OGNAME : SWOG 7620
TITLE1 : SWOG 7620 - TREATMENT OF EARLY SQUAMOUS CELL CARCINOMA OF THE HEAD AND NECK
TITLE2 : WITH CHEMOTHERAPY OR CHEMOIMMUNOTHERAPY FOLLOWING INITIAL SURGERY AND/OR
TITLE3 : RADIOTHERAPY.

Record number 657

HSC	: 0	HURO	: A1135		
SITE	: MAMC	CSP	: Y	SE	:
ISOTOPE	:	RT	: RT	OG	: OG

OGNAME : SWOG 7628
TITLE1 : SWOG 7628 - COMBINED CHEMOTHERAPY/RADIATION THERAPY/IMMUNOTHERAPY FOR OAT CELL
TITLE2 : CANCER OF THE LUNG.
TITLE3 :

Record number 658

HSC	: 0	HURO	: A1157		
SITE	: BAMC	CSP	: Y	SE	:
ISOTOPE	:	RT	: RT	OG	: OG

OGNAME : SWOG 7620
TITLE1 : SWOG 7620 - TREATMENT OF EARLY SQUAMOUS CELL CARCINOMA OF THE HEAD AND NECK
TITLE2 : WITH CHEMOTHERAPY OR CHEMOIMMUNOTHERAPY FOLLOWING INITIAL SURGERY AND/OR
TITLE3 : RADIOTHERAPY.

Record number 659

HSC	: 0	HURO	: A1174		
SITE	: MAMC	CSP	: Y	SE	:
ISOTOPE	:	RT	: RT	OG	: OG

OGNAME : SWOG 7518
TITLE1 : SWOG 7518 - STAGE III A AND B HODGKIN'S DISEASE REMISSION INDUCTION BY
TITLE2 : RADIATION THERAPY PLUS CHEMOTHERAPY COMBINATION VS. CHEMOTHERAPY ALONE.
TITLE3 :

Record number 660

HSC	: 0	HURO	: A1199		
SITE	: WBAMC	CSP	: Y	SE	:
ISOTOPE	: UNSPEC	RT	:	OG	:

OGNAME :
TITLE1 : RADIONUCLIDE ANGIOCARDIOGRAPHIC EVALUATION OF CARDIOPULMONARY FUNCTION USING A
TITLE2 : MOBILE DUAL CARDIAC PROBE.
TITLE3 :

Record number 661

HSC	: 0	HURO	: A1222

SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : CALGB 7691
TITLE1 : CALGB 7691- COMPARISON OF INVOLVED FIELD RADIOTHERAPY WITH INVOLVED FIELD
TITLE2 : RADIOTHERAPY WITH ADJUVANT MOPP CHEMOTHERAPY AND EXTENDED FIELD RADIOTHERAPY
TITLE3 : IN THE TREATMENT OF STAGE I AND II HODGKIN'S DISEASE IN CHILDREN. PHASE III.

Record number 662
HSC : 0 HURO : A1230
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 7703
TITLE1 : SWOG 7703 - RADIATION THERAPY IN COMBINATION WITH BCNU, DTIC OR PROCARBAZINE
TITLE2 : IN PATIENTS WITH MALIGNANT GLIOMAS OF THE BRAIN - PHASE III.
TITLE3 :

Record number 663
HSC : 80060 HURO : A1399
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : CALGB 7781
TITLE1 : CALGB 7781 - SMALL CELL CARCINOMA OF THE LUNG: LOCALIZED DISEASE. A PHASE III
TITLE2 : STUDY COMBINATION CHEMOTHERAPY VS ALTERNATING CHEMOTHERAPY AND RADIOTHERAPY
TITLE3 : WITH OR WITHOUT IMMUNOTHERAPY.

Record number 664
HSC : 0 HURO : A1411
SITE : LAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : TECHNETIUM 99M PYRIDOXYLIDENEGLUTAMATE (99M-TC-PG) FOR DIAGNOSIS OF
TITLE2 : HEPATOBILIARY DISEASE.
TITLE3 :

Record number 665
HSC : 0 HURO : A1427
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG :
OGNAME :
TITLE1 : CNS TUMOR PROTOCOL FOR STUDY OF COMBINED SURGERY, CHEMOTHERAPY AND
TITLE2 : RADIOTHERAPY.
TITLE3 :

Record number 666
HSC : 0 HURO : A1560
SITE : BAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : TECHNETIUM 99M PYRIDOXYLIDENEGLUTAMATE (99M-TIEPG) FOR DIAGNOSIS OF
TITLE2 : HEPATOBILIARY DISEASE.

TITLE3 :

Record number 667
HSC : 78021 HURO : A1585
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 34
TITLE1 : GOG 34 - A RANDOMIZED STUDY OF ADRIAMYCIN AS AN ADJUVANT AFTER SURGERY AND
TITLE2 : RADIATION THERAPY IN PATIENTS WITH HIGH RISK ENDOMETRIAL CARCINOMA STAGE I AND
TITLE3 : OCCULT STAGE II

Record number 668
HSC : 0 HURO : A1586
SITE : WRAMC CSP : Y SE :
ISOTOPE : UNSPEC RT : OG :
OGNAME :
TITLE1 : PULMONARY ASPIRATION FROM GASTROESOPHAGEAL REFLUX DEFINED BY PULMONARY
TITLE2 : SCINTISCAN AND OVERNIGHT INTRA-ESOPHAGEAL PH MONITORING.
TITLE3 :

Record number 669
HSC : 0 HURO : A1597
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 7861
TITLE1 : SWOG 7861 - THERAPY WITH CELIAC ARTERY INFUSION 5-FLUOROURACIL PLUS RADIATION
TITLE2 : THERAPY FOLLOWED BY MITOMYCIN-C AND 5-FLUOROURACIL MAINTENANCE CHEMOTHERAPY
TITLE3 : FOR TREATMENT OF LOCALIZED ADENOCARCINOMA OF THE EXOCRINE PANCREAS.

Record number 670
HSC : 0 HURO : A1651
SITE : BAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : NONINVASIVE RADIOISOTOPE MEASUREMENT OF ESOPHAGEAL ACID CLEARANCE.
TITLE2 : TC 99M SULPHUR COLLOID
TITLE3 :

Record number 671
HSC : 80636 HURO : A1661
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 37
TITLE1 : GOG 37 - RANDOMIZED STUDY OF RADIATION THERAPY VS. PELVIC NODE RESECTION
TITLE2 : FOR PATIENTS WITH INVASIVE SQUAMOUS CELL CARCINOMA OF THE VULVA HAVING
TITLE3 : POSITIVE GROIN NODES.

Record number 672
HSC : 80635 HURO : A1662

SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 24
TITLE1 : GOG 24 - TREATMENT OF WOMEN WITH CERVICAL CANCER STAGE IIB, IIIB, IVA,
TITLE2 : CONFINED TO THE PELVIS AND/OR PARA-AORTIC NODES WITH RADIOTHERAPY ALONE VS
TITLE3 : RADIOTHERAPY PLUS IMMUNOTHERAPY (PHASE II)(IV C-PARVUM - A KILLED GERM)

Record number 673
HSC : 80641 HURO : A1664
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 34
TITLE1 : GOG 34 - RANDOMIZED STUDY OF ADRIAMYCIN AS AN ADJUVANT AFTER SURGERY AND
TITLE2 : RADIATION THERAPY IN PATIENTS WITH HIGH RISK ENDOMETRIAL CARCINOMA, STAGE I
TITLE3 : AND OCCULT STAGE II.

Record number 674
HSC : 80625 HURO : A1674
SITE : LAMC CSP : Y SE :
ISOTOPE : I 131 RT : OG :
OGNAME :
TITLE1 : INTRAVENOUS ADMINISTRATION OF 131I (NP-59) FOR ADRENAL EVALUATION AND IMAGING.
TITLE2 :
TITLE3 : STUDY TERMINATED AT LAMC BECAUSE OF BASE CLOSING

Record number 675
HSC : 0 HURO : A1735
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 7802
TITLE1 : SWOG 7802 - ADJUVANT THERAPY OF SOFT TISSUE SARCOMAS WITH RADIATION THERAPY
TITLE2 : VS. COMBINATION THERAPY.
TITLE3 :

Record number 676
HSC : 0 HURO : A1736
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 7863
TITLE1 : SWOG 7863 - CONCURRENT CHEMOTHERAPY - RADIATION THERAPY OF SELECTED HEAD AND
TITLE2 : NECK CANCER.
TITLE3 :

Record number 677
HSC : 0 HURO : A1756
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : CALGB 7751
TITLE1 : CALGB 7751- COMPARATIVE EFFECTIVENESS OF COMBINATION CHEMOTHERAPY ALONE AND
TITLE2 : WITH RADIATION THERAPY BY INVOLVED FIELD OR EXTENDED FIELD IN POOR RISK

TITLE3 : PATIENTS WITH STAGE I OR II HODGKIN'S DISEASE.

Record number 678
HSC : 0 HURO : A1771
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 781
TITLE1 : SWOG 781 - PHASE III PROTOCOL - RADIOTHERAPY - CHEMOTHERAPY (MOPP) FOR STAGES
TITLE2 : I AND II, A AND B HODGKIN'S.
TITLE3 :

Record number 679
HSC : 79470 HURO : A1786
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 37
TITLE1 : GOG 37 - RANDOMIZED STUDY OF RADIATION THERAPY VS. PELVIC NODE RESECTION
TITLE2 : FOR PATIENTS WITH INVASIVE SQUAMOUS CELL CARCINOMA OF THE VULVA HAVING
TITLE3 : POSITIVE GROIN NODES.

Record number 680
HSC : 0 HURO : A1816
SITE : WRAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : TECHNETIUM 99M PYRIDOXYLIDENEGLUTAMATE (99M-TC-PG) FOR DIAGNOSIS OF
TITLE2 : HEPATOBILIARY DISEASE
TITLE3 :

Record number 681
HSC : 0 HURO : A1839
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 7299
TITLE1 : SWOG 7299 - CLINICAL TRIAL OF RADIOTHERAPY AND CHEMOTHERAPY (CYCLOPHOSPHAMIDE,
TITLE2 : VINCRISTINE, AND ACTO-DACTINOMYCIN) IN MANAGING NON-METASTATIC EWING'S
TITLE3 : SARCOMA.

Record number 682
HSC : 0 HURO : A1847
SITE : WBAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : TECHNETIUM 99M PYRIDOXYLIDENEGLUTAMATE (99M-TC-PG) FOR DIAGNOSIS OF
TITLE2 : HEPATOBILIARY DISEASE.
TITLE3 :

Record number 683
HSC : 80646 HURO : A2074

SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 7994
TITLE1 : SWOG 7994 - THERAPY FOR EXTRAOCULAR RETINOBLASTOMA WITH CYCLOPHOSPHAMIDE,
TITLE2 : VINCRISTINE, ADRIAMYCIN, AND IRRADIATION.
TITLE3 :

Record number 684
HSC : 0 HURO : A2098
SITE : DDEAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : WRAMC 7810
TITLE1 : ADDENDUM #1 TO WRAMC 7810-PREVENTION OF GONADAL DAMAGE IN MEN TREATED WITH
TITLE2 : COMBINATION CHEMOTHERAPY/RADIOTHERAPY FOR HODGKIN'S DISEASE AND NON-HODGKIN'S
TITLE3 : LYMPHOMAS. SEE ALSO A-2367

Record number 685
HSC : 0 HURO : A2109
SITE : WBAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : CLINICAL EVALUATION OF 99M-TECHNETIUM DMSA AS A KIDNEY IMAGING AGENT.
TITLE2 :
TITLE3 :

Record number 686
HSC : 80252 HURO : A2131
SITE : FAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : TECHNETIUM 99M P-ISOPROPYLACETANILIDOIMINOACETIC ACID (99M-TC-PIPIDA) FOR
TITLE2 : DIAGNOSIS OF HEPATOBILIARY DISEASE.
TITLE3 :

Record number 687
HSC : 80309 HURO : A2172
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : XR OG :
OGNAME :
TITLE1 : THE NATIONAL STUDY OF CONTRAST MEDIA REACTIONS.
TITLE2 :
TITLE3 :

Record number 688
HSC : 80300 HURO : A2185
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : NPCP 1200
TITLE1 : NPCP 1200 - A COMPARISON OF ESTRACYT VS CIS-DIAMMINEDICHLOROPLATINUM (DDP)
TITLE2 : VSESTRACYT PLUS DDP IN PATIENTS WITH ADVANCED CARCINOMA OF THE PROSTATE WHO

TITLE3 : HAVE HAD EXTENSIVE IRRADIATION TO THE PELVIS OR LUMBOSACRAL AREA

Record number 689
HSC : 80282 HURO : A2198
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 7983
TITLE1 : SWOG 7983 - RADIATION THERAPY IN COMBINATION WITH CCNU IN PATIENTS WITHIN
TITLE2 : COMPLETELY RESECTED GLIOMAS OF THE BRAIN, GRADE I AND II.
TITLE3 :

Record number 690
HSC : 80128 HURO : A2210
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 7612
TITLE1 : POG 7612 - MOPP PLUS BLEO AND A-COP WITH IF RADIATION THERAPY IN STAGE III
TITLE2 : HODGKIN'S DISEASE IN CHILDREN - POG 7612
TITLE3 :

Record number 691
HSC : 0 HURO : A2214
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 7703
TITLE1 : SWOG 7703 - RADIATION THERAPY WITH BCNU, DTIC OR PROCARBAZINE IN MALIGNANT
TITLE2 : BRAIN GLIOMAS (PHASE III)
TITLE3 :

Record number 692
HSC : 80414 HURO : A2235
SITE : FAMC CSP : Y SE :
ISOTOPE : I 131 RT : OG :
OGNAME :
TITLE1 : INTRAVENOUS ADMINISTRATION OF 131-I-6-B IODOMETHYLNORCHOLESTEROL (NP-59) FOR
TITLE2 : ADRENAL EVALUATION AND IMAGING. LTC MCBILES SIGNATORY ON 1571 AS OF 25JUN93
TITLE3 :

Record number 693
HSC : 0 HURO : A2299
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG :
OGNAME :
TITLE1 : PREVENTION OF GONADAL DAMAGE IN WOMEN TREATED WITH COMBINATION CHEMOTHERAPY OR
TITLE2 : RADIOTHERAPY BELOW THE DIAPHRAGM
TITLE3 :

Record number 694
HSC : 80528 HURO : A2309

SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG :
OGNAME :
TITLE1 : PREVENTION OF GONADAL DAMAGE IN MEN TREATED WITH COMBINATION
TITLE2 : CHEMOTHERAPY/RADIOTHERAPY FOR HODGKINS DISEASE AND NON-HODKINS DISEASE
TITLE3 :

Record number 695
HSC : 80512 HURO : A2311
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 24
TITLE1 : GOG 24 - TREATMENT OF WOMEN WITH CERVICAL CANCER STAGE II-B, III-B AND IV-A
TITLE2 : CONFINED TO THE PELVIS AND/OR PARA-AORTIC NODES WITH RADIOTHERAPY VERSUS
TITLE3 : RADIOTHERAPY PLUS IMMUNOTHERAPY

Record number 696
HSC : 80516 HURO : A2315
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 34
TITLE1 : GOG 34 - A RANDOMIZED STUDY OF ADRIAMYCIN AFTER SURGERY AND RADIATION
TITLE2 : THERAPY IN PATIENTS WITH HIGH RISK ENDOMETRIAL CARCINOMA STAGE I AND OCCULT
TITLE3 : STAGE II

Record number 697
HSC : 80525 HURO : A2324
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 49
TITLE1 : GOG 49 - STUDY OF WOMEN WITH INVASIVE CARCINOMA OF THE CERVIX; STAGE IB AND
TITLE2 : STUDY OF RADIATION THERAPY IN PATIENTS WITH POSITIVE LYMPH NODES
TITLE3 :

Record number 698
HSC : 80540 HURO : A2335
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 49
TITLE1 : GOG 49 - A SURGICAL PATHOLOGICAL STUDY OF WOMEN WITH INVASIVE CARCINOMA OF THE
TITLE2 : CERVIX, STAGE 1B, RANDOMLY ASSIGEND RADIATION VS. NO FURTHER THERAPY INSELECTED
TITLE3 : PATIENTS

Record number 699
HSC : 80547 HURO : A2338
SITE : BAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : TECHNETIUM 99M DIETHYL-IDA FOR DIAGNOSIS OF HEPATOBILIARY AND GALL BLADDER
TITLE2 : PATHOLOGY.

TITLE3 :

Record number 700
HSC : 80565 HURO : A2361
SITE : WRAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : TECHNETIUM 99M HIDA (N-2-6-DIMETHYLOPHENL CARBAMOYLMETHYLIMINODIACETIC ACID)
TITLE2 : FOR HEPATOBILIARY SCINTIGRAPHY
TITLE3 :

Record number 701
HSC : 80596 HURO : A2363
SITE : WBAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 7965
TITLE1 : SWOG 7965 - TREATMENT OF EARLY SQUAMOUS CELL CARCINOMA OF HEAD & NECK WITH
TITLE2 : INITIAL SURGERY AND/OR RADIOTHERAPY FOLLOWED BY CHEMOTHERAPY VS. NO FURTHER
TITLE3 : TREATMENT, PHASE III.

Record number 702
HSC : 80598 HURO : A2364
SITE : WBAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 7983
TITLE1 : SWOG 7983 - RADIATION THERAPY IN COMBINATION WITH CCNU IN PATIENTS WITHIN
TITLE2 : COMPLETELY RESECTED GLIOMAS OF THE BRAIN, GRADE I & II
TITLE3 :

Record number 703
HSC : 0 HURO : A2367
SITE : WBAMC CSP : Y SE :
ISOTOPE : RT : RT OG :
OGNAME :
TITLE1 : PREVENTION OF GONADAL DAMAGE IN MEN TREATED WITH COMBINATION
TITLE2 : CHEMOTHERAPY/RADIOTHERAPY FOR HODGKIN'S DISEASE AND NON-HODGKIN'S
TITLE3 : LYMPHOMAS. SEE ALSO A-2098

Record number 704
HSC : 81004 HURO : A2377
SITE : WRAMC CSP : Y SE :
ISOTOPE : I 131 RT : OG :
OGNAME :
TITLE1 : INTRAVENOUS ADMINISTRATION OF 131-I-6-B IODOMETHYLNORCHOLESTEROL (NP-59) FOR
TITLE2 : ADRENAL EVALUATION AND IMAGING
TITLE3 :

Record number 705
HSC : 81012 HURO : A2378

SITE : MAMC CSP : Y SE :
TOPE : RT : RT OG : OG
OGNAME : GOG 24
TITLE1 : GOG 24 - TREATMENT OF WOMEN WITH CERVICAL CANCER STAGE IIB, IIIB, IVA
TITLE2 : CONFINED TO THE PELVIS AND/OR PARA-AORTIC NODES WITH RADIOTHERAPY VS.
TITLE3 : RADIOTHERAPY PLUS IMMUNOTHERAPY (NSC #220537) PHASE III

Record number 706
HSC : 0 HURO : A2390
SITE : BAMC CSP : Y SE : SE
ISOTOPE : IN 111 RT : OG :
OGNAME :
TITLE1 : CLINICAL EVALUATION OF CISTERNOGRAPHY UTILIZING 111-INDIUM DTPA (DIETHYLENE
TITLE2 : TRIAMINE PENTA ACETIC ACID)
TITLE3 :

Record number 707
HSC : 81024 HURO : A2394
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8066
TITLE1 : SWOG 8066 - ADJUVANT INTRAHEPATIC CHEMOTHERAPY WITH MITOMYCIN C AND
TITLE2 : 5-FLUOROURACIL COMBINED WITH HEPATIC RADIATION IN HIGH RISK PATIENTS WITH
TITLE3 : CARCINOMA OF THE COLON, PHASE II PILOT.

Record number 708
HSC : 0 HURO : A2433
SITE : WBAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : CLINICAL EVALUATION OF TECHNETIUM TC-99M PIPIDA-TIN AS A HEPATOBILIARY AGENT
TITLE2 :
TITLE3 :

Record number 709
HSC : 81057 HURO : A2457
SITE : WRAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : TECHNETIUM 99M DMSA FOR RENAL SCINTIGRAPHY
TITLE2 :
TITLE3 :

Record number 710
HSC : 81178 HURO : A2476
SITE : WRAMC CSP : Y SE :
OPE : RT : RT OG : OG
OGNAME : SWOG 8095
TITLE1 : SWOG 8095 - MULTIMODAL THERAPY OF METASTATIC EWING'S SARCOMA WITH CHEMOTHERAPY
TITLE2 : INCLUDING ADRIAMYCIN VINCRISTINE CYCLOPHOSPHAMIDE 5-FLUOROURACIL ACTINOMYCIN-D

TITLE3 : PLUS IRRADIATION AND SURGERY INTERGROUP EWING'S SARCOMA STUDY PHASE III

Record number 711
HSC : 81205 HURO : A2487
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : NCOG 9M91
TITLE1 : NCOG 9M91 - A NON-RANDOMIZED TRIAL OF COMBINATION CHEMOTHERAPY AND SEQUENTIAL
TITLE2 : HEMI-BODY RADIATION THERAPY IN HIGH TUMOR BURDEN MULTIPLE MYELOMA
TITLE3 :

Record number 712
HSC : 0 HURO : A2500
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG :
OGNAME :
TITLE1 : ADJUVANT CHEMOTHERAPY OF ADVANCED HEAD & NECK CANCER; AND PART B, INDUCTION
TITLE2 : CHEMOTHERAPY, SURGERY, RADIATION, & SUBSEQUENT ADJUVANT CHEMOTHERAPY FOR STAGE
TITLE3 : III AND IV SQUAMOUS CELL CARCINOMA OF THE HEAD & NECK

Record number 713
HSC : 0 HURO : A2501
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG :
OGNAME :
TITLE1 : ADJUVANT CHEMOTHERAPY FOLLOWING SURGERY AND/OR RADIATION FOR STAGE III AND IV
TITLE2 : HEAD AND NECK CANCER
TITLE3 :

Record number 714
HSC : 0 HURO : A2510
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : CALGB 8083
TITLE1 : CALGB 8083- LOCALIZED SMALL CELL CARCINOMA OF THE LUNG, PHASE III STUDY;
TITLE2 : SIMULTANEOUS CHEMOTHERAPY AND RADIOTHERAPY VS. SEQUENTIAL THERAPY
TITLE3 : (CHEMOTHERAPY, RADIOTHERAPY, CHEMOTHERAPY) VS. CHEMOTHERAPY ALONE

Record number 715
HSC : 81254 HURO : A2517
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8094
TITLE1 : SWOG 8094 - RADIOTHERAPY WITH AND WITHOUT CHEMOTHERAPY FOR MALIGNANT
TITLE2 : MESOTHELIOMA LOCALIZED TO ONE HEMITHORAX, PHASE III (INTERGROUP MESOTHELIOMA
TITLE3 : STUDY #1).

Record number 716
HSC : 0 HURO : A2525

SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG :
OGNAME :
TITLE1 : EVALUATION OF INDOMETHACIN AS A PROTECTIVE AGENT AGAINST RADIATION-INDUCED
TITLE2 : ESOPHAGITIS
TITLE3 :

Record number 717
HSC : 81268 HURO : A2531
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 7703
TITLE1 : SWOG 7703 - RADIATION THERAPY IN COMBINATION WITH BCNU DTIC OR PROCARBAZINE IN
TITLE2 : PATIENTS WITH MALIGNANT GLIOMAS OF THE BRAIN - SWOG 7703
TITLE3 :

Record number 718
HSC : 81281 HURO : A2546
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 7925
TITLE1 : SWOG 7925 - TREATMENT OF EARLY SQUAMOUS CELL CARCINOMA OF THE HEAD AND NECK
TITLE2 : WITH INITIAL SURGERY AND/OR RADIOTHERAPY FOLLOWED BY CHEMOTHERAPY VS NO
TITLE3 : FURTHER TREATMENT

Record number 719
HSC : 0 HURO : A2565
SITE : LAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : TECHNETIUM 99M DISOFENIN KIT FOR HEPATOBILIARY IMAGING
TITLE2 :
TITLE3 :

Record number 720
HSC : 81329 HURO : A2575
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 37
TITLE1 : GOG 37 - A RANDOMIZED STUDY OF RADIATION THERAPY VS PELVIC NODE RESECTION
TITLE2 : FOR PATIENTS W/INVASIVE SQUAMOUS CELL CARCINOMA OF VULVA HAVING POSITIVE GROIN
TITLE3 : NODES

Record number 721
HSC : 81328 HURO : A2577
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 49
TITLE1 : GOG 49 - A SURGICAL PATHOLOGIC STUDY OF WOMEN WITH INVASIVE CARCINOMA OF
TITLE2 : THE CERVIX, STAGE IB AND RANDOMLY ASSIGNED RADIATION THERAPY VS NO THERAPY IN

TITLE3 : SELECTED PATIENTS, PHASE III- GOG 49

Record number 722

HSC	: 81448	HURO	: A2774		
SITE	: BAMC	CSP	: Y	SE	:
ISOTOPE	:	RT	: RT	OG	: OG

OGNAME : SWOG 7612
TITLE1 : SWOG 7612 - COMPARISON OF INVOLVED FIELD (IF) RADIOTHERAPY AND MOPP + LOW
TITLE2 : BLEOMYCIN WITH IF RADIOGRAPHY AND A-COPP IN STAGE III HODGKINS DISEASE
TITLE3 :

Record number 723

HSC	: 81451	HURO	: A2777		
SITE	: BAMC	CSP	: Y	SE	:
ISOTOPE	:	RT	: RT	OG	: OG

OGNAME : SWOG 7703
TITLE1 : SWOG 7703 - RADIATION THERAPY WITH BCNU, DTIC OR PROCARBAZINE IN MALIGNANT
TITLE2 : BRAIN GLIOMAS (PHASE III)
TITLE3 :

Record number 724

HSC	: 81484	HURO	: A2794		
SITE	: TAMC	CSP	: Y	SE	:
TOPE	:	RT	: RT	OG	: OG

OGNAME : SWOG 7612
TITLE1 : SWOG 7612 - COMPARISON OF INVOLVED FIELD (IF) RADIOTHERAPY PLUS MOPP AND LOW
TITLE2 : BLEOMYCIN WITH IF RADIOTHERAPY AND A-COPP IN STAGE III HODGKINS DISEASE
TITLE3 :

Record number 725

HSC	: 81488	HURO	: A2798		
SITE	: TAMC	CSP	: Y	SE	:
ISOTOPE	:	RT	: RT	OG	: OG

OGNAME : SWOG 7660
TITLE1 : SWOG 7660 - COMPARISON OF INVOLVED FIELD RADIOTHERAPY WITH ADJUVANT MOPP
TITLE2 : CHEMOTHERAPY IN THE TREATMENT OF STAGE I AND II HODGKIN'S DISEASE PHASE III
TITLE3 :

Record number 726

HSC	: 81498	HURO	: A2808		
SITE	: TAMC	CSP	: Y	SE	:
ISOTOPE	:	RT	: RT	OG	: OG

OGNAME : SWOG 7905
TITLE1 : SWOG 7905 - A-COP PLUS FOR NON-HODGKIN'S LYMPHOMA IN CHILDREN, PHASE III
TITLE2 :
TITLE3 :

Record number 727

HSC	: 81501	HURO	: A2811

SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 7994
TITLE1 : SWOG 7994 - THERAPY FOR EXTRAOCULAR RETINOBLASTOMA WITH CYCLOSPHOSPHAMIDE, VINC
TITLE2 : RISTINE, ADRIAMYCIN, AND IRRADIATION
TITLE3 :

Record number 728
HSC : 81534 HURO : A2839
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : CCG 251
TITLE1 : CCG 251 - TREATMENT OF NEWLY DIAGNOSED ACUTE NON-LYMPHOCYTIC LEUKEMIA
TITLE2 : W/MULTIAGENT CHEMOTHERAPY (CYCLIC VS CONTINUOUS) OR BONE MARROW
TITLE3 : TRANSPLANTATION FOLLOWING TOTAL BODY IRRADIATION

Record number 729
HSC : 81528 HURO : A2840
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 53
TITLE1 : GOG 53 - RANDOMIZED DOUBLE BLIND CLINICAL TRIAL EVALUATING CHOLESTYRAMINE
TITLE2 : PROPHYLAXIS FOR RADIATION INDUCED DIARRHEA, PHASE III
TITLE3 :

Record number 730
HSC : 81530 HURO : A2842
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 59
TITLE1 : GOG 59 - A RANDOMIZED COMPARISON OF EXTENDED FIELD RADIATION THERAPY AND
TITLE2 : HYDROXYUREA FOLLOWED BY CISPLATIN OR NO FURTHER THERAPY IN PATIENTS W/CERVICAL
TITLE3 : SQUAMOUS CELL CARCINOMA METASTATIC TO LYMPH NODES III - GOG 59

Record number 731
HSC : 82005 HURO : A2872
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : NSABP B-06
TITLE1 : NSABP B-06 - A PROTOCOL TO COMPARE SEGMENTAL MASTECTOMY AND AXILLARY
TITLE2 : DISSECTION WITH AND WITHOUT RADIATION OF THE BREAST AND TOTAL MASTECTOMY AND
TITLE3 : AXILLARY DISSECTION - NSABP B-06

Record number 732
HSC : 82017 HURO : A2922
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 59
TITLE1 : GOG 59 - A RANDOMIZED COMPARISON OF EXTENDED FIELD RADIATION THERAPY AND
TITLE2 : HYDROXYUREA FOLLOWED BY CISPLATIN OR NO FURTHER THERAPY IN PATIENTS WITH

TITLE3 : CERVICAL SQUAMOUS CELL METASTATIC TO LYMPH NODES (PHASE III)

Record number 733
HSC : 82113 HURO : A2945
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : CALGB 8083
TITLE1 : CALGB 8083 - SUPERFRACTIONATION RADIOTHERAPY AND CHEMOTHERAPY FOR PATIENTS WITH
TITLE2 : SMALL CELL CARCINOMA OF THE LUNG WHO FAIL LOCALLY AFTER CHEMOTHERAPY ON CALGB
TITLE3 : 8083

Record number 734
HSC : 82104 HURO : A2946
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 8157
TITLE1 : POG 8157 - MULTI-AGENT CHEMOTHERAPY WITH ADJUVANT WHOLE BODY IRRADIATION IN
TITLE2 : HALF-BODY INCREMENTS IN PATIENTS WITH CLINICAL GROUP IV RHABDOMYOSARCOMA - POG
TITLE3 : 8157

Record number 735
HSC : 81553 HURO : A2955
SITE : WRAMC CSP : Y SE : SE
TOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : TECHNETIUM 99M ANTIMONY TRISULFIDE COLLOID FOR INTERSTITIAL
TITLE2 : LYMPHOSCINTIGRAPHY. ADDENDUM APPROVED 7 JUL 83
TITLE3 :

Record number 736
HSC : 82236 HURO : A3006
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8102
TITLE1 : SWOG 8102 - WHOLE BRAIN IRRADIATION AND INTRATHECAL METHOTREXATE IN TREATMENT
TITLE2 : OF SOLID TUMORS LEPTOMENINGEAL METASTASES, PHASE II
TITLE3 :

Record number 737
HSC : 82287 HURO : A3040
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : NCOG 6G81
TITLE1 : NCOG 6G81 - A RANDOMIZED PHASE II STUDY OF IRRADIATION, IRRADIATION PLUS
TITLE2 : MISONIDAZOLE, AND IRRADIATION PLUS BCNU FOR THE TREATMENT OF METASTASES TO THE
TITLE3 : BRAIN - NCOG 6G81

Record number 738
HSC : 80209 HURO : A3049

SITE : LAMC CSP : Y SE : SE
ISOTOPE : IN 111 RT : OG :
OGNAME :
TITLE1 : EVALUATION OF INDIUM OXINE IN-111 LABELED CELLULAR BLOOD COMPONENTS
TITLE2 :
TITLE3 :

Record number 739
HSC : 82149 HURO : A3076
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 56
TITLE1 : GOG 56 - RANDOMIZED COMPARISON OF HYDROXYUREA VS. MISONIDAZOLE AS AN ADJUNCT
TITLE2 : TO RADIATION THERAPY IN PATIENTS WITH STAGES IIB, III AND IVA CARCINOMA OF THE
TITLE3 : CERVIX AND NEGATIVE PARA-AORTIC NODES (PHASE III) - GOG 56

Record number 740
HSC : 82353 HURO : A3110
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : NCOG 3E81
TITLE1 : NCOG 3E81 - A PHASE II PROTOCOL OF HEAVY CHARGED PARTICLE RADIOTHERAPY FOR
TITLE2 : LOCALIZED ESOPHAGEAL SQUAMOUS CELL CARCINOMA
TITLE3 :

Record number 741
HSC : 82355 HURO : A3111
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : NCOG35801J
TITLE1 : NCOG 35801J-A PHASE III STUDY COMPARING ADRIAMYCIN AND FTORAFUR VS. RADIATION
TITLE2 : AND ADRIAMYCIN + FTORAFUR VS. MITOMYCIN C + FTORAFUR FOR PATIENTS WITH
TITLE3 : DISSEMINATED GASTRIC CANCER

Record number 742
HSC : 82354 HURO : A3133
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : NCOG 3S91
TITLE1 : NCOG 3S91 - A PHASE I-II STUDY EVALUATING THE TOXICITY AND EFFECTIVENESS OF
TITLE2 : CHARGED PARTICLE RADIOTHERAPY FOR PATIENTS WITH UNRESECTABLE LOCALIZED GASTRIC
TITLE3 : CARCINOMA.

Record number 743
HSC : 82368 HURO : A3195
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 59
TITLE1 : GOG 59 - EXTENDED FIELD RADIATION THERAPY AND HYDROXYUREA (NSC 032065)
TITLE2 : FOLLOWED BY RANDOMIZED CISPLATIN (NSC 119875) OR NO FURTHER THERAPY IN PTS

TITLE3 : WITH CERVICAL SQUAMOUS CELL CARCINOMA METASTATIC TO LYMPH NODES (PHASE III)

Record number 744
HSC : 82465 HURO : A3258
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8104
TITLE1 : SWOG 8104 - TREATMENT OF ADVANCED SEMINOMA (STAGE CII(N4) + CIII) WITH
TITLE2 : COMBINED CHEMOTHERAPY AND RADIATION THERAPY, PHASE II
TITLE3 :

Record number 745
HSC : 82474 HURO : A3284
SITE : BAMC CSP : Y SE :
ISOTOPE : I ? RT : OG :
OGNAME :
TITLE1 : EVALUATION OF SODIUM IPODATE AS AN ADJUNCTIVE THERAPY TO RADIOACTIVE IODINE
TITLE2 : FOR GRAVES' HYPERTHYROIDISM
TITLE3 :

Record number 746
HSC : 82627 HURO : A3354
SITE : BAMC CSP : Y SE :
TOPE : RT : RT OG : OG
OGNAME : SWOG 8269
TITLE1 : SWOG 8269 - CONCURRENT CHEMO-RADIOTHERAPY FOR LIMITED SMALL CELL CARCINOMA OF
TITLE2 : THE LUNG, PHASE II - PILOT
TITLE3 :

Record number 747
HSC : 82599 HURO : A3408
SITE : BAMC CSP : Y SE : SE
ISOTOPE : IN 111 RT : OG :
OGNAME :
TITLE1 : EVALUATION OF INDIUM OXINE IN-111 LABELED CELLULAR BLOOD COMPONENTS
TITLE2 :
TITLE3 :

Record number 748
HSC : 83004 HURO : A3435
SITE : WRAMC CSP : Y SE : SE
ISOTOPE : IN 111 RT : OG :
OGNAME :
TITLE1 : EVALUATION OF INDIUM OXINE IN-111 LABELED CELLULAR BLOOD COMPONENTS.
TITLE2 :
TITLE3 :

Record number 749
HSC : 83057 HURO : A3447

SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 8157
TITLE1 : POG 8157 - MULTI-AGENT CHEMOTHERAPY WITH ADJUVANT WHOLE-BODY IRRADIATION IN
TITLE2 : HALF-BODY INCREMENTS IN PATIENTS WITH CLINICAL GROUP IV RHABDOMYOSARCOMA.
TITLE3 :

Record number 750
HSC : 83017 HURO : A3459
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG812425
TITLE1 : SWOG 8124/25 - TREATMENT OF ACUTE NON-LYMPHOCYTIC LEUKEMIA WITH CONVENTIONAL
TITLE2 : INDUCTION, CONSOLIDATION CHEMOTHERAPY: MAINTENANCE WITH CHEMO-THERAPY VERSUS
TITLE3 : BONE MARROW TRANSPLANTATION FOLLOWING TOTAL BODY IRRADIATION, PHASE III.

Record number 751
HSC : 83020 HURO : A3462
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8210
TITLE1 : SWOG 8210 - A COMPARISON OF AGGRESSIVE RADIOTHERAPY + CHEMOTHERAPY VS
TITLE2 : AGGRESSIVE CHEMOTHERAPY IN THE TREATMENT OF LIMITED CARCINOMA OF THE PANCREAS,
TITLE3 : PHASE III.

Record number 752
HSC : 83111 HURO : A3468
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8229
TITLE1 : SWOG 8229 - COMBINED MODALITY THERAPY FOR MULTIPLE MYELOMAS VMCP-VBAP FOR
TITLE2 : REMISSION INDUCTION THERAPY: VMCP+LEVAMISOLE VS SEQUENTIAL HALF-BODY
TITLE3 : RADIOTHERAPY + VINCRISTINE-PREDNISONE.

Record number 753
HSC : 83152 HURO : A3474
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8232
TITLE1 : SWOG 8232 - TREATMENT OF SQUAMOUS CELL LUNG CANCER WITH VP-16/CIS-PLATINUM
TITLE2 : ALTERNATING WITH VINCRISTINE/ADREAMYCIN/CYCLOPHOSPHAMIDE AND RADIATION VS
TITLE3 : CONCURRENT VP-16/VINCRISTINE/ADRIAMYCIN/CYCLOPHOSPHAMIDE AND RADIATION, PH III

Record number 754
HSC : 82697 HURO : A3508
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8095
TITLE1 : SWOG 8095 - MULTIMODAL THERAPY OF METASTATIC EWING'S SARCOMA WITH CHEMOTHERAPY
TITLE2 : INCLUDING ADRIAMYCIN, VINCRISTINE, CYCLOPHASPHAMIDE, 5-FLUOROURACIL,

TITLE3 : ACTINOMYCIN-D, PLUS RADIATION AND SURGERY (IF FEASIBLE).

Record number 755
HSC : 82699 HURO : A3510
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 8103
TITLE1 : POG 8103 - HEPATOMA III, TREATMENT OF HEPATOBLASTOMA AND HEPATOCELLULAR
TITLE2 : CARCINOMA (H-HCC) IN CHILDREN WITH SURGERY, RADIATION AND CHEMOTHERAPY (PHASE
TITLE3 : III).

Record number 756
HSC : 82707 HURO : A3518
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 7612
TITLE1 : POG 7612 - COMPARISON OF INVOLVED FIELD (IF) RADIOTHERAPY AND MOPP + LOW
TITLE2 : BLEOMYCIN WITH IF RADIOTHERAPY AND A-COPP IN STAGE III HODGKIN'S DIEASE.
TITLE3 :

Record number 757
HSC : 83209 HURO : A3548
SITE : FAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : POG 8157
TITLE1 : POG 8157 - MULTI-AGENT CHEMOTHERAPY WITH ADJUVANT WHOLE-BODY IRRADIATION IN
TITLE2 : HALF-BODY INCREMENTS IN PATIENTS WITH CLINICAL GROUP IV RHABDOMYSARCOMA.
TITLE3 :

Record number 758
HSC : 82669 HURO : A3584
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : NPCP 1600
TITLE1 : NPCP 1600: COMPARISON OF STILPHOSTROL, MEGACE, AND STREPTOZOTOCIN AS SINGLE
TITLE2 : AGENTS AND MEGACE+MINIDOSE ESTROGEN IN PTS WITH HORMONE REFRACTORY CARCINOMA
TITLE3 : OF PROSTATE WHO HAD EXTENSIVE IRRADIATION, >2000R TO PELVIS OR LUMBOSACRAL

Record number 759
HSC : 0 HURO : A3611
SITE : FAMC CSP : Y SE : SE
ISOTOPE : IN 111 RT : OG :
OGNAME :
TITLE1 : EVALUATION OF INDIUM OXINE IN-111 LABELED CELLULAR BLOOD COMPONENTS
TITLE2 :
TITLE3 :

Record number 760
HSC : 83343 HURO : A3618

SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : GOG 71
TITLE1 : GOG 71 - PTS WITH SUBOPTIMAL STAGE IB CARCINOMA OF CERVIX: RANDOMIZED
TITLE2 : RADIATION THERAPY AND POST-TREATMENT PARA AORTIC AND COMMON ILIAC
TITLE3 : LYMPHADENECTOMY VS RADIATION LYMPHADENECTOMY AND EXTRAFASCIAL HYSTERECOMY.

Record number 761
HSC : 83346 HURO : A3621
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8232
TITLE1 : SWOG 8232 - TREATMENT OF SMALL CELL LUNG CANCER WITH VP-16/CIS-PLATINUM,
TITLE2 : ALTERNATING WITH VINCRISTINE/ADRIAMYCIN/CYCLOPHOSPHAMIDE AND RADIATION VS
TITLE3 : CONCURRENT VP-16/VINCRISTINE/ADRIMYCIN/CYCLOPHOSPHAMIDE AND RADIATION, PH III.

Record number 762
HSC : 83405 HURO : A3675
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : NCOG 6G821
TITLE1 : NCOG 6G821- PHASE I-II STUDY OF RADIOTHERAPY PLUS BUDR AND PROCARBAZINE, CCNU,
TITLE2 : VINCRISTINE (PCV) FOR THE TREATMENT OF PRIMARY MALIGNANT BRAIN TUMORS.
TITLE3 :

Record number 763
HSC : 83421 HURO : A3680
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8263
TITLE1 : SWOG 8263 - COMBINED RADIATION THERAPY AND CHEMOTHERAPY AS ADJUVANT TREATMENT
TITLE2 : FOR DUKE'S B-2-C COLON CANCER, PHASE I - II
TITLE3 :

Record number 764
HSC : 83431 HURO : A3689
SITE : MAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8272
TITLE1 : SWOG 8272 - TREATMENT OF PRIMARY BRAIN TUMORS WITH ADJUVANT CHEMOTHERAPY AND
TITLE2 : RADIATION THERAPY UTILIZING INTRA-ARTERIAL CIS-PLATINUM AND CCNU, PHASE I -
TITLE3 : II, PILOT.

Record number 765
HSC : 83499 HURO : A3763
SITE : TAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8104
TITLE1 : SWOG 8104 - TREATMENT OF ADVANCED SEMINOMA (STAGE C11) (N4) + C111) WITH
TITLE2 : COMBINED CHEMOTHERAPY AND RADIATION THERAPY, PHASE II

TITLE3 :

Record number 766
HSC : 83558 HURO : A3800
SITE : WBAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8210
TITLE1 : SWOG 8210 - A COMPARISON OF AGGRESSIVE RADIOTHERAPY PLUS CHEMOTHERAPY VS
TITLE2 : AGGRESSIVE CHEMOTHERAPY IN THE TREATMENT OF LIMITED CARCINOMA OF THE PANCREAS,
TITLE3 : PHASE III - SWOG 8210

Record number 767
HSC : 83559 HURO : A3801
SITE : WBAMC CSP : Y SE :
ISOTOPE : RT : RT OG : OG
OGNAME : SWOG 8229
TITLE1 : SWOG 8229 - COMBINED THERAPY FOR MULTIPLE MYELOMA, VMCP-VBAP FOR REMISSION:
TITLE2 : VMCP+LEVAMISOLE VS SEQUENTIAL HALF-BODY RADIATION+VINCRISTINE-PREDNISONE FOR
TITLE3 : PATIENTS WHO FAIL TO ACHIEVE REMISSION STATUS WITH CHEMOTHERAPY ALONE, PH III

Record number 768
HSC : 84002 HURO : A3813
SITE : BAMC CSP : Y SE :
ISOTOPE : RT : RT OG :
OGNAME :
TITLE1 : TREATMENT FOR LOCALLY ADVANCED NON-SMALL CELL LUNG CANCER: RADIATION
TITLE2 : THERAPY PLUS CIS-PLATINUM AND VP-16, A PILOT STUDY
TITLE3 :

Record number 769
HSC : 87082 HURO : A4616
SITE : MAMC CSP : N SE :
ISOTOPE : RT : OG :
OGNAME :
TITLE1 : CLINICAL AND FIELD TESTING OF THE NATIONAL BUREAU OF STANDARDS (NBS) HAND-HELD
TITLE2 : DENTAL X-RAY SYSTEM
TITLE3 :

Record number 770
HSC : 89004 HURO : A5020
SITE : WAMC CSP : N SE :
ISOTOPE : RT : OG :
OGNAME :
TITLE1 : CLINICAL TESTING OF THE LIGHTWEIGHT, SPECIAL FORCES X-RAY SYSTEM
TITLE2 :
TITLE3 :

Record number 771
HSC : 0 HURO : A5243

SITE : LAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : ASSESSMENT OF GLOMERULAR FILTRATION RATE IN INTENSIVE CARE PATIENTS WITH RENAL
TITLE2 : DYSFUNCTION USING 99TC-DTPA CLEARANCE.
TITLE3 :

Record number 772
HSC : 82596 HURO : AB110
SITE : WBAMC CSP : Y SE :
ISOTOPE : I 131 RT : OG :
OGNAME :
TITLE1 : DIAGNOSTIC ADRENAL SCANNING WITH 131-I NP-59
TITLE2 :
TITLE3 :

Record number 773
HSC : 79463 HURO : AB111
SITE : BAMC CSP : Y SE :
ISOTOPE : I 131 RT : OG :
OGNAME :
TITLE1 : INTRAVENOUS ADMINISTRATION OF 131I (NP-59) FOR ADRENAL EVALUATION AND IMAGING.
TITLE2 :
TITLE3 :

Record number 774
HSC : 0 HURO : AB129
SITE : FAMC CSP : Y SE : SE
ISOTOPE : IN 111 RT : OG :
OGNAME :
TITLE1 : BONE MARROW SCINTIGRAPHY AND SCINTIGRAPHIC LOCALIZATION OF SOFT TISSUE TUMORS
TITLE2 : BY USE OF INDIUM-111 CHLORIDE.
TITLE3 :

Record number 775
HSC : 0 HURO : AB130
SITE : LAMC CSP : Y SE : SE
ISOTOPE : IN 111 RT : OG :
OGNAME :
TITLE1 : CLINICAL EVALUATION OF CISTERNOGRAPHY, UTILIZING INDIUM-111 DTPA.
TITLE2 :
TITLE3 :

Record number 776
HSC : 0 HURO : AB131
SITE : WRAMC CSP : Y SE : SE
ISOTOPE : IN 111 RT : OG :
OGNAME :
TITLE1 : INVESTIGATIONAL USE OF INDIUM-111 DTPA.
TITLE2 :

TITLE3 :

Record number 777
HSC : 0 HURO : AB132
SITE : FAMC CSP : Y SE : SE
ISOTOPE : IN 111 RT : OG :
OGNAME :
TITLE1 : THE USE OF INDIUM-111 DTPA FOR THE STUDY OF CEREBROSPINAL FLUID PATHWAYS.
TITLE2 :
TITLE3 :

Record number 778
HSC : 0 HURO : AB138
SITE : LAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : CLINICAL EVALUATION OF RENAL CORTICAL IMAGING UTILIZING 99MTC-KIDNEY
TITLE2 : SCINTIGRAPHIN - (2, 3-DIMERCAPTO SUCCINIC ACID).
TITLE3 :

Record number 779
HSC : 0 HURO : AB150
SITE : WRAMC CSP : Y SE :
OPE : RT : RT OG : OG
OGNAME : CALGB 7391
TITLE1 : CALGB 7391- CLINICAL TRIAL OF RADIOTHERAPY AND CHEMOTHERAPY (CYCLOPHOSPHAMIDE,
TITLE2 : VINCRISTINE, AND ACTINOMYCIN-D) IN MANAGING NON-METASTATIC EWING'S SARCOMA.
TITLE3 :

Record number 780
HSC : 0 HURO : AC026
SITE : WRAMC CSP : Y SE :
ISOTOPE : RT : RT OG :
OGNAME :
TITLE1 : REQUEST TO EVALUATE CLEOCIN (7 CHLARO-7 DEOXYLINCOMYCIN) TISSUE LEVELS IN BONE
TITLE2 : AND IRRADICATED BONE.
TITLE3 :

Record number 781
HSC : 0 HURO : AC259
SITE : LAMC CSP : Y SE : SE
ISOTOPE : GA 67 RT : OG :
OGNAME :
TITLE1 : GALLIUM-67 CITRATE FOR DIAGNOSIS OF MALIGNANT NEOPLASMS AND/OR ABSCESS
TITLE2 : LOCALIZATIONS
TITLE3 :

Record number 782
HSC : 0 HURO : AC260

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SITE      : WBAMC                    CSP       : Y       SE        : SE
ISOTOPE   : GA 67                    RT        :         OG        :
OGNAME    :
TITLE1    : GALLIUM-67 CITRATE IN THE DIAGNOSIS OF SOFT TISSUE TUMORS.
TITLE2    :
TITLE3    :


Record number 783
HSC       : 0                        HURO      : AC262
SITE      : TAMC                     CSP       : Y       SE        : SE
ISOTOPE   : GA 67                    RT        :         OG        :
OGNAME    :
TITLE1    : THE USE OF GALLIUM-67 CITRATE FOR TUMOR SCANNING.
TITLE2    :
TITLE3    :


Record number 784
HSC       : 0                        HURO      : AC271
SITE      : LAMC                     CSP       : Y       SE        : SE
ISOTOPE   : I 123                    RT        :         OG        :
OGNAME    :
TITLE1    : CLINICAL EVALUATION OF 123I SODIUM IODIDE
TITLE2    :
TITLE3    :


Record number 785
HSC       : 0                        HURO      : AC272
SITE      : TAMC                     CSP       : Y       SE        :
ISOTOPE   : IN 111                   RT        :         OG        :
OGNAME    :
TITLE1    : INDIUM-111 BLEOMYCIN IN THE DIAGNOSIS OF TUMORS.
TITLE2    :
TITLE3    :


Record number 786
HSC       : 0                        HURO      : AC310
SITE      : WRAMC                    CSP       : Y       SE        : SE
ISOTOPE   : TC 99M                   RT        :         OG        :
OGNAME    :
TITLE1    : EVALUATION OF DEEP VEIN THROMBOSIS BY USE OF 99M TECHNETIUM LABELED
TITLE2    : MICROSPOHERES.
TITLE3    :


Record number 787
HSC       : 0                        HURO      : AC311
SITE      : WBAMC                    CSP       : Y       SE        : SE
ISOTOPE   : TC 99M                   RT        :         OG        :
OGNAME    :
TITLE1    : TECHNETIUM 99M PYROPHOSPHATE BONE SCANNING AGENTS IN THE DIAGNOSIS AND
TITLE2    : ASSESSMENT OF MYOCARDIAL INFARCTION.
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TITLE3 :

Record number 788

HSC	: 0	HURO	: AC312		
SITE	: WBAMC	CSP	: Y	SE	: SE
ISOTOPE	: TC 99M	RT	:	OG	:
OGNAME	:				

TITLE1 : BLOOD POOL IMAGING WITH TECHNETIUM-99 HUMAN SERUM ALBUMIN.
TITLE2 :
TITLE3 :

Record number 789

HSC	: 0	HURO	: AC336		
SITE	: LAMC	CSP	: Y	SE	: SE
ISOTOPE	: TC 99M	RT	:	OG	:
OGNAME	:				

TITLE1 : TECHNETIUM 99M DTPA FOR THE MEASUREMENT OF GLOMERULAR FILTDRATION RATE AND
TITLE2 : IMAGING OF THE KIDNEYS AND BRAIN.
TITLE3 :

Record number 790

HSC	: 0	HURO	: AC343		
SITE	: BAMC	CSP	: Y	SE	: SE
TOPE	: F 18	RT	:	OG	:
OGNAME	:				

TITLE1 : THE USE OF FLOURINE-18 AS A BONE SCANNING AGENT IN A VARIETY OF BONE DISEASES.
TITLE2 :
TITLE3 :

Record number 791

HSC	: 0	HURO	: AC363		
SITE	: WRAMC	CSP	: Y	SE	:
ISOTOPE	:	RT	: RT	OG	:
OGNAME	:				

TITLE1 : BCNU AND RADIOTHERAPY VERSUS BCNU, RADIOTHERPAY AND HYDROXYUREA FOR PRIMARY
TITLE2 : INTRACRANIAL MALIGNANT GLIOMA DOUBLE BLIND STUDY.
TITLE3 :

Record number 792

HSC	: 0	HURO	: AC380		
SITE	: WRAMC	CSP	: Y	SE	:
ISOTOPE	: CO 57	RT	:	OG	:
OGNAME	:				

TITLE1 : COBALT-57 BLEOMYCIN IN TUMOR IMAGING.
TITLE2 :
TITLE3 :

Record number 793

HSC	: 0	HURO	: AC415

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SITE      : BAMC                    CSP       : Y       SE        :
   TOPE   : IN 111                  RT        :         OG        :
OGNAME    :
TITLE1    : CLINICAL EVALUATION OF INDIUM 111 BLEOMYCIN (MPI TUMOR SCINTIGRAPHIN TM)
TITLE2    :
TITLE3    :


Record number 794
HSC       : 0                       HURO      : AC442
SITE      : BAMC                    CSP       : Y       SE        : SE
ISOTOPE   : I 123                   RT        :         OG        :
OGNAME    :
TITLE1    : CLINICAL EVALUATION OF THE THYROID BY IN VIVO RADIONUCLIDIC STUDIES UTILIZING
TITLE2    : IODIDE-123.
TITLE3    :


Record number 795
HSC       : 0                       HURO      : AC444
SITE      : LAMC                    CSP       : Y       SE        : SE
ISOTOPE   : IN 111                  RT        :         OG        :
OGNAME    :
TITLE1    : CLINICAL EVALUATION OF CISTERNOGRAPHY UTILIZING INDIUM 111 DTPA
TITLE2    :
TITLE3    :


Record number 796
HSC       : 0                       HURO      : AC449
SITE      : MAMC                    CSP       : Y       SE        : SE
ISOTOPE   : TC 99M                  RT        :         OG        :
OGNAME    :
TITLE1    : TECHNETIUM 99 MACROAGGREGATE
TITLE2    :
TITLE3    :


Record number 797
HSC       : 0                       HURO      : AC452
SITE      : WBAMC                   CSP       : Y       SE        : SE
ISOTOPE   : TC 99M                  RT        :         OG        :
OGNAME    :
TITLE1    : USE OF TECHNETIUM 99M POLYPHOSPHATE IN THE DIAGNOSIS OF BONE DISEASE.
TITLE2    :
TITLE3    :


Record number 798
HSC       : 0                       HURO      : AC458
SITE      : WBAMC                   CSP       : Y       SE        :
   OPE    : I 131                   RT        :         OG        :
OGNAME    :
TITLE1    : DIAGNOSTIC ADRENAL SCANNING WITH 131 INDOCHOLESTEROL.
TITLE2    :
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TITLE3 :

Record number 799
HSC : 0 HURO : AC463
SITE : LAMC CSP : Y SE :
ISOTOPE : RT : RT OG :
OGNAME :
TITLE1 : PHASE I STUDY OF ICRF-159 (NSC 129943) GIVEN ORALLY PLUS RADIATION THERAPY FOR
TITLE2 : THE TREATMENT OF BRONCHOGENIC CARCINOMA.
TITLE3 :

Record number 800
HSC : 0 HURO : AC498
SITE : WRAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : CLINICAL USE OF TECHNETIUM-99MPOLYPHOSPHATE.
TITLE2 :
TITLE3 :

Record number 801
HSC : 0 HURO : AC520
SITE : WRAMC CSP : Y SE : SE
TOPE : IN 111 RT : OG :
OGNAME :
TITLE1 : INVESTIGATIONAL NEW DRUG INDIUM-111 CHLORIDE FOR INTRAVENOUS INJECTION
TITLE2 :
TITLE3 :

Record number 802
HSC : 0 HURO : AC536
SITE : WRAMC CSP : Y SE : SE
ISOTOPE : GA 67 RT : OG :
OGNAME :
TITLE1 : THE USE OF GALLIUM-67 CITRATE FOR TUMOR SCANNING.
TITLE2 :
TITLE3 :

Record number 803
HSC : 0 HURO : AC537
SITE : WRAMC CSP : Y SE :
ISOTOPE : IN 111 RT : OG :
OGNAME :
TITLE1 : CLINICAL EVALUATION OF 111 INDIUM BLEOMYCIN (MPI TUMOR SCINTIGRAPHIN MT) WHICH
TITLE2 : IS PRESENTLY IN THE THIRD PHASE OF INVESTIGATION.
TITLE3 :

Record number 804
HSC : 0 HURO : AC538

SITE : WRAMC CSP : Y SE : SE
ISOTOPE : I 123 RT : OG :
OGNAME :
TITLE1 : CLINICAL EVALUATION OF THYROID BY IN VIVO RADIONUCLIDIC STUDIES UTILIZING
TITLE2 : I-123.
TITLE3 :

Record number 805
HSC : 0 HURO : AC539
SITE : WRAMC CSP : Y SE : SE
ISOTOPE : IN 111 RT : OG :
OGNAME :
TITLE1 : CLINICAL EVALUATION OF CISTERNOGRAPHY UTILIZING INDIUM-111 DTPA.
TITLE2 :
TITLE3 :

Record number 806
HSC : 0 HURO : AC551
SITE : WRAMC CSP : Y SE : SE
ISOTOPE : IN 111 RT : OG :
OGNAME :
TITLE1 : INVESTIGATIONAL USE OF INDIUM-111 DTPA.
TITLE2 :
TITLE3 :

Record number 807
HSC : 0 HURO : AC552
SITE : WRAMC CSP : Y SE : SE
ISOTOPE : IN 111 RT : OG :
OGNAME :
TITLE1 : INVESTIGATIONAL USE OF INDIUM-111 CHLORIDE.
TITLE2 :
TITLE3 :

Record number 808
HSC : 0 HURO : AC570
SITE : WRAMC CSP : Y SE : SE
ISOTOPE : GA 67 RT : OG :
OGNAME :
TITLE1 : GALLIUM-67 NITRATE IN DIAGNOSIS OF SOFT TISSUE TUMORS.
TITLE2 :
TITLE3 :

Record number 809
HSC : 0 HURO : AC571
SITE : WRAMC CSP : Y SE : SE
ISOTOPE : TC 99M RT : OG :
OGNAME :
TITLE1 : TECHNETIUM 99 STANNOUS POLYPHOSPHATE IN THE DIAGNOSIS OF BONE DISEASE IN
TITLE2 : PATIENTS.

TITLE3 :

Record number 810

HSC	: 0	HURO	: AC572		
SITE	: WRAMC	CSP	: Y	SE	: SE
ISOTOPE	: IN 111	RT	:	OG	:
OGNAME	:				
TITLE1	: CLINICAL EVALUATION OF CISTERNOGRAPHY UTILIZING INDIUM-111 DTPA.				
TITLE2	:				
TITLE3	:				

Record number 811

HSC	: 0	HURO	: AC578		
SITE	: WRAMC	CSP	: Y	SE	: SE
ISOTOPE	: GA 67	RT	:	OG	:
OGNAME	:				
TITLE1	: USE OF GALLIUM-67 CITRATE IN EVALUATION OF PATIENTS WITH KNOWN OR SUSPECTED				
TITLE2	: TUMORS AND PYOGENIC ABSCESSES.				
TITLE3	:				

Record number 812

HSC	: 0	HURO	: AC579		
SITE	: WRAMC	CSP	: Y	SE	: SE
ISOTOPE	: IN 111	RT	:	OG	:
OGNAME	:				
TITLE1	: THE USE OF INDIUM-111 DTPA FOR STUDY OF CEREBROSPINAL FLUID PATHWAYS.				
TITLE2	:				
TITLE3	:				

Record number 813

HSC	: 0	HURO	: AC580		
SITE	: WRAMC	CSP	: Y	SE	: SE
ISOTOPE	: IN 111	RT	:	OG	:
OGNAME	:				
TITLE1	: BONE MARROW SCINTIGRAPHY AND SCINTIGRAPHIC LOCALIZATION OF SOFT TISSUE TUMORS				
TITLE2	: BY USE OF INDIUM-111 CHLORIDE.				
TITLE3	:				

Record number 814

HSC	: 0	HURO	: AC613		
SITE	: WRAMC	CSP	: Y	SE	: SE
ISOTOPE	: IN 111	RT	:	OG	:
OGNAME	:				
TITLE1	: CLINICAL EVALUATION OF CISTERNOGRAPHY UTILIZING INDIUM-111 DTPA.				
TITLE2	:				
TITLE3	:				

Record number 815

HSC	: 0	HURO	: AC614

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SITE      : WRAMC                    CSP       : Y       SE        :
  TOPE    :                          RT        : RT      OG        :
OGNAME    :
TITLE1    : ADJUVANT THERAPY OF STAGE II TESTICULAR CARCINOMA WITH CHEMOTHERAPY, RADIATION
TITLE2    : THERAPY OR CHEMOTHERAPY PLUS RADIATION THERAPY.
TITLE3    :


Record number 816
HSC       : 0                        HURO      : AC643
SITE      : LAMC                     CSP       : Y       SE        :
ISOTOPE   :                          RT        : RT      OG        :
OGNAME    :
TITLE1    : BCNU AND IRRADIATION IN THE TREATMENT OF MALIGNANT GLIOMA OF THE BRAIN.
TITLE2    :
TITLE3    :


Record number 817
HSC       : 0                        HURO      : AC667
SITE      : WRAMC                    CSP       : Y       SE        : SE
ISOTOPE   : GA 67                    RT        :         OG        :
OGNAME    :
TITLE1    : INVESTIGATIONAL USE OF GALLIUM-67 CITRATE
TITLE2    :
TITLE3    :


Record number 818
HSC       : 0                        HURO      : AC680
SITE      : WRAMC                    CSP       : Y       SE        :
ISOTOPE   :                          RT        : RT      OG        : OG
OGNAME    :
TITLE1    : GROUP ... - ADJUVANT THERAPY OF STAGE II TESTICULAR CARCINOMA WITH
TITLE2    : CHEMOTHERAPY, RADIATION THERAPY, OR CHEMOTHERAPY PLUS RADIATION THERAPY
TITLE3    :


Record number 819
HSC       : 0                        HURO      : AC681
SITE      : LAMC                     CSP       : Y       SE        : SE
ISOTOPE   : IN 111                   RT        :         OG        :
OGNAME    :
TITLE1    : CLINICAL EVALUATION OF CISTERNOGRAPHY UTILIZING INDIUM-111 DTPA
TITLE2    :
TITLE3    :


Record number 820
HSC       : 0                        HURO      : AC686
SITE      : WBAMC                    CSP       : Y       SE        : SE
  TOPE    : TC 99M                   RT        :         OG        :
OGNAME    :
TITLE1    : TECHNETIUM 99M STANOUS POLYPHOSPHATE IN THE DIAGNOSIS OF BONE DISEASE IN
TITLE2    : PATIENTS
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TITLE3 :

Record number 821
HSC : 0 HURO : AC687
SITE : WBAMC CSP : Y SE : SE
ISOTOPE : GA 67 RT : OG :
OGNAME :
TITLE1 : GALLIUM-67 CITRATE IN DIAGNOSIS OF SOFT TISSUE TUMORS
TITLE2 :
TITLE3 :

Record number 822
HSC : 0 HURO : AC688
SITE : BAMC CSP : Y SE : SE
ISOTOPE : I 123 RT : OG :
OGNAME :
TITLE1 : CLINICAL EVALUATION OF THE THYROID BY IN-VIVO RADIONUCLIDIC STUDIES UTILIZING
TITLE2 : IODINE-123
TITLE3 :

Record number 823
HSC : 0 HURO : AC689
SITE : BAMC CSP : Y SE :
ISOTOPE : IN 111 RT : OG :
OGNAME :
TITLE1 : CLINICAL EVALUATION OF INDIUM-111 BLEOMYCIN
TITLE2 :
TITLE3 :

Record number 824
HSC : 0 HURO : AC690
SITE : TAMC CSP : Y SE : SE
ISOTOPE : GA 67 RT : OG :
OGNAME :
TITLE1 : USE OF GALLIUM-67 CITRATE FOR TUMOR SCANNING
TITLE2 :
TITLE3 :

Record number 825
HSC : 0 HURO : AC691
SITE : WBAMC CSP : Y SE : SE
ISOTOPE : IN 111 RT : OG :
OGNAME :
TITLE1 : CLINICAL EVALUATION OF CISTERNOGRAPHY UTILIZING INDIUM-111 DTPA
TITLE2 :
TITLE3 :

Record number 826
HSC : 0 HURO : AC692

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TE       : WBAMC                        CSP        : Y        SE         : SE
TOPE     : IN 111                       RT         :          OG         :
OGNAME   :
TITLE1   : BLOOD POOL IMAGING WITH INDIUM-111 CHLORIDE
TITLE2   : SEE ALSO AC270
TITLE3   :


Record number 827
HSC      : 0                            HURO       : AC693
SITE     : BAMC                         CSP        : Y        SE         : SE
ISOTOPE  : IN 111                       RT         :          OG         :
OGNAME   :
TITLE1   : CLINICAL EVALUATION OF CISTERNOGRAPHY UTILIZING INDIUM-111 DTPA
TITLE2   :
TITLE3   :


Record number 828
HSC      : 0                            HURO       : AC696
SITE     : FAMC                         CSP        : Y        SE         : SE
ISOTOPE  : GA 67                        RT         :          OG         :
OGNAME   :
TITLE1   : USE OF GALLIUM-67 CITRATE IN EVALUATION OF PATIENTS WITH KNOWN OR SUSPECTED
TITLE2   : TUMORS AND PYOGENIC ABSCESSES
TITLE3   :
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B

DEPARTMENT OF THE ARMY
BROOKE ARMY MEDICAL CENTER
FORT SAM HOUSTON, TEXAS 78234-6200

REPLY TO
ATTENTION OF

ARM1.941221.003a

HSHE-CI

1 March 1994

MEMORANDUM THRU Commander, Brooke Army Medical Center, Fort Sam Houston, TX 78234-6200

FOR Chief, Clinical Investigation Regulatory Office, AMEDD Center and School, Fort Sam Houston, TX 78234-6100

SUBJECT: Summary Report, Human Radiation Research

1. References:

a. Memorandum, HSHE-GCI, AMEDDC&S, 26 January 1994, subject: Human Radiation Research (see Encl 13).

b. Memorandum, HSHE-GCI, AMEDDC&S, 15 February 1994, subject: Human Radiation Research (see Encl 14).

2. This Summary Report describes the findings of an investigation conducted in accordance with Encl 2-1, Minimum Procedures for Identifying Human Experiments Involving Exposure to Ionizing Radiation, and additional instructions given in the memos cited above. The assigned Project Officer and key personnel within Brooke Army Medical Center attempted to collect and analyze information or records of human research involving ionizing radiation conducted at Brooke Army Medical Center (BAMC, Brooke General and Convalescent Hospital, Brooke Army Hospital, Brooke General Hospital), Fort Sam Houston, TX, during the period of 1944 to 1979 and for the same type of research during the period of 1980 to the present which was not considered by a human-use committee.

3. As a summary of findings, 33 specific protocols utilizing ionizing radiation on human subjects between 1944 and 1979 were discovered within the available records. Twenty-one of the 33 involved radiopharmaceuticals (14 of 21 could designated as FDA-licensed safe and effective, SE), and 12 utilized external source radiation (3 of 12 could be designated as safe and effective radiotherapy, RT). Eight of the 33 were Oncology Group protocols. Specific protocol data was available through only 3 sources including DCI Annual Research Progress Reviews, the Human Use Committee/Institutional Review Board minutes (both maintained by BAMC DCI), and Radiation Control Committee Minutes (maintained by the Health Physics Officer). As a result, the oldest specific protocol found was dated 1964 as indicated on a Annual Research Progress Report submitted in 1972. Ionizing radiation studies were mentioned in BAMC Annual Historical Reports by the Radiation Service/Department, but those comments were made in reference to

departmental training and capabilities and not specific research protocols.

4. The actions taken by the Project Officer and the results or findings are listed in the order given in reference 1 above and were as follows:

a. Actions: Review of Medical Treatment Facility (MTF) Annual Historical Reports. The BAMC Historian and the Public Affairs Officer (PAO) were contacted and tasked to conduct the required search of records available in their respective offices. The Project Officer conducted a search of BAMC Historical Reports available at the BAMC Medical Library. The Project Officer also contacted the AMEDDC&S Historian, Dr. Osterman, while investigating the whereabouts of the Annual Historical Reports not found within BAMC.

Results:

(1) The BAMC Historian searched all available records and found no references to human research involving ionizing radiation (see Encl 1).

(2) The BAMC PAO searched all available records and found only the attached Memorandum with guidance for subordinate PAOs from the Fort Sam Houston Public Affairs Office regarding the investigation on radiation testing (see Encls 2-1 and 2-2).

(3) The Project Officer reviewed those BAMC Annual Historical Reports available at the BAMC Medical Library (1944-1968) and found several references to the use of radioisotopes in research in the Roentgenography/Radiography Service/Department reports. The Table of Contents and Radiology Report are provided from those issues (see Encls 3-1 thru 3-7). BAMC Annual Historical Reports from 1973-1977 are maintained at PTM&S and were part of the Historian's review (see Encl 2) and BAMC Annual Historical Reports from 1969-1972, 1978 and 1979 were not available within BAMC.

(4) The Project Officer, in trying to locate the missing Reports, contacted the BAMC Historian, who in turn suggested that the AMEDD C & S Historian, Dr. Osterman, might know the disposition of years 1969-1972, 1978 and 1979. Dr. Osterman reported that he had no records from the period prior to his designation as Historian in 1990 and was told all such records were moved for storage to the AMEDD Medical Museum and were supposedly stored in an unorganized manner.

b. Actions: Task the Senior Radiologist (1), the Radiation Oncologist (2), the Nuclear Medicine Physician (3), the

Nuclear Pharmacist (4), and the Health Physics Officer (5) to review all records and report findings in the memorandum format given in reference 1 above.

Results:

1) The Senior Radiologist was unable to locate any records of this type of research prior to 1980 in the Dept of Radiology files and all human-use research on file since 1980 has been considered by a Human Use Committee (See Encl 4).

2) The Radiation Oncologist was unable to locate any files of this type of research prior to 1980 and all human-use research since 1980 has been considered by a Human Use Committee (See Encl 5).

3) The Nuclear Pharmacist, organic to the Nuclear Medicine Service, searched the files for both Nuclear Medicine and Pharmacy and was unable to locate any records of this type from prior to 1980 and all human-use research since 1980 has been considered by a Human Use Committee (See Encl 6)

4) The Health Physics Officer reviewed all available files since the Health Physics Office was established separate form the Dept. of Preventative Medicine in 1970 and located minutes from Radiation Control Committee (RCC) Meetings where specific protocols were reviewed (See Encl 7). He found consideration of 15 specific protocols and these are indicated as RCC among those in the combined list of protocols in Encl 8.

c. Action: Announcement of the official inquiry and description of assistance needed at the BAMC Administrative Staff Conference, 16 February, 1994. Personnel with any information were requested to contact the Project Officer.

Results: As of 1 March 1994, no calls or contacts.

Action: Placement of an official announcement in the Brooke Army Medical Center Bulletin beginning 15 Feb 1994, describing the investigation, and requesting contact with the project officer (see Encl 9, item 11).

Results: As of 1 March 1994, no calls or contacts.

d. Action: Review of records maintained by the Department of Clinical Investigation (DCI), BAMC, which was established in 1972. All research conducted, reviewed, or facilitated by DCI which involved humans since 1980 has been reviewed/approved by the Human Use Committee/Institutional Review Board. DCI records reviewed included:

1) Department of Clinical Investigation Annual Research Progress Reports (1972-1979).

2) Human Use Committee (HUC)/Institutional Review Board (IRB) Minutes (1972-1979).

Results:

1) The DCI Annual Research Progress Reports from 1972 to 1979 contained annual reviews of 24 protocols involving this type of research. See the combined list of all protocols found in Encl 8, where these particular protocols are indicated with DCI Annual Review after the title.

2) The HUC/IRB minutes contained comments indicating committee consideration of 17 protocols, all of which corresponded with a protocol review found in the DCI Annual Research Progress Reports.

e. Action: The project officer compiled all such protocols into a typed list totalling 33 protocols (See Encl 8). The Project Officer also tasked the Radiation Oncologist and the Nuclear Pharmacist to review all appropriate protocols for Safety and Effectiveness, render a status, and provide a memorandum describing the appropriateness of their presumptive findings.

Results:

1) The Radiation Oncologist reviewed the 12 external-source protocols and found 3 to be presumably safe and effective radiotherapy and were designated RT. Insufficient data was available on the remaining 9 protocols to make the determination (see Encls 8 and 10).

2) The Nuclear Pharmacist reviewed the 21 radiopharmaceutical protocols and found 13 of the 21 to be FDA-licensed safe and effective and were designated SE (see Encls 8 and 11).

f. Action: The Project Officer prepared separate data sheets on those protocols not designated as SE or RT. A

photocopy of either the DCI Annual Review or the Radiation Control Committee Minutes in which the protocol was found is attached to each data sheet.

Result: See Enclosures 12-1 through 12-16.

5. The Project Officer and the point of contact for this action is MAJ Yeager, 210-916-9511.

Encls
as

JAMES M. LAMIELL
COL, MC
Chief, Dept. of Clinical Investigation

HSHE-PO 14 Feb 94

MEMORANDUM FOR MAJ Curtis Yeager, Department of Clinical Investigation (HSHE-CI), Brooke Army Medical Center, Fort Sam Houston, TX 78234-6200

SUBJECT: Human Radiation Research

1. The following information has been collected as a result of a records search in the Plans Training Mobilization and Security Office of BAMC.

a. Ref: BAMC Historical Report, Calendar Year 1973:

(1) Para 15, Clinical Investigation Service, (2): "The Clinical Investigation Committee, comprised of the chiefs of the major departments, met monthly during CY 1973, evaluating protocols submitted to the Clinical Investigative Service. A Human Use Clinical Investigation Committee that pertained to the use of humans in experimental activities. This committee also met monthly."

(2) No reference was made to ionizing radiation directly or by inference in this document.

b. Ref: BAMC Historical Report, Calendar Year 1974 - I found no reference to ionizing radiation directly or by inference in this document.

c. Ref: Minutes of Hospital Staff Meetings, Station Hospital, Fort Sam Houston: 6 October 1941 - 7 December 1944 - I found no reference to ionizing radiation directly or by inference in this document.

d. Ref: Minutes of Hospital Staff Meetings, Brooke General Hospital, Fort Sam Houston: 4 January 1945 - 17 October 1946 - I found no reference to ionizing radiation directly or by inference in this document.

2. The above references constitute the only files available for review during the requested (1944 to 1979) period of the search, within this division, that could reflect the desired documentation.

Carl W. Helser

CARL W. HELSER
BAMC PLANS OFFICER

Encl 1

ARM1.941221.003ca

22 Feb 93

HSHE-BA

SUBJECT: Human Radiation Testing

1. In researching our historical files going back to 1944, there is no record of research involving human exposure to ionizing readiation. We also researched our photographic files without any indication of those type photographs. Our current files were also reviewed for the same reason and again there was nothing available to report.

2. The only memo on file regarding this issue is attached for your information. Memo from HQ Health Services Command Public Affairs Office, subject: Public Affairs Guidance - Radiation Testing, dated 5 January 1994.

Encl

ARCELIA LONGORIA
Chief Public Affairs
Office

Encl 2-1

DEPARTMENT OF THE ARMY
HEADQUARTERS, UNITED STATES ARMY HEALTH SERVICES COMMAND
FORT SAM HOUSTON, TEXAS 78234-6000

REPLY TO
ATTENTION OF

ARM1.941221.003cb

HSIO (360-5d) 5 January 1994

MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: Public Affairs Guidance - Radiation Testing

1. There has been recent media interest in allegations that various government agencies conducted radiation testing with human beings, without their full knowledge, in the 1940's, 1950's, and 1960's.

2. In response to media queries, only the following statement may be used by public affairs officers:

"On 30 December the Secretary of Defense asked the secretaries of the military services and the director of Defense Nuclear Agency to conduct a comprehensive review of all files and data bases dating back to the 1940's which might contain information about radiation testing on humans. Secretary Aspin has named Mr. John Deutch, the Undersecretary for Defense for Acquisition and Technology, as the senior Department of Defense official responsible for this review. The senior leadership of the Army considers this review to be a priority. The Army is fully and cooperatively involved at this time in a review of its records. The review is proceeding as rapidly as possible but completion time is unknown."

3. For additional information public affairs officers snould refer all media queries on this subject to the HQDA point of contact, Major Bill Buckner, media inquiries branch, Commercial (703) 697-7589.

4. Public inquiries from veterans on this subject should be referred to the Department of Veterans Affairs general inquiry number, 1-800-827-1000, which operates from 0800 to 1730 EST, Monday through Friday. Inquiries from active duty and reserve personnel should be handled by the chain of command.

5. Refer all other public inquiries regarding this issue to the Department of Energy Hotline, 1-800-493-2998, which operates from 0830 to 1630 EST, Monday through Friday.

6. Request public affairs officers contact this office when a media referral is made to HQDA. More detailed public affairs guidance on this subject will be distributed when available.

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HSIO
SUBJECT: Public Affairs Guidance - Radiation Testing

7. Our point of contact for this action is Cynthia Vaughan, Chief, Media Relations/Policy and Plans, Office of the Chief of Public Affairs, DSN 471-7146 or Commercial (210) 221-7146.

Charles R. Hayes

CHARLES R. HAYES
Major, Infantry
Acting Chief of Public Affairs

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ARMY MEDICAL SERVICE ACTIVITIES REPORT

BROOKE ARMY MEDICAL CENTER

Fort Sam Houston, Texas

ARM1.941221.003da

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personnel, with the consolidation of these services in Annex IV. Certain improvements were initiated in the physical arrangement of the clinics and the treatment rooms, some of which have not been completed but are projected for the coming year.

The combined personnel assigned to the service totals 51. With this strength through the year they were creditied with 198,892 treatments to 4,346 patients, or an average of 45.7 treatments per patient. Of the preceding total, the consultation and diagnostic clinic accounted for 3,111 patients and a total of 11,159 visits.

The Physical Therapy Section was host to 17 Phase I Physical Therapy student officers who each received 75 hours of Introduction to Clinical Procedures during the year. Six Physical Therapy officers completed 20 weeks of applicatory training.

The Occupational Therapy Section was host to six officer students who graduated from a 9-month affiliation program, Phase II, in March. One officer completed a three-month course at Georgia Warm Springs Foundation, Warm Springs, Georgia. Twenty-eight hours of formal instruction were given to various classes at the Army Medical Service School. Approximately 500 visitors from military and neighboring civilian organizations were conducted through the service.

The Elema biplane roentgenographic unit was installed during the year and has been of inestimable value in the diagnostic section, particularly, in cardiac, cerebral and vascular examination procedures. Procurement of a new 250 KV therapy unit is held in abeyance until budget limitations will permit the purchase of the unit. The Radiology Service cooperated with the Army Field Medical Service Development Unit in the conduct of tests on the mobile Thulium units, roentgenograph; hard rubber and aluminum cassettes; high speed intensifying screens and new fixing solution chemicals (film wetters).

The Isotope Section added the following procedures to their program during the year:

Use of Cr-51 in determining red blood cell survival and red blood cell mass.

Use of Fe-59 determining iron turnover.

Cobalt^{60} tagged vitamin B^{12} for absorption studies on vitamin B^{12}.

Seven residents in radiology continued training throughout the year. Three completed their training and three first-year resi-

dents began their training. All residents participated actively in the intra-service conferences and received two months or more training in isotopes. It is pointed out in this report that all residency graduates who have taken the radiology board examinations have successfully passed them, thus maintaining a 100% record in this specialty.

Failure to procure super-voltage therapy equipment continues to present a problem in the Therapy Section. Considering the amount and type of therapy furnished at this hospital, the resident training program and the quality of medical care that it is desirable to provide, super-voltage equipment, (particularly Cobalt) is believed to be a necessity, not a luxury item.

The mission of the Department of Surgery remains unchanged from the previous year.

In-service training for chest and cardiovascular diseases was started late in the year with the assignment of one officer. This is expected to expand as a second officer will begin training in January 1957. Proposed program for residency training in thoracic surgery and neurosurgery has been submitted for approval along with plans for expanding the plastic and maxillo-facial program from one to two years duration.

New equipment essential for performing open heart surgery has been obtained and tested many times during the year on laboratory animals. The coming year will see further advances in this field within the department.

Plans for modernization of the operating pavilion and delivery suite at the main hospital and the operating pavilion in Annex IV have been approved. Work is scheduled to start early in 1957.

The Anesthesia and Operative Service equipment improved during the year with the addition of 10 new Heidbrink anesthesia machines, two Edin anesthograph machines, capable of recording continuous EEG and ECG patterns during anesthesia. This proved to be of great value toward increasing safety in the poor-risk type of patients and for teaching purposes. The service is looking forward to the completion of a piped nitrous oxide system and central vacuum, a revision of electrical circuits and the installation of conductive flooring. The Anesthesia Service has begun to provide light anesthesia and relaxation in electro-convulsive therapy on request from the Department of Neuropsychiatry.

The General Surgery Service occupied bed rate continued high throughout 1956. The Thoracic and Cardiovascular Section was very active, and following extensive work in the laboratory is now preparing to perform intracardiac surgery with the patient being carried on the extracorporeal circulatory and oxygenating apparatus.

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ARM1.941221.003db

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BROOKE ARMY MEDICAL CENTER

Fort Sam Houston, Texas

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There were no changes in the organization or mission of the Pharmacy Service. The high personnel turnover required a continuous training program throughout the year, even though newly assigned personnel were professionally qualified pharmacists. Drug supplies were adequate at all times; however, the shortage in hospital funds prevented procurement of non-standard equipment needed for replacement and modernization.

The Physical Medicine Service experienced a normal year. The Consultation and Diagnostic Clinic had 4,280 patients with a total of 11,009 visits; Physical Therapy Section, 5,430 patients and 108,396 treatments; and Occupational Therapy Section 5,661 patients with a total of 57,408 treatments. The film "Electromyographic Procedures" was remade at this installation with Physical Medicine personnel as technical advisors.

The Radiology Service maintained its standards during the year. Physical division of the service and the crowded facilities continue to hinder efficient operations. The workload of the Diagnostic Section increased by 4,000 cases over the previous year. The Therapy Section workload remained relatively unchanged when compared with 1956. The Isotope Section more than doubled its number of treatments and examinations as compared with last year. The increase can be explained by a growing interest in the Hospital Staff regarding the usefulness of isotope methods in clinical medicine and by an increased scope of testing capabilities of the Isotope Section. Iron-59 metabolism and Cobalt-60 tagged vitamin B-12 tests, originally approved late in 1956, were implemented and found useful. External counting has been added to the Fe-59 studies and to the Cr-51 red cell survival studies. Simultaneous Fe-59 and CR-51 studies are now being done. The Isotope Section was granted a license to use I-131 Triolein for intestinal absorption and pancreatic function studies. These studies will probably become routine in 1958. Methods for administration of intracavitary Colloidal Gold-198 and for thyroid function studies were revised to conserve technician time and reduce radiation exposure. Preliminary studies were done on long term research projects with the Urology Service and the Surgical Research Unit.

The Diagnostic Section has continued to test equipment for the US Army Field Medical Service Development Unit, BAMC, and tests were completed on Mobile Thulium Units, Roentgenographic, hard rubber and aluminum cassettes, and high speed intensifying screens. Equipment and supplies were adequate and of good quality. A multiple cassette holder was procured for the laminograph unit, making it possible to obtain many cuts with one exposure, thus reducing the radiation hazard to the patient. A 250 KV Constant Potential Therapy Unit was installed and is now in daily use.

The increased workload in the Isotope Section and the contemplated new tests of 1958 will require additional space and equipment. The need of supervoltage therapy is still present to maintain the hospital's position as a cancer treatment center and as a teaching facility.

The Department of Surgery remained unchanged from the previous year. Average occupied beds were 382. Staff members made periodic visits to Class I hospitals in the Fourth Army Area, conducting teaching rounds and conferences. The Department actively participated in the Graduate Program in affiliation with the Graduate School of Baylor University with nine residents working on research projects and theses.

The Anesthesia and Operative Service experienced many changes in personnel during the year; however, personnel assigned was sufficient at all times to fulfill the mission of this service. There were six residents in the training at the beginning of the year; three residents completed their training in June. A class of four student Nurse Anesthetists was graduated in October after one year of training. Instruction was provided for eight interns and residents of the Dental Service. This instruction concerned emergencies in the Operating Room (dental or otherwise) and certain basic solutions to airway problems. A required one month training program on anesthesia for each surgical resident (except ophthalmology) was instituted in July. A centralized nitrous oxide piping system and a central suction system was completed and placed in operation in the Operating Suite in Annex IV.

The General Surgery Service had a slight increase in patient load during the year. The type of clinical material was exceptionally good from the standpoint of the teaching program. During the year 2,400 inpatients were treated; there were 7,412 outpatient visits; 1,084 major operations and 578 minor operations were performed. The Surgical Research Unit continued to cooperate and assist in the training and research program and their staff made a definite contribution to the residency program.

Proposed training programs in Thoracic Cardiovascular Surgery and Neurosurgery were prepared and submitted to higher headquarters. A postgraduate course, "Surgery in Acute Trauma," was presented under the auspices of the General Surgery Service. Attendance for this course was very poor and it will not be repeated in 1958. Numerous articles were published in current medical literature and at the end of the year ten papers were in preparation for submission.

Neurosurgery Service conducted weekly joint conferences with the Neurology Service and the Pathology Service. Informal monthly

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Physical Therapy student officers from AMSS spent approximately 56 hours in observation in the Physical Therapy Clinics.

Four Occupational Therapy student officers were graduated after having had 24 weeks training.

Five Physical Therapy student officers were graduated after having had 20 weeks training.

RADIOLOGY SERVICE.

There were no major changes in the organization and mission of the X-Ray Service in 1959.

The diagnostic and therapeutic roentgenological units were calibrated in May 1959. A program for modernization and renovation of the old roentgenographic and therapeutic units was begun early in 1959 and is presently in progress. Two new X-Omatic Rapid Film Processing Units were purchased. Installation was started on a new 300 MA Westinghouse X-Ray Unit and a new 250 KV deep therapy and 100 KV superficial X-Ray therapy units were purchased.

The Radioisotope Section added scalers, scanners, scintillation counters, probes, rate counters, recorders, and an alpha counter to their equipment.

Supplies were adequate and of good quality. The air-conditioning plant in Radiology Service at the Main Hospital was completed and rooms were freshly painted.

Construction in modernization of the physical plant of the Diagnostic Section at Beach Pavilion was planned, and modernization of both sections of the Service will be accomplished with the anticipated purchase of two image intensifying units and other accessory diagnostic equipment.

The overall workload of the Diagnostic Sections in the Main Hospital and Beach Pavilion remained unchanged. There was, however, a marked increase in the number of specialized roentgenographic and fluoroscopic procedures, and especially in the cerebral and cardiac angiographic examinations. There was also a 10 per cent increase in the radiation therapy cases. In the Radioisotope Laboratory there was about 25 per cent increase in the number of treatments by comparison with 1958. Research projects using radioisotopes in conjunction with Urology, Anesthesia, and SRU were continued during the year.

Eleven resident physicians took their specialty training in Radiology. Three completed their course on 31 December 1959. There were three third year residents, two second year and three first year residents. All residents were scheduled to receive three months' training in radioisotopes, three months in Pathology, six months in radium and x-ray

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therapy and twenty-four months in Roentgen Diagnosis. One or two interns were assigned to the Radiology Service monthly as an elective subject.

CHAPLAINS BRANCH.

During the year 1959, the Hospital Chaplains Branch functioned with an average strength of four to five assigned chaplains with the additional assistance of three chaplains from attached or neighboring units.

In addition to religious rites and weekly worship services for patients, assigned personnel and their dependents, the chaplains conducted the Character Guidance Program for assigned personnel and provided welfare and moral guidance requirements as needed.

The Main Hospital Building had no area provided for a regular chapel. In November an improvised chapel was set up on a regular basis in the Outpatient Service Waiting Room. A portable altar and organ was used.

FOOD SERVICE DIVISION.

The system of Centralized Tray Service for feeding patients on the wards was operated and considered to be very efficient. The orginal twelve food carts diverted from Valley Forge to Brooke Army Hospital in 1956-1957 were still in operation. In addition twelve new electrically cooled carts procured in 1957-1958 were utilized.

A new procedure was installed to facilitate the planning, preparation, assembly, loading and serving of diets on a Centralized Tray Service system. By use of the Diet Code List it was possible to plan the necessary types of diets with all the modifications required on two printed sheets. Each type of diet had its own preprinted and coded diet format for breakfast, dinner and supper. This system has permitted the dietitians to visit each bed patient at least once a day and to visit the patients on modified diets usually twice a day. In addition the dietitians have been able to participate in medical ward rounds, grand rounds and to work with medical officers on special dietary research projects. Food likes and dislikes for each bed patient on a modified diet are maintained in the Diet Therapy Office. All modified diets for patients are adjusted for these likes and dislikes.

The Standard Hospital Diets published in November 1959 included the actual nutritional evaluations for each diet as calculated by the dietitians during the past year. This information was of great value to the Medical Officers ordering diets for patients.

Eleven dietetic interns were graduated in the 1958-1959 class. Ten dietetic interns were enrolled in the 1959-1960 class.

Four summer practicum students were assigned to the Food Service Division.

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Two Occupational Therapy Clinical Affiliates completed 12 weeks of the Orthopedic-Neurological affiliation and were transferred to Fitzsimons for completion of their training. Three Occupational Therapy Clinical Affiliates graduated in July after 12 weeks' training. Six Physical Therapy Student Officers graduated in September after twenty weeks in training.

The Physical Therapy Student Officers from Medical Field Service School spent approximately 40 hours in observer training in the various sub-sections of the Physical Therapy Section. A 32-hour course was given to the enlisted personnel of the Physical Therapy Section on MOS 921.1 for OJT purposes and as a refresher course for those already holding this MOS. An In-Service Training Program of two and one-half hours per week for all staff members was instituted in March 1961. A total of 1,693 visitors was given tours and orientation lectures in Occupational Therapy and Physical Therapy.

RADIOLOGICAL SERVICE.

There were no major changes in the organization and mission of the Radiology Service in 1961. The AEC license was renewed in October 1961 and the Residency Training Program in Radiology was approved by the AMA and American Board of Radiology for another three years.

By the end of the year nine Residents were in training in Radiology. Two Residents completed their training and were reassigned to other Army Hospitals. Our quota for Resident Training was raised by The Surgeon General's Office from nine to twelve allowing for four first-year, four second-year, and four third-year Residents.

Modernization and renovation of the X-Ray Departments at the Main Hospital and at Beach Pavilion continued during the year. A new 300 MA Westinghouse Diagnostic Unit with GE Image Intensifier was installed in the Main Hospital. A new 300 MA Westinghouse X-Ray Diagnostic Unit was installed in the Beach Pavilion and a new Picker 500 MA Unit with Image Intensifier, TV Orthicon Monitor and 35mm Cine was installed in the Surgical Pavilion at the Beach Pavilion. The latter is the only one of its kind in the State of Texas and has its greatest usefulness for performing angiocardiographic and

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"REPRODUCED AT GOVERNMENT EXPENSE"

the Radiological Department.

A ROTEX Silver Recovery Unit was installed in December 1961 and connected to the X-Omat Unit in the X-Ray Department, Main Hospital. This unit was installed and is operated by the Property Disposal Office of Fort Sam Houston. Proceeds of reclaimed silver from this unit are expected to be about $2000.00 per year.

Supplies used in the X-Ray Service throughout the year were adequate and of good quality. Maintenance support was excellent.

The overall workload of the Diagnostic Section increased by 11%, and work was increased by 20% in the Radiation Therapy Section by comparison with 1960. The total number of treatments given in the Isotope Section was 1083; a decrease of about 10%. The total number of radioisotope studies, however, was about the same as in 1960.

All Residents received three months training in Pathology, three months in Radioisotopes, nine months in Radiation Therapy and twenty-one months in Roentgen Diagnosis. This fulfills the basic requirements by the American Board of Radiology. One or two Interns were assigned to the Radiology Service on a one month or two month voluntary basis as part of the Rotating Internship Program. Two foreign medical officers (Turkish Army) received five months' observation training in Radiation Therapy. In the past six months the Baylor University Teaching Program was curtailed because no new Residents registered for this Program. The Radiation Physics lectures conducted by the consultant in Radiation Physics have continued at top speed.

Lectures were given at the Monthly Professional Staff Meetings by two members of the consultant staff. The Chief of Radiology was made a Fellow of the American College of Radiology in February 1961 and became President of the San Antonio Military Radiological Society in July 1961. The Chief of Radiology continued to perform additional duties as consultant to the Fourth Army Surgeon and visited US Army Hospitals located at Fort Hood, Camp Wolters, Texas, and Fort Sill, Oklahoma. He also continued to function as Technical Director of the X-Ray Technicians' School at Medical Field Service School and reviewed a textbook for x-ray technicians which is being written by members of the staff at the school, under the sponsorship of the SGO. A scientific exhibit entitled "The Postmortem Coronarogram" was presented by one of the Senior Residents at the ARRS Meeting in Miami in September 1961. Members of the Radiology Staff authored a paper on "The Colon Cut-Off Sign in Acute Pancreatitis." This paper was accepted for publication in the Journal of Radiology. The Chief

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of Radiology and members of the staff presented a series of x-ray films on genito-urinary conditions as part of a scientific exhibit at the James C. Kimbrough Urological Seminar, 6-8 November 1961. The Chief of Radiology also participated on a panel discussion on the "Acute Upper GI Bleeder" at the Monthly Professional Meeting of Bexar County Medical Society on 14 March 1961.

The Radiological Service maintained its usual high professional standards during 1961. New equipment and renovation of the physical plants at the Main Hospital and Beach Pavilion have modernized the Radiological Service. New diagnostic techniques have been introduced in the Radioisotope Section.

In the Radioisotope Section new diagnostic techniques were introduced to perform renograms, red Blood cell uptake studies and RISA blood volume studies using volemetron.

HOSPITAL CHAPLAIN.

During the year 1961 the Brooke General Hospital Chaplains Section has functioned with an average strength of four to five assigned Chaplains augmented to six. Facilities used in the accomplishment of the Hospital Chaplains' mission has consisted of three cantonment-type chapels. Religious activities are also conducted in the Main Hospital, Beach and Chambers Pavilions. In addition to religious rites, weekly worship services for the patients and assigned personnel and their dependents, the Chaplains have conducted the Character Guidance Program for assigned personnel and provided welfare and moral guidance requirements for all personnel as needed. Sunday schools and religious education activities for dependent children have been provided principally by the Post and Brooke Army Medical Center Chaplains. Religious ministrations as indicated and needed have been provided on an around the clock basis for Catholic, Protestant, and Jewish personnel by assigned Chaplains.

Continuing emphasis has been placed upon visitation and ministering to patients in the hospital and to their immediate families who are present due to the serious illness or death of the patient. Religious ministration to the patients include communion, baptism, personal counseling, and bedside devotions.

FOOD SERVICE DIVISION.

The staff is working in conjunction with The Surgeon General's Office on preparation of the revision of TM 8-500, Hospital Diets. A manual in use at Brooke is the basis for this revision. The Dietetic

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A project "Muscle Force Curves Associated with Musculoskeletal Disability" was approved by TSGO in April 1963. The primary investigator on this project is Major Helen M. Mendler, AMSC (PT), with the Chief of the Physical Medicine Service assisting. Work on this project has not started since the equipment to be utilized has not been received. The manufacturer has notified the investigator that delivery can be anticipated about 1 January 1964.

The protocol for a proposed research project "Investigation of Physiologic Effects of Local Hypothermia Induced by Ice Massage Technique and Comparison with Other Methods of Producing Local Hypothermia", has been forwarded to US Army Medical Research and Development Command for approval.

"Post Operative Function and of the Knee Joint". Paper by Major Helen M. Mendler, AMSC (PT), published in the Journal of the American Physical Therapy Association.

"Diagnosis and Procedures in Physical Therapy". Paper by Captain Beatrice E. Thompson, AMSC (PT), published in the Journal of American Physical Therapy Association.

"Weaving in Therapy". Paper by Sergeant Lucy F. Reding, Occupational Therapy Specialist; published by the Handweaver Craftsman.

"The Palmaris Longus Muscle". Paper by Captain Virginia M. Barr, AMSC (OT); published in the American Journal of Occupational Therapy.

"Antagonistic Activity in Voluntary Motion". Paper by Major Dorothy R. Street, AMSC (OT); published in the American Journal of Occupational Therapy.

"The Place of Work Therapy in the Treatment of the Mentally Ill". Paper written by Major Dorothy R. Street, AMSC (OT); turned in for approval and possible publication.

RADIOLOGICAL SERVICE.

During the year, there were no changes in the organization or mission of the Radiology Service. The AEC license was renewed 8 July 1963 and the new isotopes included Sr-90 as a sealed source. Steps have been initiated to obtain institutional license under AR 40-37.

Ten residents were in training at the end of the year. Two of these were Air Force personnel. Three residents completed training in September and were assigned to Army and Air Force hospitals.

Colonel Peter Zanca retired in June 1963 and was replaced by Lt Colonel Leonard H. Seitzman, MC. Major Charles Onstead was assigned as Assistant Chief of Radiology Service in August 1963 and Major Martin E. Griffin, Jr., MC, was assigned as Chief of the Diagnostic Section of the Service. Major Elliot Liff replaced Major Joseph Marcarelli, MC, as Chief of the Radioisotope Section.

The quota for resident training is 15. The residency training program continues to include 3 months of Pathology, 3 months in radioisotopes, 9 months of radiation therapy and 21 months of diagnostic radiology. Interns have been periodically assigned for a two month voluntary elective as part of their rotating internship.

Lectures have been given by consultants to the Monthly Professional Staff Meetings. Intra- and inter-departmental conferences have continued.

Equipment added to the Service includes - 4 200MA mobile X-ray units, a 16 mm cine film projector, a Pho/Dot Isotope Scanner Model 1735, 3 scintillation detectors, a count rate meter, pulse height analyzer and recorder and strip chart. There have been no major breakdowns in equipment during this period.

Plans for transfer of the Isotope Section to the ground floor of the main hospital are under study. The plan for placement of a Cobalt-60 Teletherapy unit on the ground floor of the main hospital was aborted because of engineering problems associated with location here. New plans for location of a supervoltage or Co-60 therapy unit are under study.

The Radiology Service continued to support the Armed Forces Examining Station in San Antonio and the Post Surgeon's Office. The Chief of Radiology continued to perform additional duties as Consultant to the 4th Army Surgeon. He also continued as Consultant to the Medical Field Service School and Technical Director at the X-ray Technicians School, MFSS. A cooperative program to increase interest and enlarge the teaching program at this school was undertaken.

Supplies and maintenance support throughout the year were excellent.

An exhibit entitled "Drip Infusion Pyelography and Nephrotomography" was presented in November 1963 at the Radiological Society of North American Meeting by Captain Schencker and Colonel Zanca. A paper on this study is being prepared for submission by Captain Schencker. A scientific exhibit prepared by Colonel Zanca and Captain

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Supplies and maintenance support throughout the year was excellent.

A paper on "Drip Infusion Pyelography and Nephrotomography" was submitted for publication by Captain Schencker following his departure from Brooke General Hospital and was published in "Radiography" in July 1964. A scientific exhibit is being prepared by Colonel Seitzman and Captain Hurwitz for the July 1965 meeting of the American Medical A sociation. A paper on "Polycystic Kidneys" is being submitted for publication by Captain Hurwitz. Application for R&D funds for a study project (C51-64) has been forwarded to the Office of The Surgeon General.

A representative of the Radiology Service attended the annual meeting of the Society of Nuclear Medicine, San Francisco, California, in June 1964; the American Roentgen Ray Society Meeting, Minneapolis, Minnesota, in September 1964; and the annual meeting of the Radiology Service of North America, Chicago, Illinois, in December 1964. Four officers attended a one week conference on the management of radiation accidents held under the auspices of the Division of Radiological Health, Department of Health, Education, and Welfare, Austin, Texas, September 1964, and one officer attended the Nuclear Emergency Team Operation Course, Sandia Base, New Mexico, November and December 1964.

An internal review of the workload situation discloses continuing increase in normal diagnostic x-ray procedures and continuing increase in special diagnostic procedures.

The Radiology Service maintained a high professional standard in 1964. There were changes in key personnel with the resignation of the Chief of the Diagnostic Section. Plans for equipment improvment and modernization and plans for a new therapy section to include Cobalt teletherapy are continuing.

HOSPITAL CHAPLAIN

During the past year, the program of the Chaplains" Section of Brooke General Hospital has encompassed many spiritual, educational and social activities. The regular schedule of religious services remain constant, with excellent response from patients, military personnel and their dependents.

Regularly scheduled religious services were provided for the three major faiths with one cantonment-type chapel and six chapel facilities. Special emphasis through personal contact and visitation has increased the attendance at worship services

Research project, "Muscle Force Testing", Major Helen M. Mendler, Chief Investigator, was granted an extension of completion date. Project is now to be completed in June 1965.

During the week of 27 August 1964, the Physical Therapy staff participated in the making of a film depicting therapists at work and care and treatment of patients in the Physical Therapy Clinic, Therapeutic Gymnasium and other subsections of the Physical Therapy Section. Film will be used for procuring physical therapists for the Army

RADIOLOGY SERVICE

During 1964 there were no significant changes in the mission and organization of the Radiology Service. The AEC licensing system was replaced by the institutional licensing system under the provisions of AR 40-37. An AEC inspection and review of the isotope program were made.

Ten residents were in training at the end of the year. Two of these were Air Force personnel. Four residents concluded training in September and were assigned to Army and Air Force hospitals.

The quota for resident training is 15. The residency training program continues to include three months of Pathology, three months in Radioisotopes, nine months of Radiation Therapy and 21 months of Diagnostic Radiology. Interns have been periodically assigned for a two month voluntary elective as part of their rotating internship.

Lectures have been given by our consultants to the monthly professional staff meetings. Intra and interdepartmental conferences have continued.

No major equipment additions have been made during 1964. The Isotope Section has moved to the ground floor of the main hospital. Plans for construction of a new radiation therapy section to include Cobalt 60 teletherapy in a new addition adjacent to the Isotope Section on the ground floor level of the main hospital are being completed for submission to the Office of The Surgeon General.

The Radiology Service continued to support the Armed Forces Examining Station in San Antonio and the Post Surgeon's Office. The Chief of Radiology continued to perform additional duties as consultant to the Fourth U.S. Army Surgeon. He also continued as consultant to the Medical Field Service School and technical director at the X-ray Technicians School, Medical Field Service School. A cooperative program to increase interest and enlarge the teaching program at this school was undertaken.

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BROOKE GENERAL HOSPITAL

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REPRODUCED AT GOVERNMENT EXPENSE

Physical Therapy Student Officers from the Medical Field Service School (10 students from January through August; 21 students from August through December: spent approximately 560 hours in the Physical Therapy Section for practical training.

Approximately 40 hours were spent by the Physical Therapy Section administering Physical Fitness Tests for female officers assigned to Brooke General Hospital.

Approximately 1,225 civilian and military visitors were given orientation tours and lectures throughout the various sections under the Physical Medicine Service.

Nine Physical Therapy Section officers abstracted articles and papers monthly for the American Physical Therapy Journal.

"Conversion of an Isotonic Exercise Table for Isometric Exercise" authored by Lieutenants Warren W. May and Carol R. Reiner, Physical Therapy Section, was published in the October 1965 issue of the Journal of the American Physical Therapy Association.

Miscellaneous.

Research Project, "Investigation of Physiologic Effects of Local Hypothermia Induced by Ice Massage Technique and Comparison with Other Methods of Producing Local Hypothermia" -- Lt Colonel Arthur E. Grant, MC, Chief Investigator, was carried on throughout the year, as time permitted. Research project not completed at the time that Lt Colonel Grant was transferred to Letterman General Hospital. Request has gone forward requesting the transfer of the project and equipment to Colonel Grant's new duty station.

Research Project, "Muscle Force Curves Associated with Musculoskeletal Disability" -- Major Helen M. Mendler, AMSC, Physical Therapy Section, Chief Investigator, was completed and final report submitted on 30 June 1965.

The Physical Therapy Section participated in the San Antonio Health Fair during the week of 24-30 January 1965.

RADIOLOGY SERVICE.

During the year there were no significant changes in the mission and organization of the Radiology Service. This department maintained a high professional standard in 1965. There were changes in

personnel with the resignations of the chiefs of the Diagnostic Section and the Isotope Section. Plan for equipment improvement and modernization continue and a five year capital equipment study was submitted to Brooke Army Medical Center. Plans for improvement and modernization of the Radiation Therapy Section expected for FY 67 have been delayed with no stated date given for its reinstitution into the budget.

Two new General Electric 500 radiographic and flouroscopic units were purchased and contracts let for electrical changes for their installation. These were purchased for replacement of obsolete equipment. A third radiographic and flouroscopic unit, Picker, was purchased for replacement of an item no longer serviceable. Completion of installation of these three pieces of equipment is anticipated by 15 March 1966. A General Electric image intensifier was purchased and is being installed in the bi-plane room at Beach Pavilion, and a Picker basic digital twin prober system and a Packard auto-gamma spectrometer were purchased for the Isotopic Clinic. There still remains a requirement for replacement of other radiographic equipment which was outlined in a five-year study program submitted to Brooke Army Medical Center.

The contemplated MCA project for the building of a radiotherapy addition to include cobalt therapy was proceeding with the Corps of Engineers for FY 67. Information received indicates that this has been deleted from the FY 67 budget.

A scientific exhibit entitled "Improved Radiological Diagnosis of Renal Pathology" was prepared by Colonel Seitzman, Chief, Radiology Service and Captain Richard A. Hurwitz, MC, and presented by Captain Hurwitz at the American Medical Association Convention, New York City, 20-24 June 1965. In September 1965, R&D Research Project (C51-64) entitled "Evaluation of Selenomethionine as an Agent for Photoscanning Pancreas" was terminated as AEC did not approve required license.

The following professional papers were prepared and submitted for publication: "Aneurysmal Bone Cyst of the Patella", Captain Hurwitz and Major Thomas S. Harle: "Cervical Spondylosis and Dysphagia--A Distinct Clinical Relationship", Captain Hurwitz and Captain Ronald G. Reinbold; and "The Ossiculum Terminale--Separate Odontoid Process", Captains Reinbold and Hurwitz.

On 22 November 1965, Colonel Seitzman served as Brooke Army Medical Center representative on the San Antonio Chamber of Commerce Committee conducting a tour of the San Antonio area

for representatives of the Atomic Energy Commission who were surveying possible sites for the Commission's proposed national accelerator site.

HOSPITAL CHAPLAIN.

The Chaplains Section of Brooke General Hospital contributes to the mission of the command by rendering spiritual, moral and ethical education, and by a counseling program. Six chaplains were present dor duty as of 1 January 1965. Qualified chaplain assistants were procured and assigned to all chaplains on duty.

Brooke General Hospital radio broadcasting facilities, KBGH, are used to broadcast the worship service, from Chapel No. 1, each Sunday morning. Protestant and Catholic devotions are broadcast daily and Jewish devotions broadcast each Friday. Special emphasis was given to holy days and other special day services.

The training program for reserve chaplains is designed to acquaint reservists with current policies and procedures of the chaplain's activities. Each reservist is required to read the Supplemental Branch Training material supplied by the U. S. Chaplain School and given on-the-job training with the hospital. Special assignments are given each reserve chaplain, upon his arrival, to be completed within his tour of duty. This project gives the chaplain a personal interest in the reserve training program.

FOOD SERVICE DIVISION.

Facilities.

Beach Pavilion Mess renovation, Building 2399, was completed and operation began in February 1965. The renovated facility and replacement of out-moded equipment afforded improvement in service of food, maintenance of sanitation, and working conditions, an attractive and comfortable dining atmosphere. The renovation provided a long needed classroom handling training activities.

Operations.

Implementation of procedures and forms directed by AR 40-2 and TM 8-500 was accomplished during the year.

ARM1.941221.003e

HSHE-DR

February 25, 1994

MEMORANDUM THRU Chairman, Department of Radiology

FOR MAJ Curtis Yeager, Clinical Investigations

Subject: Ionizing Radiation Exposure, 1944-1974

1. Files have been reviewed searching for any evidence of investigational activities during the period of 1944-1979 involving the use of ionizing radiation in the Diagnostic Service of the Department of Radiology. No files dating from that time period were identified. The Nuclear Medicine and Radiation Oncology Services have been contacted separately by you and are to respond individually to you concerning this inquiry.

2. No personnel currently assigned to this Department are aware of any investigational activities involving ionizing radiation on humans from that time period.

3. There have been no investigational protocols conducted since 1980 which have not been properly evaluated and approved by the Institutional Review Board.

Michael A. Cawthon

Michael A. Cawthon, D.O.
Lieutenant Colonel, MC
Asst. Chief, Radiology

ARM1.941221.003f

HSHE-DRR 25 February 1994

MEMORANDUM FOR Chief, Department of Clinical Investigation (HSHE-CI), Brooke Army Medical Center, Fort Sam Houston, TX 78234-6200

SUBJECT: Human Radiation Research

1. Our records indicate that human subjects have been exposed to ionizing radiation for clinical research following guidelines of Phase III protocols since 1981. Any and all research conducted after 1980 was reviewed and approved by the Institute Review Board at BAMC.

2. The Radiation Oncology Section was not involved in the exposure of human subjects to ionizing radiation during the years 1944 to 1980.

A. Frias

ANTONIO E. FRIAS, M.D.
COL, MC
Chief, Radiation Oncology

Encl 5

HSHE-DRN 25 February 1994

MEMORANDUM FOR Chief, Department of Clinical Investigation

SUBJECT: Human Radiation Research

1. A thorough review of all clinic files, memoranda, reports, procedures, etc. did not reveal evidence of any human radiation research having been done in Brooke Army Medical Center, Nuclear Medicine Service prior to 1980. All records of such activities were probably forwarded to official records holding areas.

2. Long term civilian employees of this department do remember working with investigational agents and approved protocols from the FDA. Unfortunately these employees do not remember the specific agents or names of patients.

3. All investigational studies performed since 1980 have been approved by the Investigational Review Board.

JOHN D. THOMAS
LTC, MS
NUCLEAR PHARMACIST

Encl 6

HSHE-DHR ARM1.941221.003h 23 February 1994

MEMORANDUM FOR Chief, Department of Clinical Investigation, ATTN: MAJ Yaeger

SUBJECT: Human Radiation Research

1. References.

a. Memorandum, USAMEDD C&S, HSMC-GCI, 26 Jan 94, SAB.

b. Memorandum, USAMEDD C&S, HSMC-GCI, 15 Feb 94, SAB.

2. IAW with your request pertinent to references 1a and 1b, this office reviewed its files, specifically its copies of the minutes of the Radiation Control Committee and its predecessor, the Radioistope Committee. Minutes on file at this office date from 1970 to the present.

3. Copies of pertinent sections of the minutes which contain information related to references 1a and 1b are attached. This office does not have records to indicate whether or not each protocol was reviewed and approved by a human use or equivalent committee.

4. Health Physics: 916-7181/7494.

Jonathan E Tucker

Encl
as

JONATHAN E. TUCKER
MAJ, MS
Chief, Health Physics

Encl 7

Brooke Army Medical Center

Research Proposals Involving ionizing Radiation on Human Subjects

External-source Radiation Therapy Protocols:

1. Survival Rates of Testis Tumors (Part of Army-wide investigation treatment study) (DCI Annual Reviews)

2. Conservative Surgery Following Preoperative Radiotherapy of Lung Cancer (DCI Annual Review)

3. (OG) Phase I Protocol for the Evaluation of Combined Radiotherapy and Chemotherapy for Stage II-B, III-A and III-B Hodgkin's Disease (SWOG) (DCI Annual Review)

4. Seminoma of the Testicle: Prophylactic Mediastinum Irradiation Versus Periaortic and Pelvic Irradiation Alone (DCI Annual Review)

5. (OG) Evaluation of Combined Radiotherapy and Chemotherapy for Stages II-B, III-A and III-B Hodgkin's Disease (SWOG 160) (DCI Annual Review)

6. (RT)(OG) Radiotherapy-Chemotherapy (MOPP) for Stages I and II A and B Hodgkin's (SWOG 7811) (DCI Annual Review)

7. (OG) 5-FU, MeCCNU + Radiotherapy with or without Testolactone for Localized Adenocarcinoma of the Exocrine Pancreas (SWOG 7509) (DCI Annual Review)

8. (OG) Treatment of Patients for Early Testicular Cancer with Irradiation and Chemotherapy with Vinblastine and Bleomycin (SWOG 7525) (DCI Annual Review)

9. (OG) Combined Preoperative Adjuvant Therapy in Rectal Carcinoma (SWOG 7618) (DCI Annual Review)

10. (RT)(OG) Combined Chemotherapy/Radiotherapy/Immunotherapy for Oat Cell Cancer of the Lung ((SWOG 7628) (DCI Annual Review)

11. (RT)(OG) Radiation Therapy in Combination with BCNU, DTIC or Procarbazine in Patients with Malignant Gliomas of the Brain (SWOG 7703) (DCI Annual Reviews)

12. The Effect of Radiotherapy on Regional Lung Function in Patients with Bronchogenic Cancer (DCI Annual Review, RCC)

Radiopharmaceutical Protocols:

13. (SE) Evaluation of Gallium-67 as a Scanning Agent for Malignant Neoplasms (DCI Annual Review)

14. (SE) Clinical Evaluation of Cisternography Utilizing

Encl 8

^{111}Indium DTPA (DCI Annual Review)

15. (SE) Clinical Evaluation of the Thyroid by <u>in vivo</u> Radionuclidic Studies Utilizing ^{123}I (DCI Annual Review)

16. (SE) NEN Gallium-67 Citrate for Intravenous Administration (DCI Annual Review)

17. (SE) Bone Scanning as a Method for Detecting Early Renal Osteodystrophy (DCI Annual Review, RCC)

18. (SE) NEN ^{99M}Tc Stannous Glucoheptonate for Intravenous Administration (DCI Annual Review)

19. (SE) MPI ^{99M}Tc-dimercaptosuccinic Acid for Intravenous Administration (DCI Annual Review)

20. (SE) Platelet Transfusion - Efficiency and Methods to Improve Current Results in Thrombocytopenia Patients (DCI Annual Review, RCC)

21. (SE) Evaluation of Dopamine (3, 4-Dehydroxyphenylethylamine) in Septic Shock Secondary to Thermal Injury (RCC Minutes) (USAISR)

22. (SE) Determination of Human Glomerular Filtration Rate by the Single Injection of Glofil-125 (RCC Minutes) (USAISR)

23. (SE) Muscle Blood Flow Following Thermal Injury (RCC Minutes)

24. (SE) Technetium-99m Sulfur Colloid Particles (RCC Minutes)

25. (SE) Approval of iodine-123 labeled Rose Bengal Ortho-Iodo-Hippurate (RCC Minutes)

26. (SE) Bone Scanning as a Method for Detecting Early Renal Osteodystrophy (DCI Annual Review)

27. Clinical Evaluation of ^{111}Indium Bleomycin (MPI) Tumor Scintigraphin™) (DCI Annual Review, RCC)
(RCC Minutes)

28. Intravenous Administration of ^{131}I-6-B-Indomethylnorcholesterol (NP-59) for Adrenal Evaluation and Imaging (DCI Annual Review, RCC)

29. Technetium-99m-pyridoxylideneglutamate (99m-Tc-PG) for Diagnosis of Hepatobiliary Disease (DCI Annual Review)

30. Measurement of Total "Exchangeable" Body Sodium in Thermally Injured Patients - A Pilot Study (RCC Minutes)

31. Assessment of Thyroid Hormone Kinetics in Thermally Injured Patients (RCC Minutes)

32. Distribution and Control of Peripheral Blood Flow Following Extensive Leg Surface Injury (RCC)

33. Radioisotopic Esophageal Clearance Test (RCC)

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BROOKE ARMY MEDICAL CENTER
FORT SAM HOUSTON, TEXAS 78234-6200

BULLETIN

"A VISION OF THE FUTURE"

1995

Number 07 | Published on Tuesdays | 15 February 1994

ARM1.941221.003j

SECTION I. OFFICIAL

Effective until 15 JUN 94

1. **DETAILS.**

OD & TELEPHONE:	TUE, 15 FEB	WED, 16 FEB	THU, 17 FEB	FRI, 18 FEB
FOD (861-4650)	MAJ Brennand	MAJ Brennand	MAJ Brennand	MAJ Brennand
AOD MH (66141)	CPT Dade	CPT Rendeira	2LT Rodriguez	CPT Molloy
NCOD MH (66141)	SFC Click	SFC Glover	SFC Juarbe	SFC Davis, Aundra
NCOD (on call)	SFC Glover	SFC Juarbe	SFC Davis, Aundra	SFC Farias, R.
ANCOD BP (69631)	SSG McCarty	SSG Bluford	SSG Beard	SSG Campbell
ANCOD (on call)	SSG Bluford	SSG Beard	SSG Campbell	SSG Anderson
MOD (118-1141)	CPT Gutheim	CPT Vigo	CPT Berneburg	CPT Gavin
P[illegible] MH (118-1430)	CPT Karr	CPT Karr	CPT Karr	CPT Karr
[illegible] BP (118-1234)	CPT Gomez	CPT Gomez	CPT Gomez	CPT Gomez
ASOD (118-1392)	CPT Stewart	CPT Roberts	CPT Simon	CPT Stewart
SOD MH PAGER (118-1102)	CPT Williams	CPT Kelemen	CPT Vories	CPT Williams
ROD MH PAGER (118-1715)	CPT Arndt	CPT Parisi	CPT Mizrachi	CPT Truax
R[illegible]AGING BP (118-1203)	CPT Myrha-Bloom	CPT Miller	CPT Mogel	CPT Jones
AN[illegible]S MH PAGER (513-9535)	CPT Shepherd	CPT Duggins	CPT Oldroyd	CPT Reddin
SDNCO (69116)	SFC Cunningham	SFC Johnson	SFC Curtis	SFC Cunningham
ASST SDNCO (69137)	SGT Mikel	SGT Primus	SGT Seaborn	SGT Kelsey
SDNCO DRIVER (69116/9137)	PFC Smith	SPC Drayer	SPC Leetham-Perez	PFC Sink
NCOD DRIVER (66141)	PFC Boulware	PFC Adelman	SPC Jones	SPC Pini

	SAT, 19 FEB	SUN, 20 FEB	MON, 21 FEB
FOD (861-4650)	MAJ Brennand	MAJ Brennand	LTC Hawkins
AOD MH (66141)	CPT Loube	1LT Bernardo	2LT Bartholomew
NCOD MH (66141)	SFC Farias, R.	SFC Hernandez	SFC Harris, E.
NCOD (on call)	SFC Hernandez	SFC Harris, E.	SFC Deleon
ANCOD BP (69631)	SSG Parham	SSG Wyant	SSG Bluford
ANCOD (on call)	SSG Wyant	SSG Bluford	SSG Beard
MOD (118-1141)	CPT Gutheim	CPT Vigo	CPT Berneburg
POD MH (118-1430)	CPT Karr	CPT Karr	CPT Karr
POD BP (118-1234)	CPT Gomez	CPT Gomez	CPT Gomez
ASOD (118-1392)	CPT Roberts	CPT Simon	CPT Stewart
SOD MH PAGER (118-1102)	CPT Kelemen	CPT Vories	CPT Williams
ROD MH PAGER (118-1715)	MAJ Smith	CPT Contreras	CPT Parisi
ROD/IMAGING BP (118-1203)	COL Buckner	CPT Miller	CPT Barker
ANES MH PAGER (513-9535)	CPT Becker	CPT Reddin	CPT Becker
SDNCO (69116)	SFC Johnson	SFC Curtis	SFC Cunningham
ASST SDNCO (69137)	SGT Moodie-Rainford	SGT Rosser	SGT McDowell
SDNCO DRIVER (69116/9137)	SPC Kitt	SPC Holbrook	SPC Dombrowski
[illegible]D DRIVER (66141)	SPC McLendon	SPC Jones	SPC George

2. **DUTY ROSTER RESPONSIBILITIES.** The FOD/AOD will verify availability for duty by calling the Chief, Admin Svcs, NLT 1200 of the last duty day prior to the scheduled tour. All personnel detailed on the FOD, AOD, NCOD, or ANCOD are required to h[illegible]eir DA Form 31/DD Form 1610 signed and logged in by the duty roster NCO at least 30 days prior to scheduling or departing on [illegible]ave or TDY. This will decrease the need to make changes to the schedule after publication. It is the individual's responsibility, not the duty roster NCO's responsibility, to ensure proper notification is provided for authorized absence. No changes will be made to the duty schedule after publication. Emergency requests necessitating a schedule change will be considered on a case by case basis, and require Chief of Staff approval. Uniform for AOD & NCOD is BDU(s). (HSHE-IMA/66722)

4. NCODP. The next NCODP will be held on 22 Feb 94, 1000 at Main Auditorium and 1330 at Beach Auditorium. (HSHE-ZSM)(1/2)

ZONES OF CONSIDERATION FOR PROMOTION TO MASTER SERGEANT, SELECTION AND QMP SCREEN FOR SERGEANT FIRST CLASS AND SERGEANT. A DA Selection Board is scheduled to convene at the Enlisted Records and Evaluation Center, Fort Benjamin Harrison, Indiana on 23 Feb 94 to consider soldiers for promotion to MSG. In addition, the board will review records of SFC and SGT for possible elimination under the Qualitative Management Program (QMP). Eligibility criteria for promotion consideration to MSG are as follows: All SFC with DOR of 31 Jul 91 and earlier, with a BASD between 23 Jul 72 and 23 Feb 86 (both dates inclusive). Primary Zone DOR is 31 Jul 90 and earlier. Secondary Zone DOR is 1 Aug 90 thru 31 Jul 91. The following soldiers are eligible for QMP consideration: a. All SFC with DOR 31 Jan 93 and earlier except those with approved retirement (approval date prior to 23 Feb 94) and those with an approved DA Bar to Reenlistment. b. All SGT with a BASD of 23 Feb 86 or earlier except those with approved retirement (approval date prior to 23 Feb 94) and those with an approved DA Bar to Reenlistment. Noncommissioned Officer Evaluation Reports (NCO-ER): Complete the Record reports are optional and authorized only for SFC competing for MSG. They may be submitted only for SFC who have completed at least 6 months in the current duty position under the same rater as of 31 Dec 93. Also, they must not have received a previous report for the current duty position. All Sergeants First Class in the Zones of Consideration that are stationed at BAMC are required to report to the Personnel Service Center, Enlisted Records Section, Building 2263, Rm# 225, NLT 29 Nov 93 to review the DA Forms 2A and 2-1. Anyone that has not reviewed his/her packet before the suspense date will have their record forwarded to the board with the statement 'SM not available for signature.' POC: SFC Delgado or SGT Hopes, 6-8720/6-8580. (HSHE-PDP)(14/15)

6. U.S. ARMY RECRUITING COMMAND VISIT. Are you interested in applying for a Warrant Officer appointment? A team from Fort Knox, KY, will be at Fort Sam Houston, TX on 15 Feb 94 to conduct two briefings on how to apply for a Warrant Officer appointment. Two briefings, one at 0900 hours and next at 1300 hours, will be held in Bldg 2247, Army Learning Center, corner Stanley Road and New Braunfels Avenue. Briefings are open to all service personnel, all enlisted grades, active duty or reserves, U.S. Army, Air Force, Navy or Marine Corps. If you are unable to attend the Ft Sam Houston briefings, two briefings also will be conducted at the Skylark Recreation Center, Lackland AFB, 0900 hours and 1300 hours, on 16 Feb. All personnel interested in a Warrant Officers appointment should plan to attend one of these information briefings. POC: Mrs. Pape, Personnel Services Branch, 1-2646. (AFZG-PA-AS)(2/2)

7. INDIVIDUAL TRAINING EVALUATION PROGRAM (ITEP). SDT Notices for the April 1994 Test Period have been forwarded to all DTSO/commanders. The following PMOSCs are due evaluation: 00E2,3,4(TK2); 02B2,3,4; 02C2,3,4; 02D2,3,4; 02E2,3,4; 02F2,3,4; 02G2,3,4; 02H2,3,4; 02J2,3,4; 02K2,3,4; 02L2,3,4; 02M2,3,4; 02N2,3,4; 02T2,3,4; 02U2,3,4; 16T2,3,4; 25L2,3,4; 29W4; 42F2,3,4; 44E2; 51H3,4; 63B2; 63H2; 63S2; 79D3,4; 91E2,3,4; 91G2,3,4; 91L2,3,4; 91Y2,3,4; 95B2,3,4. Soldiers in above PMOSCs who have not received their SDT Notice should contact their command immediately. (HSHE-PO)(1/3)

8. INDIVIDUAL TRAINING EVALUATION PROGRAM (ITEP). Test schedule for the February 1994 Test Period has been forwarded to all DTSOs/commanders. The following PMOSCs are due evaluation: 12B2,3,4; 12C2,3,4; 12F2,3,4; 13R2,3,4; 14D2,3,4; 16D2,3,4; 16E2,3; 31W4; 45D2; 51G2; 51T3,4; 57E2,3,4; 63D2; 63E2; 81B2; 82B2. Soldiers in the above PMOSCs who have not received notification of date and time of testing should contact their commander immediately. Soldiers will report in military uniform and will have their Armed Forces Identification Card (DD Form 2A) when reporting. All instructions have been provided to commanders in writing. Commanders and supervisors will ensure that soldiers are properly notified and provided all required information. Soldiers should report 10 minutes prior to scheduled time to sign in. (HSHE-PO)(1/3)

9. WEAPONEER CERTIFICATION. Train the Trainer/Certification on the Weaponeer will be conducted every third Thursday of every month. A minimum of 10 personnel and a maximum of 20 personnel for each class. This class is mandatory for any future use of the weaponeer. For additional information contact SFC Barros or SSG Bradshaw, AC/RC Training Division, DPTMSEC, at 221-4001/4106. (AFZG-PTM-TR)(5/10)

10. CARES AWARD. CARES is an acronym for Compassionate, Attentive, Responsive, Enthusiastic, and Smiling. The CARES Program, developed by the Human Relations Council at BAMC in 1981, was established to recognize BAMC personnel -- military, civilian, and/or volunteers -- who exemplify the CARES spirit throughout the Command. This recognition is intended both to commend those individuals and groups who present themselves to patients, to the public, and to other staff members in a friendly, courteous, and positive manner, and to encourage similar conduct and demeanor by all BAMC personnel. Nomination for either the individual CARES Award, two of which are presented each month, or for the group CARES Award, which is presented to the entire staff of an activity, ward or clinic every three months, can be made by anyone -- a patient, a patient's family, a supervisor, a co-worker, a visitor, etc. Nominations are reviewed by the members of the Human Relations Council and selections made thereafter. Civilian recipients are awarded a $100 monetary performance award; military recipients are awarded the Army Achievement Medal and are considered for a 3-day pass by their respective supervisors. Take advantage of this unique opportunity to commend those who have served you well. Simply complete the CARES Award Nomination Form, (BAMC F/L 660), available through normal publication channels, the Information Desks, or from one of the BAMC Chaplains' Offices. Your time and efforts in doing so will be greatly appreciated by those selected. (HSHE-PC)(1/2)

11. HUMAN RESEARCH INFORMATION NEEDED. At the direction of the Secretary of Defense and The Surgeon General of the Army, all Army medical units have been tasked to report by 1 Mar 94 on any and all records or knowledge of research involving radiation exposure of human subjects between 1944 1974. ANYONE in the BAMC Community with knowledge of this type of research or the disposition of any such records is requested to contact MAJ Yeager, Project Officers, Department of Clinical Investigation, BAMC, ASAP at 6-9495/9511. (HSHE-CI)(1/2)

12. CIVILIAN ADVISORY COUNCIL. The Civilian Advisory Council (CAC) will meet this month on 17 Feb, 0900-1000 at the new Physical Fitness Center on Wilson Road. NOTE: This is a one time only change of meeting place. The CAC Representatives will

have an opportunity to tour the new facility immediately following the meeting. Since parking is limited consider: car pool or walk (for the exercise and weather permitting). Call Paula Gray for further information 6-6841/6-8226. (HSHE-CI)(2/2)

1 MERICAN HEART MONTH IS FEBRUARY. Have your blood pressure checked and learn about high blood pressure. For your heart's sake, sign up for Smoking Cessation. For your heart's sake, get your cholesterol and blood pressure checked; sign up for a Health Risk Appraisal. Call Army Community Health Nursing, 6-8226/6-6841, for schedule of Smoking Cessation class, and for appointment for blood pressure check, cholesterol check and a Health Risk Appraisal. Active duty and retired military, their family members, and civilian employees are welcome! (HSHE-DHN)(2/3)

14. EXPECTANT FATHERS CLASS. Get to the heart of the issues in fathering. Becoming a father is easy and requires little preparation. Knowing and practicing what it takes to be a father is a lifelong process and requires commitment to learning the skills for success. All expectant fathers are invited to attend the EXPECTANT FATHERS CLASS offered by Army Community Health Nursing. This two-hour class will focus on the concerns and issues confronting fathers-to-be as they begin their lifelong careers of fathering. For further information and to register, call 6-6841/6-8226. (HSHE-DHN)(2/3)

15. CONTRACT FOR IMPAC CARD. The contract for the International Merchant Purchase Authorization Card (IMPAC) expires 28 Feb 94. All VISA cards currently in use also expire 28 Feb 94. The General Services Administration has assured the Directorate of Contracting that the new contract will be issued by the end of January 94. They expect new cards to be provided to all current cardholders prior to the 28 Feb 94 expiration date. If for some unforeseen reason the new contract is not awarded and/or new cards are not received by 28 Feb 94, beginning 1 Mar 94 it will be necessary to process a purchase request for your purchases under $2,500.00, until the new cards have been received. POC: Mr. Herman C. Colegrove, Directorate of Contracting, 1-4122. (AFZG-DOC-S)(4/4)

16. FURNITURE PURCHASES. Customers having requirements to purchase furniture must contact Kay Jones, DOC, 13250, rather than contacting the vendors. Ms. Jones will provide advance guidelines for each furniture purchase and help assure funds obligation before the end of FY94. (AFZG-DOC)(2/3)

17. VOLUNTEERS NEEDED FOR ARMY COMMUNITY SERVICE (ACS) AND ARMY EMERGENCY RELIEF (AER). "Soar With T Eagles" Join the friendly staff of ACS. Army Community Service has immediate openings in AER and Budget Counseling. Emergency Relief is in need of volunteers to assist at the main desk on Tue, Wed and Thu mornings. On the job training will be given. Budget Counseling has afternoon positions available. Training will be given prior to placement. For more information contact Sue York, ACS Volunteer Supervisor, 221-2418. (AFZG-PA-FFCS)(1/3)

18. ARMY COMMUNITY SERVICE VOLUNTEER ORIENTATION. Army Community Service (ACS) will hold Volunteer Orientation on Wed, 16 Feb, 0930-1130 at the Roadrunner Community Center. A wide variety of volunteer opportunities are available. For more information, contact Sue York, ACS, 221-2418. (AFZG-PA-FFCS)(1/1)

19. FREE TAX HELP!! Volunteer Income Tax Assistance (VITA) is available for eligible BAMC soldiers from 1 Feb to 15 Apr 94. Schedule an appointment with your company tax assistor (listed below) or call CPT Clark at 6-9949/6-9135. HHC: CPT Williams - 6-8708/8746, SFC Lee - 6-6465/8162; A CO: SFC Leigh - 6-8328/8504, SSG Becvar - 6-6580, LTC Housing - 6-8328/8504 (after 1430 hours); B CO: LT Bartholomew - 6-6083, SFC Kline - 6-6260, SSG White 6-6260; B CO: LT Elmore - 6-7254, SFC Baker - 6-9640, SSG Donaldson - 6-9640; MED HOLD/STUDENT CO: CPT Pickering - 6-6515, MSG Tyrance - 6-9423/8947. (HSHE-TC-B/C)(1/9)

20. GRAFFITI WATCHERS. BAMC is experiencing a Rash of Graffiti throughout the hospital. There will be a 4-day pass for the military person or Spot-Award for the civilian employee who spots the artist(s) and reports the offense to the BAMC Provost Marshal. Report must result in an apprehension. (HSHE-LOH)(3/3)

21. CD PLUSNET. Access to OVID via modem with automatic log in features has been installed in the BAMC Medical Library for library patron use. Initial instructions will be given, if needed. POC: Mrs. Yu, 6-6119/6-8182. (HSHE-CSL)(2/2)

22. RECORD AND RADIATION TESTING. The onset of a new calendar year requires Army agencies to purge their files in accordance with established regulations. Be advised that any and all records relating to the use of humans in the testing and evaluation of any toxic agent, including medical agents, and especially ionizing radiation, must be retained until further notice. (4/4)

23. COMMISSARY CLOSURE. The Sam Houston Commissary will be closed on Mon, 21 Feb 94 in observance of Presidents' Day. POC: Ms. Boyd, 1-5626. (DECA/MW/SAM)(2/2)

2 COMMISSARY/PX COUNCIL MEETING. The next Commissary/PS Council Meeting will be held on 17 Feb 94, 0930, DOL Conference Rm, Bldg 4197. POC: Ms. Tate, 221-3404. (AFZG-DOL)(1/1)

2!)ST/MISSING. The following property are missing from the Central Materiel Services (CMS): GOMCO 792, MMCN E4557, Serial #65710; Venrnitro 2150, MMCN K6362, Serial #64083; Vernitron 2113, MMCN A5508, Serial #70263; Infuser pump PCA, MMCN K8796, Serial #AT03430; GOMCO 402, MMCN A4754, Serial #B1-1531; GOMCO 400, MMCN K4010, Serial #D1-5623; Aquamatic K-20, MMCN M1072, Serial #740496; Enteral Pump, MMCN K8031; Serial #12788. POC: SSG Rivers or SSG Campbell, 6-9449. (HSHE-SDA)(3/4)

26. LOST/MISSING. The following property are missing from Beach Anesthesia: K7246, 651501C178443, Blood Warmer System, AMER MED SYS, DW-1000A, 363528; K8706, 651500C177061, Stimulator, LIFE TECH, NS2C, 50972. POC: LTC Hagan, 6-9721. (HSHE-SDA)(1/4)

SECTION I. OFFICIAL

27. CLOVERLEAF INTERNATIONAL TRAINING IN COMMUNICATION (ITC) CLUB. Do you get butterflies when speaking in public? Learn how the ITC CPO approved training program can help you! Join us at the ITC meeting at 1145-1300, Thu, 17 Feb, in the Conference Room of the Fort Sam Houston Branch of the San Antonio Credit Union. There is no cost to attend and we invite you to bring a brown-bag lunch. For more information, contact Ms. R. Clare Knight, 1-9934/1-9964. (HSMC-DO)(1/1)

28. MASTER OF ARTS/MBA PROGRAM. Webster University offers an evening graduate degree program leading to a Master of Arts/MBA in Business, Computer Resources and Information Management, Health Services management, Human Resources Development, Management, Public Administration and Procurement and Acquisitions Management. Classes are at Fort Sam, Brooks AFB, Kelly AFB and Lackland AFB. Up to 12 semester hours may be transferred into the program. Credit may be allowed for Senior Service Schools. (AFZG-PA-FE)(2/2)

29. ANIMALS FOR ADOPTION. The following animals are available for adoption at the FSH Veterinary Treatment Facility (Bldg 2186): DOG - Terrier mix, adult female, reddish brown coloring, about 25 pounds, well behaved, housebroken and very gentle. PUPPIES - (2) Terrier mix, both female, about 4 months old, black coloring, will be medium sized adults, very cute; (2) Lab mix puppies, both male, black coloring, one is about 6 wks, one is about 12 wks old, adorable. CATS - (2) Orange tabbies, both male, very affectionate and friendly; black long haired, very affectionate and friendly. KITTEN - all black, about 12 wks old, very affectionate and friendly. Additional information may be obtained by calling 6-9656/6-9657. (HSHE-VS)(1/1)

FOR THE COMMANDER:

OFFICIAL

HERBERT K. REAMEY III
Colonel, MS
Chief of Staff

[illegible]
Lieutenant Colonel, MS
Chief, Information Management
Division

DISTRIBUTION: D

ARM1.941221.003k

HSHE-DRR 1 March 1994

MEMORANDUM FOR Chief, Dept. of Clinical Investigation

SUBJECT: Human Radiation Research

I have reviewed all information available on the external-source ionizing radiation protocols given to me by MAJ Yeager, Project Officer, Human Radiation Research Project, BAMC. I was able to determine that 3 of the 12 protocols could be considered Safe and Effective at the time they were active due to their clinical trial status. There was insufficient data on the remaining 9 protocols to make such a determination.

A. Frias Colon

ANTONIO E. FRIAS, M.D.
COL, MC
Chief, Radiation Oncology

ARM1.941221.003la

HSHE-DRN 28 February 1994

MEMORANDUM FOR Chief, Dept. of Clinical Investigation

SUBJECT: Human Radiation Research

1. References:

a. Phan, T. and Wasnich, R. Practical Nuclear Pharmacy, 2nd Ed., 1981. Banyan Enterprises, Ltd., Honolulu, Hawaii, 96827.

b. Shilton, H. M. and Witcofski, R. L., Nuclear Pharmacy, 1986. Lea & Febiger, Philadelphia.

2. I have considered the attached list of radiopharmaceuticals provided to me by MAJ Yeager, Project Officer, Human Radiation Research, BAMC. Utilizing my professional knowledge and the references cited above, I have determined those protocols so indicated as "SE" as being considered Safe and Effective by the FDA either at the time of the study or since the study was approved. The remaining protocols involving radiopharmaceuticals described the use of radioisotopes that are unknown to me and are not listed in the above references, or were conjugated to another reagent so as to yield a preparation which was never approved by the FDA for some reason.

John D Thomas

JOHN D. THOMAS
LTC, MS
Nuclear Pharmacist, BAMC

Protocol 1

a. Title: Survival Rates of Testis Tumors (Part of Army-wide investigation treatment study)

b. Period and location: UNK

c. Principal/Associate Investigators, academic titles, organizational affiliations: Frank E. Ceccarelli, M.D. COL, MC

d. DOD sponsoring organization: BAMC

e. Number of subjects entered into the study: 27 at time of report.

f. Purpose and description of the study: A prospective evaluation of preoperative irradiation vs. irradiation only for the treatment of Class II and IV testis tumors.

g. Effects of the study on participants: Preliminary evaluation indicated preoperative irradiation gave better results.

h. Medical or research follow-up: UNK

i. Types and nature of existing records: BAMC DCI Annual Research Progress Report

j. Extent of records: See attached.

CLINICAL RESEARCH SERVICE
Brooke General Hospital
Brooke Army Medical Center
Fort Sam Houston, Texas 78234

RESEARCH PROJECT RESUME

TITLE: Survival Rates of Testis Tumors
(Part of Army-wide investigation treatment study)

WORK UNIT NO.: C-39-64

PRINCIPAL INVESTIGATOR: Frank E. Ceccarelli, M.D., COL, MC

ASSOCIATE INVESTIGATORS:

TECHNICAL OBJECTIVES

METHODS

A prospective evaluation of preoperative irradiation vs. irradiation only for the treatment of Class II and IV testis tumors.

PROGRESS

27 patients in each category have been treated. Preliminary evaluation seems to indicate that preoperative irradiation gives better results.

STATUS: Ongoing

ESTIMATED DATE OF COMPLETION: 1975

INCL 1

Protocol 2

a. Title: Conservative Surgery Following Preoperative Radiotherapy of Lung Cancer

b. Period and location: UNK

c. Principal/Associate Investigators, academic titles, organizational affiliations:
Virendra S. Saxena, M.D., MAJ, MC
Frank R. Hendrickson, M.D.
Robert J. Jensik, M.D.
Penfield Faber, M.D.

d. DOD sponsoring organization: BAMC

e. Number of subjects entered into the study: UNK

f. Purpose and description of the study: Since 1962 preoperative radiotherapy has been given to a selected group of lung cancer patients. A total of 205 patients have been treated, 183 of which have come to surgery. Particular interest has developed in the use of sleeve resections for some lesions permitting conservation of functioning pulmonary parenchyma or resection of tumor otherwise inoperable. twelve trachael sleeve resections and 34 bronchial sleeve resections have been performed.

g. Effects of the study on participants: See attached.

h. Medical or research follow-up: UNK

i. Types and nature of existing records: BAMC DCI Annual Research Progress Reports.

j. Extent of records: See attached.

Encl 12

CLINICAL RESEARCH SERVICE
Brooke General Hospital
Brooke Army Medical Center
Fort Sam Houston, Texas 78234

RESEARCH PROJECT RESUME

TITLE: Conservative Surgery Following Preoperative Radiotherapy of Lung Cancer

WORK UNIT NO.: C-60-72

PRINCIPAL INVESTIGATOR: Virendra S. Saxena, M.D., MAJ, MC

ASSOCIATE INVESTIGATORS: Frank R. Hendrickson, M.D.; Robert J. Jensik, M.D.; Penfield Faber, M.D.

TECHNICAL OBJECTIVES

Since 1962 preoperative radiotherapy has been given to a selected group of lung cancer patients. A total of 205 patients have been treated, 183 of which have come to surgery. Particular interest has developed in the use of sleeve resections for some lesions permitting conservation of functioning pulmonary parenchyma or resection of tumor otherwise inoperable.

METHODS

Twelve tracheal sleeve resections and 34 bronchial sleeve resections have been performed. Comparisons will be made in these particular areas with the 57 lobectomies or segmental resections and the 80 pneumonectomies comprising the total resected group. Emphasis will be placed on the ability to do anastomoses in the heavily irradiated tissues with a minimum of complications and with satisfactory end results and significant conservation of pulmonary function. The overall survival in this preoperative group has run just short of 30 percent.

PROGRESS

CONCLUSIONS: The combination of irradiation and pulmonary sleeve resection is a justifiable treatment in a very selective group of patients. One of the main advantages of preoperative radiation therapy may well be the conversion of patients with unresectable tumors into candidates for a sleeve resection.

STATUS: Completed. Accepted for publication in American Journal of Roentgenology, Radium Therapy, and Nuclear Medicine

ESTIMATED DATE OF COMPLETION:

INCL 1

ARM1.941221.003ld

Protocol 3

a. Title: Phase I Protocol for the Evaluation of Combined Radiotherapy and Chemotherapy for Stage II-B, III-A and III-B Hodgkin's Disease

b. Period and location: UNK

c. Principal/Associate Investigators, academic titles, organizational affiliations:
John P. Whitecar, Jr., M.D., MAJ, MC
Nicholas Bethlenfalvay, M.D., LTC, MC
Stephen B. Strum, M.D., MAJ, MC

d. DOD sponsoring organization: BAMC

e. Number of subjects entered into the study: 0 at time of report.

f. Purpose and description of the study: Ultimate goal is to prolong duration of remission and survival in patients with Stages II-B, III-A and III-B Hodgkin's disease. Objective to determine the tolerance to radiotherapy after courses of MOPP chemotherapy (MOPP = Mustargen, Oncovin, Procarbazine and Prednazone). Subsequent goal was to increase to 6 courses of MOPP.

g. Effects of the study on participants: UNK

h. Medical or research follow-up: UNK

i. Types and nature of existing records: BAMC DCI Annual Research Progress Report.

j. Extent of records: See attached.

Encl 12-3

CLINICAL RESEARCH SERVICE
Brooke General Hospital
Brooke Army Medical Center
Fort Sam Houston, Texas 78234

RESEARCH PROJECT RESUME

TITLE: Phase I Protocol for the Evaluation of Combined Radiotherapy and Chemotherapy for Stage II-B, III-A and III-B Hodgkin's Disease

WORK UNIT NO.: C-98-72

PRINCIPAL INVESTIGATOR: John P. Whitecar, Jr., M.D., MAJ, MC

ASSOCIATE INVESTIGATORS: Nicholas Bethlenfalvay, M.D., LTC, MC
Stephen B. Strum, M.D., MAJ, MC

TECHNICAL OBJECTIVES

Ultimate goal is to prolong duration of remission and survival in patients with Stages II-B, III-A and III-B Hodgkin's disease.

METHODS

Initial objective of the study is to determine the tolerance to radiotherapy after three courses of MOPP chemotherapy (MOPP = Mustargen, Oncovin, Procarbazine and Prednisone). Subsequent goal is to increase to six courses of MOPP.

PROGRESS

This is a Southwest Cancer Chemotherapy Study Group protocol on which we have entered 0 patients to date. Recently opened study.

STATUS: Ongoing

ESTIMATED DATE OF COMPLETION: 1974

INCL 1

Protocol 4

a. Title: Seminoma of the Testicle: Prophylactic Mediastinum Irradiation Versus Periaortic and Pelvic Irradiation Alone

b. Period and location: UNK

c. Principal/Associate Investigators, academic titles, organizational affiliations:
Duane O. Ytredal, M.D., MAJ, MC
John S. Bradfield, M.D., MAJ, MC

d. DOD sponsoring organization: BAMC

e. Number of subjects entered into the study: 71

f. Purpose and description of the study: To present the results of a retrospective study of treatment techniques of 80 patients with seminoma of the testicle seen at Brooke General Hospital from 1 Jul 57 to 31 Mar 71. Patients with testicular cancer from the Tumor Registry were reviewed, classified and entered into the study.

g. Effects of the study on participants: 49 patients were treated prophylactically to the mediastinum and left supraclavicular area in addition to receiving periaortic and pelvic irradiation. 22 patients with Stage I disease received only periaortic and pelvic irradiation. No recurrences have been noted in Stage I patients with either method of treatment.

h. Medical or research follow-up: UNK

i. Types and nature of existing records: BAMC DCI Annual Research Progress Report.

j. Extent of records: See attached.

Encl 12-4

CLINICAL RESEARCH SERVICE
Brooke General Hospital
Brooke Army Medical Center
Fort Sam Houston, Texas 78234

RESEARCH PROJECT RESUME

TITLE: Seminoma of the Testicle: Prophylactic Mediastinum Irradiation Versus Periaortic and Pelvic Irradiation Alone

WORK UNIT NO.: C-120-72

PRINCIPAL INVESTIGATOR: Duane O. Ytredal, M.D., MAJ, MC

ASSOCIATE INVESTIGATORS: John S. Bradfield, M.D., MAJ, MC

TECHNICAL OBJECTIVES

To present the results of a retrospective study of treatment techniques of 80 patients with seminoma of the testicle seen at Brooke General Hospital from 1 July 1957 to 31 March 1971.

METHODS

The Tumor Registry records of all patients with testicular cancer seen during the period of the study were reviewed and those cases classified as seminomas were entered into the study.

PROGRESS

RESULTS: 49 patients with Stage I disease were treated prophylactically to the mediastinum and left supraclavicular area in addition to receiving periaortic and pelvic irradiation. Twenty-two patients with Stage I disease received only periaortic and pelvic irradiation. No recurrences have been noted in Stage I patients with either method of treatment.

STATUS: Completed

ESTIMATED DATE OF COMPLETION:

INCL 1

Protocol 5

a. Title: Evaluation of Combined Radiotherapy and Chemotherapy for Stages II-B, III-A and III-B Hodgkin's Disease (SWOG 160)

b. Period and location: UNK

c. Principal/Associate Investigators, academic titles, organizational affiliations:
Robert P. Bowman, M.D., MAJ, MC
Hayden G. Braine, M.D., MAJ, MC

d. DOD sponsoring organization: BAMC

e. Number of subjects entered into the study: UNK at this institution.

f. Purpose and description of the study: To determine the safety and effectiveness with which total nodal radiotherapy could be given following MOPP chemotherapy in patients with II-B, III-A, and III-B Hodgkin's disease.

g. Effects of the study on participants: See attached.

h. Medical or research follow-up: UNK

i. Types and nature of existing records: BAMC DCI Annual Research Progress Report

j. Extent of records: See attached.

Encl 12

DEPARTMENT OF THE ARMY
Brooke Army Medical Center
Fort Sam Houston, Texas 78234
CLINICAL INVESTIGATION SERVICE

INVESTIGATION PROJECT RESUME

TITLE: Evaluation of Combined Radiotherapy and Chemotherapy for Stages II-B, III-A and III-B Hodgkin's Disease.

WORK UNIT NO.: SWG 160

PRINCIPAL INVESTIGATOR: Robert P. Bowman, M.D., Major, MC

ASSOCIATE INVESTIGATORS: Hayden G. Braine, M.D., Major, MC

OBJECTIVES

To determine the safety and effectiveness with which total nodal radiotherapy could be given following MOPP chemotherapy in patients with II-B, III-A, and III-B Hodgkin's disease.

TECHNICAL APPROACH

The major criterion for study is the toxicity in the radiation portion of this protocol. The study was initially begun with three cycles of MOPP, subsequently escalated to four cycles of MOPP and after sufficient experience had been gained it was anticipated to go to six cycles.

PROGRESS

A definitive analysis of this study was not accomplished by the Southwest Oncology Group coordinator. However, the radiotherapist from Wilford Hall USAF Medical Center reviewed his experience with the delivery of radiotherapy on this protocol in a total of 23 patients. Twelve patients had completed the study after receiving three cycles of MOPP and 11 patients completed the study after receiving 4 cycles of MOPP. Based on their data, there is no evidence that for a difference in the patient's tolerance to radiation therapy whether 3 or 4 cycles of MOPP precedes the radiotherapy. Accordingly, the Wilford Hall Group will escalate to 5 cycles of MOPP in 5 patients and, if tolerated, to 6 cycles of MOPP.

Status: Ongoing

Protocol 7

a. Title: 5-FU, MeCCNU + Radiotherapy with or without Testolactone for Localized Adenocarcinoma of the Exocrine Pancreas (SWOG 7509)

b. Period and location: UNK

c. Principal/Associate Investigators, academic titles, organizational affiliations:
J. Dean McCracken, M.D., LTC, MC
Peter S. Kennedy, M.D., MAJ, MC
Dan W. Luedke, M.D., MAJ, MC

d. DOD sponsoring organization: BAMC

e. Number of subjects entered into the study: 21 at date of report.

f. Purpose and description of the study: To evaluate the effect on survival of intensive radiotherapy and chemotherapy (5-FU and MeCCNU) of localized pancreatic adenocarcinoma. To evaluate any beneficial effect of testolactone when added to this regimen.

g. Effects of the study on participants: 21 patients evaluated, 9 died with median survival of 16 weeks. Median survival of all patients on study at time of report was 25 weeks. Six patients survived >40 weeks and 5 were still stable at time of report. The influence of Teslac on survival could not be determined. Toxicity was observed in all patients on study and was mainly hematologic. Greatest toxicities observed were grade 4 in 4 patients. End of Report as published.

h. Medical or research follow-up: UNK

i. Types and nature of existing records: BAMC DCI Annual Research Progress Report.

j. Extent of records: See attached.

DEPARTMENT OF THE ARMY
Brooke Army Medical Center
Fort Sam Houston, Texas 78234
CLINICAL INVESTIGATION SERVICE

INVESTIGATION PROJECT RESUME

TITLE: 5-FU, MeCCNU + Radiotherapy with or without Testolactone for Localized Adenocarcinoma of the Exocrine Pancreas.

WORK UNIT NO.: SWOG 7509

PRINCIPAL INVESTIGATOR: J. Dean McCracken, M.D., LTC, MC

ASSOCIATE INVESTIGATORS Peter S. Kennedy, M.D., MAJ, MC; Dan W. Luedke, M.D., MAJ, MC

OBJECTIVES

1. To evaluate the effect on survival of intensive radiotherapy and chemotherapy (5-FU and MeCCNU) of localized pancreatic adenocarcinoma.

2. To evaluate any beneficial effect of testolactone when added to this regimen.

TECHNICAL APPROACH

Patients with histological confirmation of adenocarcinoma of the exocrine pancreas with localized disease are eligible for enrollment in this study protocol.

Treatment regimen is as outlined in the schema accompanying the study protocol.

PROGRESS

Of the 21 patients evaluable on this study, 9 have expired with a median survival of 16 weeks. Of all patients on study, median survival to date is 25 weeks. Six patients have survived >J40 weeks with 5 continuing on study maintaining stable disease status or better. The influence of Teslac on survival cannot be determined as yet.

Toxicity has been observed in all patients on study and is mainly hemtologic. Greatest toxicities observed were grade 4 in 4 patients,

ARM1.941221.003lh

Protocol 8

a. Title: Treatment of Patients for Early Testicular Cancer with Irradiation and Chemotherapy with Vinblastine and Bleomycin (SWOG 7525)

b. Period and location: UNK

c. Principal/Associate Investigators, academic titles, organizational affiliations:
J. Dean McCracken, M.D., LTC, MC
Peter S. Kennedy, M.D., MAJ, MC
Dan W. Luedke, M.D., MAJ, MC

d. DOD sponsoring organization: BAMC

e. Number of subjects entered into the study: UNK

f. Purpose and description of the study: To determine if a combination of irradiation and chemotherapy can improve the two year disease free interval and five year survival in certain morphologic subtypes of IB and II nonseminomatous testicular tumors. To determine with sequence of irradiation and chemotherapy more favorably influences remission maintenance, survival and possibly cure. In part, this will be done by compression of the AFIP classification which excludes pure seminomas and choriocarcinomas.

g. Effects of the study on participants: Too early at time of report to analyze.

h. Medical or research follow-up: UNK

i. Types and nature of existing records: BAMC DCI Annual Research Progress Report.

j. Extent of records:

Encl 12-7

DEPARTMENT OF THE ARMY
Brooke Army Medical Center
Fort Sam Houston, Texas 78234
CLINICAL INVESTIGATION SERVICE

INVESTIGATION PROJECT RESUME

TITLE: Treatment of Patients for Early Testicular Cancer with Irradiation and Chemotherapy with Vinblastine and Bleomycin.

WORK UNIT NO.: SWOG 7525

PRINCIPAL INVESTIGATOR: J. Dean McCracken, M.D., LTC, MC

ASSOCIATE INVESTIGATORS: Peter S. Kennedy, M.D., MAJ, MC; Dan W. Luedke, M.D., MAJ, MC

OBJECTIVES

1. To determine if a combination of irradiation and chemotherapy can improve the two year disease free interval and five vear survival in certain morphologic subtypes of IB and II nonseminomatous testicular tumors.

2. To determine with sequence of irradiation and chemotherapy more favorably influences remission maintenance, survival and possibly cure. In part, this will be done by compression of the AFIP classification which excludes pure seminomas and choriocarcinomas.

TECHNICAL APPROACH

Eligibility: Previously untreated patients with histologically proven Stage IB and II pure embryonal, pure teratocarcinomas, mixed cell types with seminomatous elements.

Therapy will follow the schema outlined in the study protocol.

PROGRESS

This study will require several years of observation and patient registration. All patients registered are still alive. It is too early to analyze results of therapy.

Status: Ongoing.

Protocol 9

a. Title: Combined Preoperative Adjuvant Therapy in Rectal Carcinoma (SWOG 7618)

b. Period and location: UNK

c. Principal/Associate Investigators, academic titles, organizational affiliations:
J. Dean McCracken, M.D., LTC, MC
Peter S. Kennedy, M.D., MAJ, MC
Dan W. Luedke, M.D., MAJ, MC

d. DOD sponsoring organization: BAMC

e. Number of subjects entered into the study: 140 projected, total at date of report not known.

f. Purpose and description of the study: To determine if adjuvant preoperative radiotherapy and chemotherapy will yield a higher incidence than expected of Duke A lesions in a high risk group. To determine the survival of patients with and without regional node metastases.

g. Effects of the study on participants: Too early to analyze at time of report.

h. Medical or research follow-up: UNK

i. Types and nature of existing records: BAMC DCI Annual Research Progress Report.

j. Extent of records:

Encl 12-8

DEPARTMENT OF THE ARMY
Brooke Army Medical Center
Fort Sam Houston, Texas 78234
CLINICAL INVESTIGATION SERVICE

INVESTIGATION PROJECT RESUME

TITLE: Combined Preoperative Adjuvant Therapy in Rectal Carcinoma.

WORK UNIT NO.: SWOG 7618

PRINCIPAL INVESTIGATOR: J. Dean McCracken, M.D., LTC, MC

ASSOCIATE INVESTIGATORS: Peter S. Kennedy, M.D., MAJ, MC; Dan W. Luedke, M.D., MAJ, MC

OBJECTIVES

1. To determine if adjuvant preoperative radiotherapy and chemotherapy will yield a higher incidence than expected of Duke A lesions in a high risk group.

2. To determine the survival of patients with an without regional node metastases.

TECHNICAL APPROACH

Eligibility: Patients with carcinoma of the rectum judged by the surgeon to have clinically resectable disease by abdominoperineal resection.

Therapy will conform to the schema outlined in the study protocol.

PROGRESS

Approximately 140 patients are necessary for this randomized study between preoperative radiotherapy vs. preoperative radiotherapy plus systemic chemotherapy to detect a 20% increase in Duke A lesions (expected incidence 25%) in either of the two treatment arms. It is too early to analyze results at this time.

Status: Ongoing.

Protocol 12

a. Title: The Effect of Radiotherapy on Regional Lung Function in Patients with Bronchogenic Cancer

b. Period and location: UNK

c. Principal/Associate Investigators, academic titles, organizational affiliations:
Peter S. Kennedy, M.D., MAJ, MC
Stephen Sorgen, M.D., MAJ, MC
A. Baker, M.D., LTC, MC
Charles Brearley, M.D., MAJ, MC

d. DOD sponsoring organization: BAMC

e. Number of subjects entered into the study: UNK

f. Purpose and description of the study: To evaluate regional lung function in patients with localized, unresectable bronchogenic cancer by means of radionuclide lung scans, plus selected pulmonary function tests. To compare regional lung function in patients before and serially after therapeutic super voltage irradiation in an attempt to correlate changes in RLF with response to treatment, respiratory symptoms, local disease control, and survival. See attached for technical approach.

g. Effects of the study on participants: UNK

h. Medical or research follow-up: UNK

i. Types and nature of existing records: BAMC DCI Annual Research Progress Report.

j. Extent of records: See attached.

DEPARTMENT OF THE ARMY
Brooke Army Medical Center
Fort Sam Houston, Texas 78234
CLINICAL INVESTIGATION SERVICE

INVESTIGATION PROJECT RESUME

TITLE: The Effect of Radiotherapy on Regional Lung Function in Patients with Bronchogenic Cancer.

WORK UNIT NO.: C-36-77

PRINCIPAL INVESTIGATOR: Peter S. Kennedy, M.D., MAJ, MC

ASSOCIATE INVESTIGATORS: Stephen Sorgen, M.D., MAJ, MC; A. Baker, M.D., LTC, MC; Charles Brearley, M.D., MAJ, MC

OBJECTIVES

1. To evaluate regional lung function in patients with localized, unresectable bronchogenic cancer by means of radionuclide lung scans, plus selected pulmonary function tests.

2. To compare regional lung function in patients before and serially after therapeutic super voltage irradiation in an attempt to correlate changes in RLF with response to treatment, respiratory symptoms, local disease control, and survival.

TECHNICAL APPROACH

Patients with unresectable bronchogenic cancer who are candidates for primary treatment by cobalt irradiation undergo Xenon-Technesium Ventilation-Perfusion lung scans and selected pulmonary function tests. These studies along with clinical evaluation and standard P.A. chest x-ray will be repeated serially. Changes in the results of these tests will be correlated with tumor response and recurrence patterns.

Personnel: None

Funding: None

PROGRESS

Patients continue to be entered into this study. Data on early entries is being analyzed.

Status: Ongoing.

Protocol 27

a. Title: Clinical Evaluation of ^{111}Indium Bleomycin (MPI) Tumor Scintigraphin™

b. Period and location: Dept of Clinical Investigation, BAMC, Annual Reports.

c. Principal/Associate Investigators, academic titles, organizational affiliations: Robert J. Lull, M.D., LTC, MC

d. DOD sponsoring organization: BAMC

e. Number of subjects entered into the study: 0 at the time of report.

f. Purpose and description of the study: To evaluate the clinical usefulness of ^{111}Indium Bleomycin as a tumor specific radiopharmaceutical. To demonstrate the types of neoplasms for which scintigraphy with ^{111}Indium Bleomycin has a high positive correlation with extent of disease. Patients are referred from the Oncology Service because of known or suspected neoplasms. ^{111}Indium Bleomycin is administered intravenously with whole body distribution of the radiopharmaceutical to be measured using the whole body scintiscan table and dual isotope technique. Images will be obtained at variable periods of time during the three days following administration of the radiopharmaceutical.

g. Effects of the study on participants: UNK

h. Medical or research follow-up: UNK

i. Types and nature of existing records: BAMC DCI Annual Research Progress Reviews, Radiation Control Committee

j. Extent of records: See attached for Progress Review, RCC Minutes provide no additional data.

Encl 12-10

DEPARTMENT OF THE ARMY
Brooke Army Medical Center
Fort Sam Houston, Texas 78234
CLINICAL INVESTIGATION SERVICE

INVESTIGATION PROJECT RESUME

TITLE: Clinical Evaluation of ^{111}Indium Bleomycin (MPI Tumor Scintigraphin™).

WORK UNIT NO.: C-3-75

PRINCIPAL INVESTIGATOR: Robert J. Lull, M.D., Lieutenant Colonel, MC

ASSOCIATE INVESTIGATORS: Members of Oncology Service Staff

OBJECTIVES

To evaluate the clinical usefulness of ^{111}Indium Bleomycin as a tumor specific radiopharmaceutical.

To demonstrate the types of neoplasms for which scintigraphy with ^{111}Indium Bleomycin has a high positive correlation with extent of disease.

TECHNICAL APPROACH

Patients are referred from the Oncology Service because of known or suspected neoplasms. ^{111}Indium Bleomycin is administered intravenously with whole body distribution of the radiopharmaceutical to be measured using the whole body scintiscan table and dual isotope technique. Images will be obtained at variable periods of time during the three days following administration of the radiopharmaceutical.

Manpower: None

Funding: None

PROGRESS

No patients have been entered into this protocol to date.

Status: Ongoing

Protocol 28

a. Title: Intravenous Administration of ^{131}I-6-B-Indomethylnorcholesterol (NP-59) for Adrenal Evaluation and Imaging

b. Period and location: Dept of Clinical Investigation, BAMC, Annual Reports.

c. Principal/Associate Investigators, academic titles, organizational affiliations: Alton W. Baker, M.D., LTC, MC

d. DOD sponsoring organization: BAMC

e. Number of subjects entered into the study: UNK

f. Purpose and description of the study: Clinical evaluation of NP-59 as a diagnostic agent for the detection of adrenal-cortical disorders and as a potential scanning agent for detecting structural abnormalities of the adrenal medulla.
After the IV administration of approximately 1 to 2 millicuries of I-131 labeled 6-B-Iodomethylnorcholesterol (NP-59) over a 2 to 5 minute time interval, the patient is returned in approximately 4 to 6 days for an initial scan of the body. A subsequent scan is performed at approximately 6 to 8 days and depending upon the magnitude of uptake in the adrenal glands, scanning is carried from the 8th to 10th day. At this time, when clinical judgment indicates that the scan appears to be adequate for evaluating whether the adrenals are within normal limits or abnormal, a subsequent renal scanning agent is injected IV (Tc Glucoheptonate or TC DTPA) for visualizing kidneys and noted the relationships of the kidneys to the adrenal glands.

g. Effects of the study on participants: Five scans utilizing NP-59 for adrenal evaluation have been performed. No adverse reactions have occurred. The accuracy of this agent for scanning the adrenals - encouraging.

h. Medical or research follow-up: UNK

i. Types and nature of existing records: BAMC DCI Annual Research Progress Report

j. Extent of records: UNK

End 12-1

DEPARTMENT OF THE ARMY
Brooke Army Medical Center
Fort Sam Houston, Texas 78234
CLINICAL INVESTIGATION SERVICE

INVESTIGATION PROJECT RESUME

TITLE: Intravenous Administration of ^{131}I-6-B-Indomethylnorcholesterol (NP-59) for Adrenal Evaluation and Imaging.

WORK UNIT NO.: C-12-77

PRINCIPAL INVESTIGATOR: Alton W. Baker, M.D., LTC, MC

ASSOCIATE INVESTIGATORS:

OBJECTIVES

Clinical evaluation of NP-59 as a diagnostic agent for the detection of adrenal-cortical disorders and as a potential scanning agent for detecting structural abnormalities of the adrenal medulla.

TECHNICAL APPROACH

After the IV administration of approximately 1 to 2 millicuries of I-131 labeled 6-B-Iodomethylnorcholesterol (NP-59) over a 2 to 5 minute time interval, the patient is returned in approximately 4 to 6 days for an initial scan of the body. A subsequent scan is performed at approximately 6 to 8 days and depending upon the magnitude of uptake in the adrenal glands, scanning is carried from the 8th to 10th day. At this time, when clinical judgment indicates that the scan appears to be adequate for evaluating whether the adrenals are within normal limits or abnormal, a subsequent renal scanning agent is injected IV (Tc Glucoheptonate or TC DTPA) for visualizing kidneys and noted the relationships of the kidneys to the adrenal glands.

Personnel: None

Funding: None

PROGRESS

Five scans utilizing NP-59 for adrenal evaluation have been performed. No adverse reactions have occurred. The accuracy of this agent for scanning the adrenals is encouraging.

Status: Ongoing.

Protocol 29

a. Title: Technetium-99m-pyridoxylideneglutamate (99m-Tc-PG) for Diagnosis of Hepatobiliary Disease

b. Period and location: BAMC, 1978-1979.

c. Principal/Associate Investigators, academic titles, organizational affiliations:
Robert Telepak, M.D., MAJ, MC
Roswell Beck, M.D., MAJ, MC

d. DOD sponsoring organization: BAMC

e. Number of subjects entered into the study: 22 at time of report.

f. Purpose and description of the study: To evaluate the clinical efficacy of Tc-99m-PG as a diagnostic hepatobiliary and gallbladder agent. IV injection of the radiopharmaceutical is employed followed by sequential imaging of the anterior abdomen. The time of appearance of liver visualization, common bile duct, cystic duct, gallbladder, and evidence of activity in the bowel are all assessed. This procedure has been very helpful in differentiating normal, acute cholecystitis, chronic cholecystitis, partial biliary obstruction, and total biliary obstruction. It is fast, safe, and much more useful for evaluation of the biliary system than the OG or OVC in cases of elevated total bilirubin. It is now a part of the routine diagnostic approach of such patients along with ultrasound, ERCP, and transhepatic cholangiography.

g. Effects of the study on participants: Useful in providing diagnostic information on these patients.

h. Medical or research follow-up: UNK

i. Types and nature of existing records: BAMC DCI Annual Research Progress Reports, Radiation Control Committee Minutes.

j. Extent of records: See Attached, RCC Minutes provide no additional data.

End 12-12

DEPARTMENT OF THE ARMY
Brooke Army Medical Center
Fort Sam Houston, Texas 78234
CLINICAL INVESTIGATION SERVICE

INVESTIGATION PROJECT RESUME

TITLE: Technetium-99m-pyridoxylideneglutamate (99m-Tc-PG) for Diagnosis of Hepatobiliary Disease.

WORK UNIT NO.: C-22-78

PRINCIPAL INVESTIGATOR: Robert Telepak, M.D., MAJ, MC

ASSOCIATE INVESTIGATORS: Roswell Beck, M.D., MAJ, MC

OBJECTIVES

To evaluate the clinical efficacy of Tc-99m-PG as a diagnostic hepatobiliary and gallbladder agent.

TECHNICAL APPROACH

IV injection of the radiopharmaceutical is employed followed by sequential imaging of the anterior abdomen. The time of appearance of liver visualization, common bile duct, cystic duct, gallbladder, and evidence of activity in the bowel are all assessed. This procedure has been very helpful in differentiating normal, acute cholecystitis, chronic cholecystitis, partial biliary obstruction, and total biliary obstruction. It is fast, safe, and much more useful for evaluation of the biliary system than the OCG or OVC in cases of elevated total bilirubin. It is now a part of the routine diagnostic approach of such patients along with ultrasound, ERCP, and transhepatic cholangiography.

Personnel: None.

Funding: None.

PROGRESS

Twenty-two cases have been done so far in 1979 and have been very useful in providing good diagnostic information on the patients in whom it was performed.

Status: Ongoing.

Protocol 30

a. Title: Measurement of Total "Exchangeable" Body Sodium in Thermally Injured Patients - A Pilot Study (RCC Minutes)

b. Period and location: UNK

c. Principal/Associate Investigators, academic titles, organizational affiliations:
Robert J. Lull, M.D., LTC, MC, Dept of Radiology, BAMC.
Philip W. Rogers, M.D., MAJ, MC, USA Inst of Surg Rsch

d. DOD sponsoring organization: BAMC

e. Number of subjects entered into the study: UNK

f. Purpose and description of the study: Human use of ^{24}Na Chloride

g. Effects of the study on participants: UNK

h. Medical or research follow-up: UNK

i. Types and nature of existing records: Radiation Control Meeting Minutes. See attached.

j. Extent of records:

Encl 12-13

MINUTES OF RADIATION CONTROL COMMITTEE

The Radiation Control Committee, Brooke Army Medical Center, convened in Room 177 at 1105 hours on 21 March 1974.

Members Present:

Raoul O. Hagen, M.D., Col, MC, Chairman	Chief, Department of Radiology
Leroy R. Hieger, M.D., Col, MC	Chief, Department of Pathology
Rudi Ansbacher, M.D., LTC, MC	Chief, Clinical Research Service
Robert J. Lull, M.D., LTC, MC, Recorder	Chief, Nuclear Medicine Service
Frank A. Critz, IV, M.D., Maj, MC	Chief, Radiation Therapy Service
Robert P. Bowman, M.D., Maj, MC	OIC, Beach Low Level Laboratory
Michael J. Mustain, 1st Lt, MSC	Health Physics Officer

Members Absent:

Franklin D. Foley, M.D., DAC	Pathologist, ISR

Also Present:

Leslie M. Burger, M.D., Maj, MC	Assistant Chief, Department of Med.
Edward D. Helton, Capt, MSC	Clinical Investigation Service

1. Minutes of the last meeting (10 January 1974) were presented and accepted by the committee without change.

2. Colonel Hagen read his proposal for a new streamlined committee composition. This proposal was unanimously approved by all members present. The new composition of the Radiation Control Committee will include:

1. Raoul O. Hagen, M.D., Col, MC - Chairman
   Chief, Department of Radiology

2. Leroy R. Hieger, M.D., Col, MC - Member
   Chief, Department of Pathology

3. Rudi Ansbacher, M.D., LTC, MC - Member
   Chief, Clinical Investigation Service

4. Robert J. Lull, M.D., LTC, MC - Recorder
   Chief, Nuclear Medicine Service

5. Louis B. Levey, LTC, MSC - Member
   Radiological Physicist (currently on leave of absence)

6. Frank A. Critz, IV, MD, Maj, MC - Member
   Chief, Radiation Therapy Service

c. Title: Comparison of Radioactive Serotonin Release Assay and Lymphocyte Thymidine Uptake as Means of Platelet Antibody Identification.

User: Robert P. Bowman, M.D., Maj, MC; Department of Medicine

Radionuclide: ^{3}H - Serotonin - max on hand: 2 mCi

Use: In Vitro

d. Title: Platelet Function in the Presence of Varied Platelet Antibodies.

User: Robert P. Bowman, M.D., Maj, MC; Department of Medicine

Radionuclide: ^{3}H - Serotonin - max on hand: 2 mCi

Use: In Vitro

e. Title: Measurement of Total "Exchangeable" Body Sodium in Thermally Injured Patients - A Pilot Study.

User: Robert J. Lull, M.D., LTC, MC; Department of Radiology
Philip W. Rogers, M.D., Maj, MC; Institute of Surgical Research

Radionuclide: ^{24}Na Chloride - max on hand: 1 mCi

Use: Human, nonroutine.

f. Title: Phytohemoglutinin Stimulation of Sarcoid Lymphocytes.

User: Robert P. Bowman, M.D., Maj, MC; Department of Medicine

Radionuclide: ^{14}C - Tritium - max on hand: 3 mCi
^{3}H - Tritium - max on hand: 2 mCi

Use: In Vitro.

The committee discussed the desired degree of control that should be exercised in allowing investigators other than the principle user to actually handle the radioactive material or to perform in vitro test procedures. It was generally agreed that the Radiation Control Committee must regulate all personnel handling radioactive material to assure adequate training and experience for safe use. When otherwise unqualified personnel are obtaining on-the-job training, this must be done under the direct supervision of the principle user and must be regulated by the Radiation Control Committee. However, all members of the committee agreed that control of on-the-job

Protocol 31

a. Title: Assessment of Thyroid Hormone Kinetics in Thermally Injured Patients (RCC Minutes)

b. Period and location: UNK

c. Principal/Associate Investigators, academic titles, organizational affiliations:
Richard A. Becker, M.D.
Louis H. Aulick, Ph.D., MAJ

d. DOD sponsoring organization: BAMC

e. Number of subjects entered into the study: UNK

f. Purpose and description of the study:

g. Effects of the study on participants: UNK

h. Medical or research follow-up: UNK

i. Types and nature of existing records: Radiation Control Meeting Minutes.

j. Extent of records: See attached.

Encl 12-14

DEPARTMENT OF THE ARMY
BROOKE ARMY MEDICAL CENTER
FORT SAM HOUSTON, TEXAS 78234

AFZG-MDZ-HP 25 April 1979

SUBJECT: Minutes of Radiation Control Committee

1. The Radiation Control Committee convened at 1400 hours on 25 April 1979 in the Command Suite Conference Room, BAMC Headquarters, in accordance with BAMC Regulation 15-1, dated 1 February 1979.

2. Members Present: COL George M. McGranahan, Jr., Chairman, C, Professional Sv
COL Louis B. Levy, Radiological Physicist
COL Ralph Blumhardt, C, Nuclear Medicine Svc (Vice COL Hagen, C, Department of Radiology)
LTC John A. Jereb (Vice LTC Head, Department of Pathology and Area Lab Services)
MAJ Larry E. Slay (Vice COL Blanck, C, Department of Medicine)
CPT Robert W. Fenlason, Preventive Medicine Activity
CPT Wayne A. Wiatrowski, Recorder, Health Physics Officer
CPT Michael M. Lieberman, Clinical Investigation Service
CW2 David Chase (Vice CW3 Smith, Logistics Division)
Ms. Wanda L. Brown, Rep, ISR

Members Absent: LTC George L. Dunson, Radiopharmacist
MAJ Ronald N. Rubin, C, Hematology Service
MAJ Roberto Putzeys, C, Radiotherapy Service

3. Old Business.

a. The minutes of the previous meeting, held on 10 January 1979, were presented and unanimously approved by the committee members.

b. COL Blumhardt provided the committee with a copy of the agreement concerning the Nuclear Cardiology Section. The committee reviewed and approved the agreement.

c. Captain Wiatrowski noted that LTC Allison's interim request for the in-vitro use of isotopes at Department of Pathology and Area Lab Services had been unanimously approved.

d. Captain Wiatrowski briefed the committee on the letter received from Health Services Command concerning the utilization of pregnant x-ray technicians. The letter deleted the requirement to prohibit pregnant technicians from working in fluoroscopy provided that they can still remain under the recommended dose limit. Captain Wiatrowski was instructed

to prepare change to current BAMC Command Policy Statement implementing this new guidance. (Actions Pending)

e. The Nuclear Medicine floor plan at Beach Pavilion was reviewed by the Radiation Control Committee. The committee recommended approval of the plan with the provisions that: (1) two seperate waiting areas be provided, (2) an emergency shower be placed in the staff latrine or other suitable place, and (3) care is taken to review the shielding requirements for the CT scanner. COL Levy and CPT Wiatrowski noted that a floor plan must be obtained in order to determine any shielding requirements. COL Levy then noted that a Health Physics plan for the move of isotopes from Main Hospital to Beach Pavilion be formulated and CPT Wiatrowski pointed to the neccesity of performing a close-out survey on Ward 15B. (Actions Pending)

4. New Business.

a. LTC John A. Jereb, M.D. was unanimously approved by the Radiation Control Committee for in-vitro use of radioisotopes.

b. The Radiation Control Committee also approved Dr. Richard Becker, M.D., for in-vitro use of radioisotopes.

c. LTC Robert J. Telepak, M.D. was unanimously approved by the committee as Chief, Nuclear Medicine Clinic.

d. Protocol, "Assessment of Thyroid Hormone Kinetics in Thermally Injured Patients", submitted by Richard A. Becker, M.D. and MAJ Louis H. Aulick, Ph.D. was approved by the Radiation Control Committee.

e. The Health Physics Officer's Report was presented by Captain Wiatrowski. A copy of the report is appended to these minutes. He discussed, at length, the overexposures that occurred in Dental Clinic in the past three months.

f. COL Ronald R. Blanck was unanimously approved by the committee as Representative of the Department of Medicine to the Radiation Control Committee.

g. The Radiation Control Committee unanimously approved 1st LT Eugene P. Roth, MSC as the new BAMC Radiopharmacist.

h. Captain Fenlason noted that AEHA will be at BAMC on7 May 1979 to perform a hazardous light source survey.

Protocol 32

a. Title: Distribution and Control of Peripheral Blood Flow Following Extensive Leg Surface Injury

b. Period and location: UNK

c. Principal/Associate Investigators, academic titles, organizational affiliations: Louis H. Aulick, Ph.D., MAJ, MS

d. DOD sponsoring organization: BAMC

e. Number of subjects entered into the study: UNK

f. Purpose and description of the study: UNK

g. Effects of the study on participants: UNK

h. Medical or research follow-up: UNK

i. Types and nature of existing records: Radiation Control Meeting Minutes.

j. Extent of records: See attached.

Encl 12-15

DEPARTMENT OF THE ARMY
BROOKE ARMY MEDICAL CENTER
FORT SAM HOUSTON, TEXAS 78234

AFZG-MDZ-HP

15 January 1979

SUBJECT: Minutes of Radiation Control Committee

1. The Radiation Control Committee convened at 1430 hours on 10 January 1979 in the Command Suite Conference Room, BAMC Headquarters, in accordance with BAMC Regulation 15-1, dated 25 November 1977.

2. Members Present: COL George M. McGranahan, Jr., Chairman, C, Professional Sv
COL Louis B. Levy, Radiological Physicist
COL Ralph Blumhardt (Vice COL Hagen, C, Department of Radic
LTC George L. Dunson, Radiopharmacist
MAJ Ronald N. Rubin, C, Hematology Service
MAJ Roberto Putzeys, C, Radiotherapy Service
MAJ Larry E. Slay (Vice COL Burgin, C, Department of Medici
MAJ Kishorchandra L. Vyas (Vice LTC Head, C, Dept of Pathol and Area Lab Services)
CPT Robert W. Fenlason, Preventive Medicine Activity
CPT Wayne A. Wiatrowski, Recorder, Health Physics Officer
CPT Michael M. Lieberman, Clinical Investigation Service
CPT David C. Wymer, Nuclear Medicine Service
CW3 Clifton A. Smith, Rep, Logistics Division
Ms. Wanda L. Brown, Rep, ISR

Also Present: MAJ Louis H. Aulick, ISR

3. Old Business.

a. The minutes of the previous meeting, held on 5 October 1978, were presented and unanimously approved by the committee members.

b. Captain Wiatrowski commented on the vote on the report of the Linear Accelerator Subcommittee. The report had been approved by the Radiation Control Committee membership.

c. Captain Wiatrowski reported that the Command Policy Statement concerning Pregnant Technologists, which was approved at the last Radiation Control Committee meeting, is being published. He noted that the policy may be changed upon receipt of additional guidance from U.S. Army Health Services Command.

d. The Radiation Control Committee approved a collaborative effort concerning ISR Use of BAMC Radiopharmaceutical Animal Laboratory.

AFZG-MDZ-HP 15 January 1979

SUBJECT: Minutes of Radiation Control Committee

4. New Business.

a. MAJ Sherwyn L. Schwartz, M.D. was unanimously approved by the Radiation Control Committee for human use of radioisotopes.

b. The Radiation Control Committee also approved Dr. Richard Becker, M.D., for human use of radioisotopes.

c. Protocol, "Distribution and Control of Peripheral Blood Flow Following Extensive Leg Surface Injury," submitted by MAJ Louis H. Aulick, Ph.D., MSC was approved by the Radiation Control Committee.

d. The Radiation Control Committee also approved the protocol, "Technetium-99m Sulfur Colloid Particles,"--Nuclear imaging of patient pulmonary ventilation, submitted by CPT Marvin E. Hill, III, M.D., MC. COL Blumhardt and CPT Wymer were also approved as users under this protocol.

e. The Health Physics Officer's Report was presented by Captain Wiatrowski. A copy of the report is appended to these minutes.

f. The Radiation Control Committee discussed the use of radiopharmaceuticals for cardiac imaging in the Cardiology Service, BAMC. In particular, the committee discussed the requirements and responsibilities of principal users approved for human use. COL Blumhardt noted that some agreements had been reached between Nuclear Medicine Service and Cardiology Service which establishes joint responsibility in this area. COL Blumhardt indicated that he would forward a copy of the agreement document to the Health Physics Officer prior to the next meeting. Captain Wiatrowski noted that facilities and safety requirements for the use of radiopharmaceuticals in the Cardiology Service would have to be approved by the Radiation Control Committee prior to their actual use. Specific proposals are to be submitted by the next Radiation Control Committee meeting or action deferred again at that time.

g. LTC David Head was unanimously approved as Representative of Pathology and Area Lab Services to the Radiation Control Committee.

h. Captain Wiatrowski noted that the only principal user in the Department of Pathology and Area Lab Services has been transferred. The committee discussed the matter and recommended that LTC James L. Allison be asked to submit appropriate documents so he can be approved as principal user.

a. Title: Survival Rates of Testis Tumors (Part of Army-wide investigation treatment study) (DCI Annual Reviews)

b. Period and location: UNK

c. Principal/Associate Investigators, academic titles, organizational affiliations: Frank E. Ceccarelli, M.D. COL, MC

d. DOD sponsoring organization: BAMC

e. Number of subjects entered into the study: UNK

f. Purpose and description of the study: A prospective evaluation of preoperative irradiation vs. irradiation only for the tretment of Class II and IV testis tumors.

g. Effects of the study on participants: UNK

h. Medical or research follow-up: UNK

i. Types and nature of existing records:

j. Extent of records:

Protocol 33

a. Title: Radioisotopic Esophageal Clearance Test

b. Period and location: UNK

c. Principal/Associate Investigators, academic titles, organizational affiliations: Alton W. Baker, M.D., LTC, MC

d. DOD sponsoring organization: BAMC

e. Number of subjects entered into the study: UNK

f. Purpose and description of the study: UNK

g. Effects of the study on participants: UNK

h. Medical or research follow-up: UNK

i. Types and nature of existing records: Radiation Control Committee Minutes

j. Extent of records: See attached.

End 1

DEPARTMENT OF THE ARMY
BROOKE ARMY MEDICAL CENTER
FORT SAM HOUSTON, TEXAS 78234

AFZG-MDZ-HP 7 April 1978

SUBJECT: Minutes of Radiation Control Committee

1. The Radiation Control Committee convened at 1430 hours on 6 April 1978 in the Conference Room of the Command Suite, BAMC Headquarters, in accordance with BAMC Pamphlet 15-1, dated 15 March 1977.

2. Members Present: COL Andre J. Ognibene, Chairman, C, Professional Svcs
COL William W. Burgin, Jr., C, Department of Medicine
COL Raoul O. Hagen, C, Department of Radiology
COL Louis B. Levy, Radiological Physicist
LTC Alton W. Baker, C, Nuclear Medicine Service
LTC George L. Dunson, Radiopharmacist
MAJ Stephen D. Sorgen, C, Radiotherapy Service
MAJ Ronald N. Rubin, C, Hematology Service
CPT Wayne A. Wiatrowski, Recorder, Health Physics Officer
Ms. Wanda L. Brown, Rep, ISR

Members Absent: LTC Loren B. Henley, C, Dept of Pathology and Area Lab Svcs
CPT Rob G. Parrish, C, Clinical Investigation Service
CW3 Clifton Smith, Logistics Division

Also Present: COL Charles W. Lewis, C, Dermatology Service
CPT Michael M. Lieberman, Clinical Investigation Svc
CPT Robert W. Fenlason, Health and Environment Service
CW2 Joseph D. Chase, Logistics Division

3. Old Business.

a. The minutes of the previous meeting, held on 19 January 1978, were presented and unanimously approved by the committee members.

b. The Radiation Control Committee approved the authorization submitted by LTC Albert M. Thomason, M.D., MC, for Human Use, that was discussed at the previous meeting.

c. The Radiation Control Committee approved the request for authorization for machine produced radiation submitted by COL Charles W. Lewis, M.D., MC; LTC William S. Babcock, M.D., MC; and LTC Robert L. Rietschel, M.D., MC, by vote of 3 approving, 2 disapproving and 6 members abstaining.

AFZG-MDZ-HP 7 April 1978
SUBJECT: Minutes of Radiation Control Committee

4. New Business.

a. The protocol, "Radioisotopic Esophageal Clearance Test", submitted by Alton W. Baker, M.D., LTC, MC was approved.

b. The Health Physics Officer's Report was presented by Captain Wiatrowski. A copy if appended to these minutes. A motion was made to extend voting membership on the Radiation Control Committee to a representative from Health and Environment Service, BAMC. The motion was approved.

c. The request received from Nuclear Medicine Service (Copy attached) to use rabbits for quality assurance purposes was discussed. Based on radiation safety procedures outlined, in writing, by LTC George Dunson, the committee approved the request.

d. CPT Wiatrowski presented a memorandum to the Radiation Control Committee explaining the requirements and use of Radioactive Drug Research Committee as outlined in Title 21, U.S. Code of Federal Regulations, Part 361.1. After considerable discussion, the committee decided to defer action until the next scheduled meeting.

e. COL Levy presented a report of two malfunctions of the CO-60 Teletherapy unit. COL Levy indicated that corrective action was taken and that no personnel were injured in the incidents. He further stated that the unit would be deadlined if another malfunction occurred. COL Levy also indicated that he would report the incident to the Radiological Physics Center at M.D. Anderson Hospital in Houston, Texas.

f. COL Hagen indicated that he received a letter from Siemens Corporation regarding excessive exposure rates from Siemens equipment installed in Cardiology. He was requested to send a copy of the letter to C, Cardiology Service and Health Physics Office.

g. COL Ognibene noted that MAJ Sorgen was being transfered to Letterman Army Medical Center shortly. COL Ognibene thanked MAJ Sorgen for his help and cooperation the past two years. MAJ Roberto Putzeys, the new Radiotherapist is due to report to Brooke Army Medical Center on 5 July 1978. Radiology was asked to submit a copy of MAJ Putzeys' Curriculum Vitae to the Health Physics Office prior to the next Radiation Control Committee meeting. Upon receipt of MAJ Putzeys' Curriculum Vitae by the membership, temporary authorization is considered to be granted unless the membership telephoned objections to the Health Physics Officer. Formal action will be taken on MAJ Putzeys Curriculum Vitae at the July Radiation Control Committee meeting.

DEPARTMENT OF THE ARMY
BROOKE army MEDICAL CENTER
FORT SAM HOUSTON, TEXAS 78234-6200

REPLY TO ATTENTION OF

ARM1.941221.003m

HSHE-CI 8 March 1994

MEMORANDUM FOR Chief, Clinical Investigation Regulatory Office, AMEDD Center and School, Fort Sam Houston, TX 78234-6100

SUBJECT: Human Radiation Research

1. The following information about specific protocols listed in Enclosure 8, Memorandum, HSHE-CI, BAMC, 1 March 1994, subject: Human Radiation Research, is provided as requested:

Protocol	Title	Isotopes used/Remarks
Protocol #17	Bone Scanning...	^{99m}Technetium ✓ ✓
Protocol #20	Platelet Transfusion...	^{51}Cr-Platelets ✓ ✓
Protocol #21	Eval of Dopamine...	^{125}I-Iothalamate ISR ✓✓ ^{131}I-Albumin
Protocol #22	Determ. of Human...	^{125}I-Iothalamate ✓ ISR ✓
Protocol #23	Muscle Blood Flow...	^{133}Xenon ✓ ISR ✓

Protocol #26 Same protocol as #17, please disregard on Encl 8. Overall numbers should be adjusted to show 32 protocols with 20 utilizing radiopharmaceutical reagents, 13 of those 20 considered SE. My apologies for the repeated protocol and any inconvenience.

Protocol #30 Measurement of Total... ^{24}Na Chloride ISR ✓

Protocol #31 Assessment of Thyroid... Isotope used is unknown. The only other information available from RCC Minutes dated 25 April 1979 were the names of two investigators: MAJ Richard Becker, MD, and MAJ Louis Aulick, MD. ISR

Protocol #32 Distribution and Control... Isotope unknown. RCC Minutes dated 15 Jan 1979 had only the title and one investigator: MAJ Louis Aulick, MD. ✓

Protocol #33 Radioiscopic Esophageal... Isotope unknown. RCC Minutes dated 7 Apr 1979 had only the title and one investigator: LTC Alton Baker, MD.

2. Point of contact for this action is the undersigned. Again,

my apologies for the repeated protocol, especially if it changes numbers already forwarded to higher headquarters. If I can be of further assistance, please call me at 916-9511/9495.

CURTIS L. YEAGER
MAJ, MS
Project Officer, BAMC Human
Radiation Research Project

c

ARM1.941221.004a

DWIGHT D. EISENHOWER ARMY MEDICAL CENTER
Fort Gordon, Georgia 30905-5650

HSHF-R-NM (40-38a) 27 February 1994

MEMORANDUM THRU: C, Clinical Investigation
DCCS
for Commander

FOR: C, AMED Center and School (HSMC-GCI), Fort Sam Houston, TX 78234-6100.

SUBJECT: Human Radiation Research Summary Report

1. **REFERENCE(S)**:

a. Memorandum, AMED Center and School, HSMC-GCI, 26 Jan 94, subject: Human Radiation Research.

b. Memorandum, AMED Center and School, HSMC-GCI, 15 Feb 94, subject as above, (change-order).

c. Message, UNCLAS, Department of the Army, DACS-ZA, 15 Feb 94, subject: Records and Radiation Testing.

2. **SUMMARY REPORT**: The following summary report is submitted in accordance with directives in the cited references.

a. Negative report.

b. Evidence of Compliance. Documentaton in the form of hardcopy orders, taskings, reports, messages and personal notes are contained in Appendices attached to this report, and are forwarded as requested as evidence of compliance with the directives.

c. Synopsis.

(1) Received memorandum and orders for appointment as Human Radiation Research Project Officer.

(2) Reported to MAJ Grabenstein (CIRO, AMED Center and School).

(3) Met with Public Affairs Officer to discuss Annual Historical Reports.

(4) Met with C, Clinical Investigation. Obtained all Annual Research Progress

Reports from inception of CI through 1980.

(5) Prepared and delivered research taskings to key departments and services.

(6) Advertised via electronic mail and hardcopy Distribution A (as backup to EMAIL).

(7) Contacted and interviewed other key personnel with institutional memory.

(8) Met with the Public Affairs Officer to review Annual Historical Reports.

(9) Met with Chief and Assistant Chief, Clinical Investigation. Discussed Annual Research Progress Reports.

(10) Received research tasking reports from key personnel.

(11) Prepared report.

3. **POC**: The point of contact for this memorandum is the undersigned in Nuclear Medicine at Autovon 780-2745, commercial (706) 791-2745 or FAX (706) 791-3840.

C. DAVID KRIVANEK
Human Radiation Research
Project Officer

Enclosures (8)
1 - Appointment Orders
2 - Tasking Public Affairs
3 - Tasking Key Personnel
4 - Acknowledgement of Receipt
5 - EMAIL Message
6 - Distribution A
7 - Personal Notes
8 - Individual Reports

[illegible]

[illegible]

[illegible]

1. Effective [illegible] Charles D. Krivanek [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] [illegible] the following [illegible] duty:

[illegible] [illegible] [illegible]

2. Authority: [illegible]

3. Purpose: To generate an inventory of existing research records, plus attachments from records custodians to evaluate the thoroughness of the search for records.

4. Period: Indefinite or until relieved from duty.

5. Special Instructions: See attached memorandum, USAMRDC&E, HQMC-GCT, 26 Jan 94, subject: Human Radiation Research.

Atch

for VERNON E. SPALDING
BG, MC
Commanding

DISTRIBUTION:
1-Indiv concerned
1-DCFS
1-C, Dept of Clin Inv
1-C, Health Physics
1-File

Appendix 1

HSHF-R-NM (40-38a) ARM1.941221.004c 16 February 1994
S: 23 Feb 94

MEMORANDUM FOR: Public Affairs Officer, ATTN: Ms. Kirkland

SUBJECT: Human Radiation Research

1. **REFERENCE**: USAMDC&S, HSMC-GCI, 26 Jan 94, Subject: Human Radiation Research.

2. **AUTHORITY**: VOCDR

3. The undersigned has been assigned additional duty as the EAMC Human Radiation Research Project Officer with the responsibility for assembling an inventory of existing research records and statements from records custodians regarding activities in human radiation research. EAMC predecessor organizations are included.

4. Please review all available annual historical reports for the period 1944 through 1979 for discussion of research involving human exposure to ionizing radiation. Photocopies of pages of such discussions, citing the year and page number must be reported and provided. Provide a typed and signed memorandum describing your findings for inclusion in a summary report. All departments and activities are included, however, close attention is directed to activities in Clinical Investigation, Nuclear Medicine, Medical Oncology, Diagnostic and Therapeutic Radiology, Dermatology (Grenz Ray), Orthopedic, Surgery and Dental services, as well as RMD contracts and any connection with the Savannah River Facility with regard to medical research. In your research and report, err on the side of inclusion.

5. EAMC's suspense to Ft Sam Houston for the completed project is 1 March. This dictates assignment of a high priority for completion of all required research. I will be happy to assist you in researching any or all available historical reports.

6. POC for this memorandum is the undersigned at 5/2745.

C. DAVID KRIWANEK
Human Radiation Research
Project Officer

Appendix 2

HSHF-R-NM (40-38a) ARM1.941221.004d 16 February 1994
S: **24 Feb 94**

MEMORANDUM FOR: SEE DISTRIBUTION

SUBJECT: Human Radiation Research (Tasking)

1. **REFERENCE**: USAMDC&S, HSMC-GCI, 26 Jan 94, Subject: Human Radiation Research.

2. **AUTHORITY**: VOCDR

3. The undersigned has been assigned additional duty as the EAMC Human Radiation Resarch Project Officer with the responsibility for assembling an inventory of existing research records and statements from records custodians regarding activities in human radiation research. The research time frame will include EAMC predecessor organizations.

4. Please review all available administrative and centralized clinical records (excluding individual medical records) for the period 1944 through 1979 for discussion of research involving human exposure to ionizing radiation. The senior officer in each department, clinic and service listed below is responsible for the research and preparation of typed and signed memoranda describing their findings. The findings will be used to complete a summary report which will be sent to Ft Sam Houston upon completion. Negative reports are required.

5. Data research WILL INCLUDE, but not be limited to common and routine clinical practices (both established diagnostic and therapeutic interventions) involving the INTENTIONAL use of ionizing radiation AND THE SYSTEMATIC COLLECTION OF DATA (i.e. clinical investigations). All such projects will be reported and their records secured, since they implicitly question established procedures. The project DOES NOT INCLUDE common and routine clinical practices, such as established diagnostic and treatment methods, involving INCIDENTAL exposures to ionizing radiation, or RETROSPECTIVE studies of such data wherein it can be clearly established that experimentation or clinical investigation was not the original intent. Review of contracts and or grants records must be undertaken searching for any connection with the Medical College of Georgia, Veterans' Administration Medical Center and the Savannah River Facility with regard to human radiation research. In your research and report, err on the side of inclusion. Again, negative reports are required.

6. EAMC's suspense to Ft Sam Houston for the completed project is 1 March. This dictates assignment of a high priority for completion of all required research.

Appendix 3-1

7. POC for this memorandum is the undersigned at 5/2745 in Nuclear Medicine. Inquiries for additional information are encouraged.

C. DAVID KRIVANEK
Human Radiation Research
Project Officer

DISTRIBUTION LIST:
C, Dental Activity
C, Dermatology
C, Health Physics
C, Nuclear Medicine
C, Department of Radiology
C, Resources Management
Director of Contracting (DOC Ft Gordon)

Appendix 3-2

ACKNOWLEDGEMENT OF RECEIPT

Signatures on this document acknowledge the receipt of the memorandum, HSHF-R-NM, Subject: Human Radiation Research, dated 16 February 1994.

Report Rcv'd	Activity	Signature	Date
24 Feb	Dermatology	Julia Hardy	18 Feb 94
24 Feb	Health Physics	Chul T. Hobgood	18 Feb 94
18 Feb	Nuclear Medicine	[illegible]	18 FEB 94
8 Feb	Dept of Radiology	[illegible]	18 FEB 94
22 Feb	Resources Management	Linda A Maddox	18 Feb 94
25 Feb	Contracting (Ft Gordon)	Peter D. Wallace	18 Feb 94
25 Feb	Dental Activity JJ. Frick	[illegible]	18 Feb 94
25 Feb	PAO		

Appendix 4

Mailman message for KRIVANEK,C DAVID
Printed at EISENHOWER.ARMY.MIL Tue, 22 Feb 1994 11: :52
Subj: Human Radiation Research Tue, 22 Feb 1994 11:45:19 18 Lines
From: KRIVANEK,C DAVID in 'IN' basket. ARM1.941221.004f

A effort is currently underway to collect information about research involving human exposure to ionizing radiation at this facility (and its predecessor organizations) during the years 1944 through 1979.
The subject research activities INCLUDE common and routine clinical practices, (both diagnostic and therapeutic interventions) involving the INTENTIONAL USE OF IONIZING RADIATION and the SYSTEMATIC COLLECTION OF DATA (i.e. for clinical investigtions).
The project DOES NOT INCLUDE common and routine clinical practices, such as established diagnostic and therapeutic methods, involving INCIDENTAL EXPOSURE to ionizing radiation during the course of diagnosis and treatment, or RETROSPECTIVE studies of records and data wherein it can be clearly established that clinical investigation was not the original intent.
Personnel aware of human radiation research activities at this or predecessor facilities during the target years should contact the Human Radiation Research Project Officer at 5/2745 (Nuclear Medicine).

Local Message ID: 2753340@EISENHOWER.ARMY.MIL

KRIVANEK,C DAVID Last read: Tue, 22 Feb 1994 11:45:36
SURROGATE,BROADCASTER (Broadcast Mail) Not read.

Appendix 5
E-Mail

HSHF-R-NM (40-38a) 22 February 1994

MEMORANDUM FOR: See Distribution

SUBJECT: Human Radiation Research

1. An effort is currently underway to collect information about research involving human exposure to ionizing radiation at this facility (and its predecessor organizations) during the years 1944 through 1979.

2. The subject research activities INCLUDE common and routine clinical practices, (both established diagnostic and therapeutic interventions) involving the INTENTIONAL USE OF IONIZING RADIATION and the SYSTEMATIC COLLECTION OF DATA (i.e. for clinical investigations).

3. The project DOES NOT INCLUDE common and routine clinical practices, such as established diagnostic and therapeutic methods, involving INCIDENTAL EXPOSURE to ionizing radiation during the course of diagnosis and treatment, or RETROSPECTIVE studies of records and data wherein it can be clearly established that clinical investigation was not the original intent.

4. Personnel aware of human radiation research activities at this or predecessor facilities during the target years should contact the Human Radiation Research Project Officer at 5/2745 (Nuclear Medicine).

DISTRIBUTION

A

C. DAVID KRIVANEK
Human Radiation Research
Project Officer

Appendix Ce

PROJECT OFFICER
- PERSONAL NOTES -

1. **Telephone/Personal Contacts**: (*Attempted **Successful)

** MAJ Patricia F. Goad, present C, PTM&S, 791-6363

** MAJ Grabenstein, Clinical Investigation Research Officer @ AMED Center and School, Ft Sam Houston, TX, AV 471-2511, FAX (210) 554-4756

** Ms. Grace Green, Nurse for Dr. Kmiecik, Georgia Regional Physicians Offices, 860-2210

** Dr. Charles J. Hannon, Jr. (PhD, MSC), Former Resident Pharmacologist, Clinical Investigation, 1977 - 1978, Medical College of Georgia/VA (733-0188)

** Dr. Thomas A. Hanson, (COL, MC, Ret), Pediatrician, Former Chief, Professional Services, 1973-1974, USAH, Ft Gordon (738-7123 - Home)

** Dr. Virgil M. Hardin, (COL, MC, Ret), Nuclear Med, Former C, Nuclear Medicine, 1978 - 1986, DDEAMC, Ft Gordon (721-2867 - Medical College of Georgia)

** Mr. Jack A. Horner, (Resident Histologist and Assistant C, CI), 1978 - present

** LTC Charles T. Kelsey, III, MSC, current C, Health Physics, 791-6392

** Ms. Abby Kirkland, Acting PAO 1993 - present, assigned to PAO for eight years, 791-5301

* Dr. Joseph E. Kmiecik, (COL, MC Ret), Internal Medicine, Former C, Dept of Medicine, 1972 - 1976, USAH, Ft Gordon (860-2210 - Georgia Regional Medical Center)

** SFC Mark Light, present NCOIC, Health Physics, 791-6392

* Dr. Andree J. Lloyd, (PhD, MSC), Former Resident Psychologist and Assistant C, Clinical Investigation, 1977 - 791-5259, Beeper 630

** Ms Rosina Martinez, Former, Editorial Assistant, secretary, file clerk, typist, receptionist, stenographer, bibliographer, CI, 1977 - 1984, 556-3841

** Ms. Debbie McGugan, Contract Specialist, Post Contracting, Directorate of

Appendix 7-1

Contracting, (DOC), 791-2545

** Dr. James C. McPherson, (PhD), Biochemist, CI, 1977 - present, 791-4494

** Mr. Patrick S. O'Riley, HCA, Dept of Radiology, 791-6245

** LTC Stephen G. Oswald, MC, current C, Nuclear Medicine, 791-2745

Dr. Alton B. Payton, (COL MC, Ret), Former Commander USAH, Ft Gordon, 1971 - 1974. Left Augusta 1992. Present address 4746 E. Golf Course Drive, Blaine Washington 96230. No Contact

** Dr. Kent M. Plowman, (COL, MC), C, Clinical Investigation, 1980 - present 791-5384

* Dr. Jack K. Tippens, (COL, MC), Orthopedics 1971, Current Deputy Commander for Regional Integration, (791-6707), TDY

** Ms. Patricia D. Wallace, Director of Contracting, DOC, Ft. Gordon, Bldg 2050, 791-2249/2434

2. Chronology:

a. 16 Feb 94, 0930 - Received orders and background information.

b. 16 Feb 94, 1200 - Reported to MAJ Grabenstein (CIRO @ AMED Center and School.

(1) Change order coming (inclusive years 1944 through 1979)

(2) 1950 through 1960 key focus

(3) Task has no responsibility for region or Fort Gordon except as information is revealed concerning attached (and other) units.

c. 16 Feb 94, 1330 - Contacted/met with the Public Affairs Officer to apprise her of project. Spoke at length re: EAMC history and annual historical reports. Ms. Kirkland has been in PAO for eight years, and in present capacity for one year. Prior to her appointment Ms. Janice McCorkle was PAO for fifteen years, (27 total between USAH and DDEAMC Ft. Gordon). Ms. Kirkland is attempting to establish contact with Ms. McCorkle to determine the existence of records stored in other areas.

d. 16 Feb 94, 1540 - Contacted/met with C, Clinical Investigation and

Appendix 7-2

discussed CI activities since and before his tenure. Obtained the first and subsequent Annual Research and Progress Reports generated at this facility (77 through 80) detailing the first and subsequent projects back to 1975.

e. 17 Feb 94, 1000 - Contacted/met with Health Physics (SFC Light) re: Radioisotope/Radiation Safety Committee minutes back to inception in 1974. Obtained addition instructions via UNCLAS message DAWASH/DACS-ZA.

f. 17 Feb 94, 1300 - Discussed project with C, Nuclear Medicine.

g. 17 Feb 94, 1320 - Hand-carried tasking to PAO.

h. 18 Feb 94, 1000 - Talked with Debbie in Post Contracting re: records retention.

i. 18 Feb 94, 1030 - 1105 - Hand-carried taskings to key departments and services. Obtained signatures of personnel accepting tasking notifications.

j. 18 Feb 94, 1120 - Hand-carried tasking to the Director of Contracting. Conversed with Ms. Wallace at length re: project and potential contracts between USAH/DDEAMC, Ft Gordon and Medical College of Georgia, VA Medical Center and Savannah River Site. Installation contracts retained 6 years plus 4 years in storage (10 years); other contracts 6 years, and routine purchase orders, 2 years.

k. 22 Feb 94 - Discussed project with MAJ Kelsey.

l. 22 Feb 94 - Advertised via electronic mail and Distribution A (back-up to EMAIL)

m. 23 Feb 94 - Contacted/Interviewed/attempted contact with the following, all of whom were employed by the Clinical Investigation Service at or near its inception in 1975.

(1) Dr. Charles Hannon - No knowledge of protocols involving human radiation research.

(2) Mr. Jack Horner - No knowledge of protocols activated involving human radiation research.

(3) Dr. Andree Lloyd - On leave through 27 Feb.

(4) Ms. Rosina Martinez - No knowledge of such research.

(5) Dr. James McPherson - No knowledge of such research. Invitro

Appendix 7-B

and lower animal only.

n. Contacted MAJ Grabenstein re: interim report directed by DACS-ZA message. DA message not coordinated with CIRO, Ft Sam. No interim report required.

o. 25 Feb 94, 0945 - Established telephone contact with Dr. Thomas Hanson - No knowledge of such activity.

p. 25 Feb 94, 1000 - Telephone contact with Dr. Virgil Hardin - No knowledge of human research protocols involving radiation exposure.

q. 25 Feb 94, 1100 - Called Dr. Jack Tippens - TDY.

r. 25 Feb 94, 1115 - Met with PAO re: existing historical reports. No reports prior to 1950; sketchy reports 1950 - 1979. Ms. Kirkland established contact with Ms. McCorkle. Ms. McCorkle had no knowledge of historical reports existing before her tenure. Further research revealed letters written 4 May 1974 by CPT William B. Calderwood, Jr., MSC, assigned to PO & T and as Special Project Officer for USAH, Ft Gordon. CPT Calderwood researched medical facility activities from the inception of hospital @ Camp Gordon in 1942. The research was accomplished for preparation of the DDEAMC dedication pamphlets for April 1975. Correspondence to and from The Historical Unit (USAMEDS), Bldg 505, Ft Detrick, Frederick, MD 21701 - COL Roderick M. Engert, C, General Reference & Research Branch.. Letter from COL Engert indicated transmittal of historical reports for 42, 44, 45, 50, 51, 52, 53, and 54. Other years were either never received @ Ft Detrick or were missing.

s. 25 Feb 94, 1145 - Contacted C, PTM&S re: possibility of existence of the reports received by CPT Calderwood. Search unfruitful (12:35).

t. 25 Feb 94, 1215 - Called Dr. Joseph Kmiecik - Out of town - returning 1 March. (Grace Green, Nurse)

u. 25 Feb 94, 1315 - 1345 - Met with COL Kent Plowman and Mr. Jack Horner re: Annual Research Progress Reports (77 through 80). Reviewed/Discussed. No implementation of projects involving human radiation exposure. No knowledge or record of projects performed without formal approval of protocols through CIC/Human Use Committee. No record or knowledge of human protocols employing non-licensed radiation sources.

v. All tasking reports complete.

w. Render report.

Appendix 7-4

3. Project Officer (Institutional Knowledge). The undersigned was assigned to USAH, Ft Gordon (while in the military) in August 1973, and given responsibility for setting up a denovo licensed radiation program. He was charged with the duties of Nuclear Medicine New Facility Project Officer, AEC/NRC License Coordinator, and later the Alternate Radiation Protection Officer (75-76), and Radiation Protection Officer (78-79). Between the years 73 and 76 he wrote abstracts for the teletherapy license (NRC License 10-12044-02), the routine byproduct material license (NRC License 10-12044-03), and the Department of the Army Radioactive Materials Authorization (for cyclotron produced products). He also wrote Health Physics and other hospital regulations and service SOPs, and formed the original Radioisotope Committee (74) on which he served as a voting member and recorder until Oct 79. He set-up and operated a Radioimmunoassay Laboratory in the old facility (74), operating under a General License until March 1976. (From 1971 until Oct of 74 invitro testing was performed under the same General License in a Pathology Laboratory). He was responsible for the technical and administrative operation of Nuclear Medicine (76-79), and interfaced with the majority of other services and departments, including Clinical Investigation, Post Contracting and Resources Management. To the limits of my knowledge there were no investigative human research protocols activated within the target years that involved the intentional use of licensed or unlicensed ionizing radiation at this facility.

C. DAVID KRIVANEK
Human Radiation Research
Project Officer

Appendix 7-5

HSHF-PAO

MEMORANDUM FOR: Nuclear Medicine, ATTN: Mr. Krivanek

SUBJECT: Human Radiation Research

1. In reference to the tasking by your office involving human radiation research at this facility, this office submits no findings.

2. The historical reports held in this office (from 1950-1979) have been reviewed providing no information on this topic. Former Public Affairs Officer, Janice McCorkle was also contacted to ensure that all prior knowledge (before my tenure of eight years) was also requested, and if possible, researched. Again, no findings.

3. POC for this memorandum is the undersigned.

Abby Kirkland

ABBY KIRKLAND
Public Affairs

Appendix 8-1

ARM1.941221.004ib

HSNG-SC (1-2) 22 February 1994

MEMORANDUM FOR Commander, USADENTAC, FT Gordon, GA 30905

SUBJECT: Human Radiation Research

1. Reference: USAMDC&S, HSMC-GCI, 26 Jan 94, Subject: Human Radiation Research

2. Investigations by, and conversations with, Colonel Kent Plowman, Chief, Department of Clinical Investigations, EAMC and SFC Mark Light, NCOIC, Health Physics, indicate there have been no intentional uses of ionizing radiation in patient care research projects conducted by the Dental Activity at Fort Gordon. All exposures to ionizing radiation have been in conjunction with routine clinical practices, using established diagnostic and treatment methods only.

WAYNE M. LINGUITI
LTC, DE
DENTAC Radiation Protection Officer

HSNG 1st End LTC Rawls/jj/791-5738

Commander, United States Army Southeast Dental Service Support Activity (Provisional), Fort Gordon, GA 30905-5660 23 Feb 94

FOR Human Radiation Research Project Officer, Eisenhower Army Medical Center, Fort Gordon, GA 30905-5650

Approve submission of negative report.

JOHN R. AGAR
Colonel, Dental Corps
Commanding

Appendix 8-2

ARM1.941221.004ic

S: 24 Feb 94

HSHF-M-Dermatology (HSHF-R-NM/16 Feb 94) (340a) 1st End Aton/jah/5-4468
SUBJECT: Human Radiation Research

Dermatology Service, Department of Medicine, EAMC, Ft Gordon, GA 30905-5650

THRU C, Department of Medicine, EAMC

FOR Department of Radiology, ATTN: C. David Krivanek, Nuclear Medicine, EAMC

1. Grenz Ray Therapy was used by this clinic during the period 1974-1983. The purpose was to treat recalcitrant eczematous eruptions, including psoriasis. It was not used to treat neoplasms of the skin.

2. Records documenting this therapy are not available and it is not known if these records still exist.

3. POC is Dr. James Aton, 791-4468/4781.

MARK G. BLASKIS
Major, Medical Corps
Chief, Dermatology Service

Appendix 8-3

HSHF-HP(385-11j) 24 February 1994

MEMORANDUM FOR: Human Radiation Research Officer

SUBJECT: Human Radiation Research

1. Dwight David Eisenhower Medical Center began NRC Licensed activities with radioactive material on 13 May 1975 prior to this date all uses of radioactive material were in vitro (test tube) testing only a in vitro certificate was issued 21 December 1971.

2. During the period of 16-23 February 1994 the Health Physics Office conducted an review of all documents on file for Calender Years 1975-1979 pertaining to Human Radiation Research.

3. The review included Quarterly Radiation Safety Committee Meeting minutes and files involving radiation incidents, ALARA reviews, dosimetry data, AEC and NRC License applications, and AEC and NRC licensed activities.

4. There is no documented evidence that Human Radiation Experiments were performed from 13 May 1975 thru 31 December 1979. A chronology of licensed activities is provided as Enclosure.

Encl as

CHARLES T. KELSEY III
LTC, MS
C, Health Physics

Appendix 8-4-1

CHRONOLOGY OF NRC LICENSED ACTIVITIES AT DDEAMC

EFFECTIVE DATE	ACTIVITY
21 December 1971	IN VITRO CERTIFICATE ISSUED
24 January 1975	AEC License 10-12044-02 Issued 9000 Curies CO-60 Authorized Storage only
5 September 1975	Received 8009 Curies CO-60 Storage Only
24 May 1976 - Present	Issued NRC License 10-12044-03 Medical License of Broad Scope. Amendment #1-19
16 October 1979	Amendment #1 to 10-12044-02 Material will be stored under Supervision of Radiation Protection Officer
22 February 1980	Transfer of CO-60 Source to Advanced Medical Systems Cleveland, Ohio
24 April 1980	Amendment #2 to 10-12044-02 License Termination.
14 April 1992	Issued License 10-12044-04 Blood Irradiator for in vitro irradiation of blood, blood products, cells and tissues
30 August 1993	Amendment #1 10-12044-04 License Termination All license activities transferred to 10-12044-03 Amendment # 19

Appendix 8-4-2

HSHF-R-NM

18 February 1994

MEMORANDUM FOR: Project Officer, Human Radiation Research

SUBJECT: Human Radiation Research

1. The Nuclear Medicine Service at Dwight D. Eisenhower Army Medical Center commenced operations in June 1976. Prior to this time Nuclear Medicine procedures were not available.

2. A search was conducted for any record of isotope use that might have been used in radiation research on humans from commencement of operations through 31 December 1979. Personnel employed during those years were interviewed.

3. There is no information to suggest that any radioactive materials were administered to humans during this time period for any reason other than for routine diagnostic and therapeutic procedures.

Stephen G. Oswald
LTC, MC
C, Nuclear Medicine Service

Appendix 8-5

ARM1.941221.004if

HSHF-R

28 Feb
~~1 March~~ 1994

MEMORANDUM FOR Human Radiation Research, Project Officer, EAMC

SUBJECT: Human Radiation Research

1. A search of all available existing records fail to reveal any evidence of human radiation research.

2. A negative report is submitted.

Patrick D. Kelley HCA

THOMAS M. RALSTON
LTC, MC
Chief, Department of Radiology

Appendix 8-6

7. POC for this memorandum is the undersigned at 5/2745 in Nuclear Medicine. Inquiries for additional information are encouraged.

C. DAVID KRIVANEK
Human Radiation Research
Project Officer

DISTRIBUTION LIST:

C, Dermatology
C, Health Physics
C, Nuclear Medicine
C, Department of Radiology
C, Resources Management
Director of Contracting (DOC Ft Gordon)

HSHF-RMD-P&B (1st End) Linda Maddox/5-6165

RMD, EAMC (18 Feb 94)

TO: Human Radiation Research Project Officer, EAMC, ATTN: C. David Krivanek

1. Administrative records for the period 1944 through 1979 for discussion of research involving human exposure to ionising radiation are not available in this office. Therefore, a negative report is submitted.

2. POC for any further assistance is Carrie R. Proctor, Tel# 5-6165.

JAMES C. LARSON
COL, MS
Chief, Resource Mgmt Div

Appendix 8-7

ATZH-CT (HSHF-R-NM/16 Feb 94) 1st Ind WALLACE/kk/2249
SUBJECT: Human Radiation Research

DOC 23 Feb 94

MEMORANDUM FOR Human Radiation Research, Nuclear Medicine

A negative response is provided. DOC has no records on hand for the period 1944 through 1979. Contract registers are only retained for six years following the fiscal year of award. Formal contract files are also destroyed by the records holding area six years after contract close-out.

PATRICIA D. WALLACE
Director of Contracting

Appendix 8-8

D

DEPARTMENT OF THE ARMY
FITZSIMONS army MEDICAL CENTER
AURORA, COLORADO 80045-5001

REPLY TO
ATTENTION OF

HSHG-CI

ARM1.941221.005a

1 March 1994

MEMORANDUM THRU Chief, Department of Clinical Investigation, Fitzsimons Army Medical Center 2/25/94

FOR Chief, Clinical Investigation Regulatory Office, ATTN: HSMC-GCI, 1608 Stanley Road, AMEDD Center & School, Fort Sam Houston, TX 78234-6125

SUBJECT: Human Radiation Research Report

1. This report is considered to be an interim report due to the fact that all the information requested regarding the subject is not yet available. However, additional information will be forthcoming and will be submitted to the Clinical Investigation Regulatory Office in an addendum to this report.

2. At this time the information listed below has been obtained and is submitted as directed in the memo dated 26 January 1994 from your office. The information was obtained from the following sources:

(a) All Clinical Investigation Service annual progress reports from 1965 (the first report issued) until 1975. (See attached statement from the medical librarian regarding the 1969 annual progress report.)

(b) All available progress reports from the Army Medical Research and Nutrition Laboratory (AMRNL) from the late 1940's until 1974. (Those reports not available in the FAMC medical library were requested from the Defense Technical Information Center.)

(c) All available journal publications and abstracts cited in the above progress reports relating to human radiation research.

The following list of research protocols/projects is divided into two categories: Category 1 - those protocols/projects in which commonly accepted diagnostic or therapeutic procedures were used or tested as part of the research; this category corresponds to those protocols involving the use of radiopharmaceuticals or radiation therapy deemed safe and effective (and thus should be

considered as marked with the symbols "SE" or "RT"). Category 2 - those protocols/projects in which radioisotopes or radiopharmaceuticals were used to answer specific research questions and would not have been considered as "commonly accepted" procedures or standard of practice. However, even in research protocols or projects placed in category 2 (based on the criterion stated above), as well as in category 1 protocols, the amounts of radioisotopes administered to the research subjects were well below acceptable (approved) therapeutic doses. This determination was made by LTC Mike McBiles, MC, Chief, Nuclear Medicine Service, FAMC, as indicated in his statement attached to this report.

CATEGORY 1

(1) a. The value of rose bengal ^{131}I in evaluating jaundiced patients
b. 1967-1968
c. US Army Medical Research & Nutrition Laboratory (USAMRNL)
d. Robert Pastore, MAJ, MC, David Preston, MAJ, MC
e. USAMRDC
f. Unknown number of subjects
g. Unknown quantity of ^{131}I administered

(2) a. Scintigraphic evaluation of thyroid disorders - clinical evaluation of oral ^{123}I-sodium iodide
b. 1973
c. Thomas A. Verdon, Jr., LTC, MC
d. Fitzsimons Army Medical Center
e. USAMRDC
f. 36 subject
g. 100 to 400 microcuries (μc) of ^{123}I-sodium iodide administered

(3) a. Ultrasound in placental localization
b. 1967-1968
c. Keith Deubler, LTC, MC, D. Preston, MAJ, MC
d. Fitzsimons General Hospital
e. USAMRDC
f. 25 subjects
g. "Standard radioisotope" was administered (unspecified)

(4) a. Effects of selective coronary arteriography on myocardial blood flow in man
b. 1968
c. Richard P. Carson, CPT, MC, Charles Peterson, CPT, MC, Robert C. Jones, COL, MC
d. Fitzsimons General Hospital

e. USAMRDC
f. 6 subjects
g. 0.5 millicuries (mc) of ^{133}Xenon was administered

(5) a. Evaluation of technical factors of the brain scan and their relationship to diagnostic accuracy
b. Joseph L. Marcarelli, LTC, MC
c. 1967
d. Fitzsimons General Hospital
e. USAMRDC
f. 300 subjects
g. Isotope type and quantity unknown

(6) a. An evaluation of renal function utilizing radioiodine labeled diodrast
b. Richard R. Taylor, LTC, MC, Irvin C. Plough, LTC, MC
c. 1959
d. USAMRNL
e. USAMRDC
f. 55 subjects
g. 10-20 μc of Diodrast-^{131}I was administered

(7) a. Renal function and ^{131}I clearance in hyperthyroidism and myxedema
b. Charles J. Hlad, Jr., MS, Neal S. Bricker, 1st LT, MC
c. 1954
d. Fitzsimons Army Hospital
e. USAMRDC
f. 11 subjects
g. ^{131}I did not exceed 125 μc in any experiment

(8) a. Observations on the mechanism of the renal clearance of ^{131}I
b. Neal S. Bricker, Charles J. Hlad, Jr.
c. 1954
d. Fitzsimons Army Hospital
e. USAMRDC
f. 47 subjects
g. ^{131}I was administered, quantity unspecified

(9) a. Regional ventilation perfusion relationships of the lung, it's measurement of ^{133}Xenon and a linear scanner
b. David Preston, MAJ, MC, Paul J. Leach, CPT, MS, Edward Mays, MAJ, MC, Joseph Hawkins, LTC, MC

c. 1967
d. USMRNL
e. USMRDC
f. 10 subjects
g. ^{133}Xenon in "appropriate doses" was administered

(10) a. Detection of pulmonary emboli using ^{133}Xenon and macroaggregated human serum albumin (MAAG) ^{131}I
b. David F. Preston, MAJ, MC, Maurice E. Gilbert, SSGT
c. 1967
d. USMRNL
e. USMRDC
f. 13 subjects
g. ^{133}Xenon inhalation and, macroaggregated human serum albumin tagged with ^{131}I (MAAG) was administered, quantity unspecified

(11) a. Evaluation of technical factors of the brain scan and their relationship to diagnostic accuracy
b. David F. Preston, MAJ, MC, Robert H. Caplan, CPT, MC
c. 1967
d. USMRNL
e. USMRDC
f. 20 subjects
g. Isotope dose and type unknown

(12) a. Radioisotopes in pulmonary physiology and pathology
b. Murray Spotnitz, MAJ, MC, Joseph A. Hawkins, LTC, MC
c. 1962-1965
d. USMRNL
e. USMRDC
f. 14 subjects
g. ^{133}Xenon and MAAG ^{131}I was administered, quantity unspecified

(13) a. Radioisotopes in pulmonary physiology and pathology
b. Murray Spotnitz, LTC, MC, Joseph A. Hawkins, LTC, MC
c. 1965-1966
d. USMRNL

e. USMRDC
f. 36 subjects
g. ^{133}Xenon and MAAG ^{131}I was administered, quantity unspecified

(14) a. Scintigraphic evaluation of thyroid disorders - clinical evaluation of oral ^{123}I sodium iodide
b. Nasser Ghaed, LTC, MC
c. 1973
d. FAMC
e. HSC
f. Number of subjects unknown
g. 100 to 400 μc of ^{123}I-sodium iodide was to have been used. Did not use, due to technical problems. Study was to be resumed in the future

(15) a. Bone marrow scintigraphy and scintigraphic localization of soft tissue tumors by use of ^{111}Indium chloride
b. Nasser Ghaed, LTC, MC
c. 1974
d. FAMC
e. HSC
f. Number of subjects unknown
g. 2 mc of ^{111}Indium chloride was to be administered when subjects became available

(16) a. Use of ^{67}gallium citrate in evaluation of patients with known or suspected tumors and pyogenic abscesses
b. Nasser Ghaed, LTC, MC
c. 1974
d. FAMC
e. HSC
f. 39 subjects
g. ^{67}Gallium Citrate was administered, quantity unspecified

(17) a. The use of ^{111}indium DTPA for the study of cerebrospinal fluid pathways
b. Nasser Ghaed, LTC, MC
c. 1974-1975
d. FAMC
e. HSC
f. 7 subjects
g. ^{111}Indium DTPA was administered, quantity unspecified

(18) a. Bone marrow scintigraphy and scintigraphic localization of soft tissue tumors by use of ^{111}indium chloride
b. Nasser Ghaed, LTC, MC
c. 1974
d. FAMC
e. HSC
f. Number of subjects unknown
g. 2 mc of ^{111}Indium Chloride was to be administered

(19) a. Use of ^{67}gallium citrate in evaluation of patients with known or suspected tumors and pyogenic abscesses
b. Nasser Ghaed, LTC, MC
c. 1974
d. FAMC
e. HSC
f. 6 subjects
g. ^{67}Gallium Citrate was administered, quantity unspecified

(20) a. Sequential lung scanning of tuberculosis patients under treatment
b. E.T. Morita
c. 1971 - 1972
d. USMRNL
e. USMRDC
f. Number of subjects unknown
g. MAAG ^{131}I and ^{133}Xenon was administered, quantity unspecified

(21) a. The diagnosis of functioning metastasis from thyroid carcinoma with ^{131}I and scintillation camera
b. E.T. Morita
c. 1971-1972
d. USMRNL
E. USMRDC
f. Number of subjects unknown
g. 1000 μc of ^{131}I was administered

(22) a. Placental imaging with ^{99m}technetium pertechnetate
b. E.T. Morita
c. 1971-1972
d. USMRNL

e. USMRDC
f. Number of subjects unknown
g. Tc ^{99m}pertechnetate was administered, quantity unspecified

(23) a. Sequential lung scanning of tuberculosis patients under treatment
b. E.T. Morita
c. 1971-1972
d. USMRNL
e. USMRDC
f. Number of subjects unknown
g. MAAG ^{131}I and ^{133}Xenon was administered, quantity unspecified

(24) a. Placental imaging with ^{99m}technetium pertechnetate
b. E.T. Morita
c. 1971-1972
d. USMRNL
e. USMRDC
f. 8 placentograms were done
g. Tc ^{99m}pertechnetate was administered, quantity unspecified

(25) a. Joint imaging with ^{99m}technetium pertechnetate
b. E.T. Morita
c. 1971-1972
d. USMRNL
e. USMRDC
f. 1 subject
g. Tc 99m, 3 mc dose was administered

(26) a. Ultrasound in placental localization
b. K. Deubler
c. 1969-1970
d. USMRNL
e. USMRDC
f. 12 subjects
g. "Standard radioisotope" scan was used (unspecified)

(27) a. Quantitative lung scanning in pulmonary tuberculosis, tuberculous pleural effusion and lung surgery for tuberculosis
b. D.R. Hazlett
c. 1969-1970
d. USMRNL

e. USMRDC
f. 33 subjects
g. ^{133}Xenon in "appropriate" doses was administered, (dose unspecified)

(28) a. The value of rose bengal ^{131}I in evaluating jaundiced patients
b. Robert Pastore, CPT, MC, David Preston, MAJ, MC
c. 1967
D. USMRNL
e. USMRDC
f. 6 subjects
g. ^{131}I Rose Bengal was administered, quantity unspecified

(29) a. Regional ventilation perfusion relationships of the lung, it's measurement of ^{133}Xenon and linear scanner
b. David Preston, MAJ, MC, Paul J. Leach, CPT, MSC, Edward Mays, MAJ, MC, Joseph Hawkins, LTC, MC
c. 1967
d. USMRNL
e. USMRDC
f. 10 subjects
g. "Appropriate" size dose of ^{133}Xenon was administered

(30) a. Detection of pulmonary emboli using ^{133}Xenon and macroaggregated human serum albumin ^{131}I
b. David F. Preston, MAJ, MC, Maurice E. Gilbert, SSGT
c. 1967
d. USMRNL
e. USMRDC
f. 13 subjects
g. Macroaggregated human serum albumin tagged with ^{131}I (MAAG) was administered, quantity unspecified

(31) a. Evaluation of technical factors of the brain scan and their relationship to diagnostic accuracy
b. Norman Hellman, CPT, MC, Charles A. Sutton, MAJ, MC
c. 1967-1968
d. USMRNL
e. USMRDC
f. 20 subjects
g. Type and quantity of isotope unspecified

(32) a. Effects of selective coronary arteriography on myocardial blood flow in man
b. Richard P. Carson, CPT, MC, Charles Peterson, CPT, MC, Robert C. Jones, COL, MC
c. 1968
d. USMRNL
e. USMRDC
f. 6 subjects
g. ^{133}Xenon, 50-100 μc per dose, total amount administered to each subject being less than 500 μc

CATEGORY 2

(1) a. Blood volume parameters at 5200 feet altitude
b. Dec 65 - June 67
c. Fitzsimons General Hospital
d. CPT Jerry Ballard, MC; MAJ David Preston, MC
e. USAMRDC
f. 31 subjects
g. ^{51}Cr labeled RBC and ^{125}I labeled serum albumin administered, quantity unknown

(2) a. Studies in phosphorus metabolism in man III. The distribution, exchange and excretion of phosphorus in man in vivo using radioactive phosphorus (^{32}P) as a tracer
b. 1952
c. Army Medical Nutrition Lab, Chicago, IL
d. Stanley M. Levenson, MD, Margaret A. Adams, A.B., Hyman Rosen, 2nd LT, MSC, F.H. Lasky Taylor, Ph.D.
e. Medical R&D Project
f. At least 6 subjects
g. 100-200 μc of ^{32}P administered (as inorganic phosphate)

(3) a. Metabolism of ascorbic-1-^{14}C acid in experimental human scurvy
b. 1967 -1971
c. US Army Medical Research and Nutrition Lab, (USAMRNL) Fitzsimons General Hospital
d. Eugene M. Baker, Ph.D., Robert E. Hodges, MD, James Hood, MD, Howerde E. Sauberlich, Ph.D. Steven C. March, BA.
e. USAMRDC, OTSG
f. At least 6 subjects
g. Up to 200 μc of ^{14}C and ^{3}H was administered

(4) a. Metabolism of ^{14}C thiazole labeled thiamine in man
b. 1965
c. USAMRNL
d. E.M. Baker, M. Balaghi, R.S. Pardini, H.E. Sauberlich.
e. USAMRDC
f. 1 subject
g. 46.9 μc of ^{14}C was administered

(5) a. Respiratory catabolism in man of the degradative intermediates of L-ascorbic-1-^{14}C acid
b. 1963
c. USAMRNL
d. Eugene M. Baker, Nicholas G. Levandoski. Howerde E. Sauberlich.
e. USAMRDC
f. 3 subjects
g. 20 μc of ^{14}C was administered

(6) a. Tracer studies of vitamin C utilization in men: Metabolism of D-glucuronolactone-6-^{14}C D-glucuronic-6-^{14}C acid and L-ascorbic-1-^{14}C acid
b. 1962
c. USAMRNL
d. E.M. Baker, H.E. Sauberlich, S.J. Wolfskill, W.T. Wallace, E.E. Dean.
e. USAMRDC
f. At least 5 subjects
g. 20 μc of ^{14}C was administered

(7) a. Clinical manifestations of experimental scurvy
b. James Hood, Robert E. Hodges, John E. Canham, Steven C. March, Raymond I. Davenport and Eugene M. Baker
c. 1970
d. USAMRNL
e. USAMRDC
f. 9 subjects
g. L-ascorbic-1-^{14}C was administered, quantity unknown

HSHG-CI
SUBJECT: Human Radiation Research Report

(8) a. Excretion and body load of ascorbic-1-^{14}C acid in clinical human scurvy
b. S.C. March, R.E. Hodges, J. Hood, H.E. Sauberlich, E.M. Baker
c. 1970
d. USAMRNL
e. USAMRDC
f. 5 subjects
g. Ascorbic-1-^{14}c acid was administered, quantity unknown

(9) a. The metabolism of ^{14}C-labeled mono-dehydroascorbic acid complex in man
b. J.C. Saari, E.M. Baker, H.E. Sauberlich
c. 1965
d. USAMRNL
e. USAMRDC
f. 2 subjects
g. 24.7 μc of ^{14}C was administered

(10) a. Metabolism of ^{14}C-6 D-glucuronolactone and ^{14}C-6-D-glucuronic acid in man
b. E.M. Baker, H.E. Sauberlich, S.J. Wolfskill
c. 1961
d. USAMRNL
e. USAMRDC
f. Number of subjects unknown
g. 20 μc each of the labeled carbohydrates

3. Attached to this report are statements from LTC McBiles regarding the categorization of the protocols, Ms. Helen Littlejohn, Public Affairs Officer, Historian, FAMC, Ms. Sue Caldron, Medical Librarian, Ms. Bernice Kohut, Tumor Registry, Medical Record Supervisor, and COL Verdon, MC, concerning his experience here and at Letterman in regard to conducting research during the 1960s and 1970s. Also attached are copies of category 2 papers/protocol summaries. More information concerning the purpose and description of the studies than is evident from the titles listed above can be obtained from these papers. However, in most cases there is little or no information regarding medical or research follow-up of the study participants.

Michael Lieberman

MICHAEL LIEBERMAN
LTC, MS
Department of Clinical Investigation

HSHG-RAN (40) 28 Feb 94

MEMORANDUM FOR Department of Clinical Investigation, ATTN: LTC Lieberman

SUBJECT: Protocol Review

1. At your request I have reviewed the following protocols involving the administration of radioactive materials to volunteers. All studies involved radiopharmaceuticals licensed by the FDA or Atomic Energy Commission at the time of the study or subsequently licensed as safe and effective (SE). Those with work unit numbers were performed at Fitzsimons Army Medical Center.

Evaluation	Work Unit Number	Title
SE	73/600	Scintigraphic Evaluation of Thyroid Disorders - Clinical Evaluation of Oral 123I Sodium Iodide
SE	74/601	Use of Gallium 67 Citrate in Evaluation of Patients with Known or Suspected Tumors and Pyogenic Abscesses
SE	74/602	The Use of Indium 111 DTPA for the Study of Cerebrospinal Fluid Pathways
SE	74/600	Bone Marrow Scintigraphy and Scintigraphic Localization of Soft Tissue Tumors by Use of Indium-111 Chloride (No patients enrolled)
SE	68/619	Quantitative Lung Scanning in Pulmonary Tuberculosis, Tuberculous Pleural Effusions and Lung Surgery for Tuberculosis
SE	67/547	Ultrasound in Placental Localization
SE	67/600	Regional Ventilation Perfusion Relationships of the Lung, Its Measurement of Xenon 133 on a Linear Scanner

HSHG-RAN
SUBJECT: Protocol Review

SE	70/520	Joint Imaging with Technetium-99m Pertechnetate
SE	70/522	Placental Imaging with Technetium 99m Pertechnetate
SE	70/541	Sequential Lung Scanning of Tuberculosis Patients under Treatment
SE	70/521	Radioactive Iodine-131 Serum Albumin Lumbar-Cisternography and Ventriculography
SE	70/523	Diagnosis of Functioning Metastasis for Thyroid Carcinoma with I-131 and Scintillation Camera
SE	62/136	Radioisotopes in Pulmonary Physiology and Pathology
SE	Report No 99 15 Jul 52 Army Medical Nutrition Laboratory Chicago, IL	Studies in Phosphorus Metabolism in Man III. The Distribution, Exchange and Excretion of Phosphorus in Man In vivo using Radioactive Phosphorus (P32) as a Tracer. Note: P32 has been approved for therapeutic use. The dose used in this study for diagnosis is 25-50 times less than the therapeutic dose. Radiation risk is equal to approximately 4 chest CT scans.
SE	Published Report 1955 US Army Medical Research and Nutrition Laboratory	Observations on the Mechanism of the Renal Clearance of I131
SE	Published Report 1954	Renal Function and I131 Clearance in Hyperthyroidism and Myxedema

Note: The above 2 studies use approximately the same dose as was customary during the 1960's for thyroid scanning. Radiation risk is approximately equal to 6 chest CT's.

HSHG-RAN
SUBJECT: Protocol Review

2. The following protocols were referred for review but do not involve the administration of radioactive materials to patients. However, they involved standard radiologic technique and also should be considered safe and effective (SE).

Evaluation	Work Unit Number	Title
SE	69/140	A Roentgenographic Technique for Measuring Lung Volume
SE	71/300	The Role of Red Cell Volume Regulation in Blood-Bank Aging (did not involve injection of radioactive materials in patients)
SE	74/105	Radiologic Identification of Common Cardiac Prosthetic Valves and Their Associated Complications

3. Tracer kinetics studies. As per Memorandum, Subject: Minimum Procedures for Identifying Human Experiments Involving Exposure to Ionizing Radiation 1944 to 1974 dated 26 Jan 1944, HSMC-DCI, these studies will be addressed in Appendices A through C.

4. The POC is LTC McBiles, ext 8646.

Encls

MIKE MC BILES
LTC, MC
Chief, Nuclear Medicine Service

APPENDIX A

SUBJECT: Detailed Information on Studies Involving Human Exposure to Ionizing Radiation

SOURCE: American Journal of Clinical Nutrition 24:April 1971, pp 444-454

1. Project Title: Metabolism of ^{14}C and ^{3}H Labeled L-Ascorbic Acid in Human Scurvy

2.

a. Period: Unknown, pre 1971.

b. Location: Chemistry Division, US Army Medical Research and Nutrition Laboratory, Fitzsimons General Hospital, Denver, CO and Metabolism-Nutrition Section of the Department of Internal Medicine, University Hospital, University of Iowa, Iowa City, IA.

3. Baker EM, Ph.D.; Assistant Chief, Chemistry Division, US Army Medical Research and Nutrition Laboratory.

Hodges RE, M.D.; Professor, Department of Internal Medicine, University of Iowa.

Hood, James, MD; Instructor, Department of Internal Medicine, University of Iowa.

Sauberlich HE, Ph.D.; Chief, Chemistry Division, US Army Medical Research and Nutrition Laboratory.

March SC; Chemist, Chemistry Division, US Army Medical Research and Nutrition Laboratory.

Canhan JE, M.D.; Commanding Officer and Director, US Army Medical Research and Nutrition Laboratory.

4. Sponsor: US Army Medical Research and Development Command, Grant DADA 17-67-C-7111.

5. Number of Subjects: 6 healthy male prison volunteers, 5 completed.

6.

a. Purpose:

(1) Induce deficiency of ascorbic acid in healthy men.

(2) Study ascorbic acid pool size, rate of depletion, minimal requirements for ascorbic acid by labeling it with 14C and 3H.

(3) Observe relationship between body pool size, clinical scurvy and physiologic functions.

b. Description: See attached table from article. Total H3-ascorbic acid, maximum 184.8 uCi; 14C ascorbic acid, maximum 300 uCi.

7. Effects: All volunteers developed clinical scurvy as intended result prior to repletion with ascorbic acid. Effects of the H3 and C14 - ascorbic acid are unknown.

8. Follow-up: Not reported.

9.

a. Scientific/peer review: Unknown.

b. Informed consent: Unknown.

10. Comment: Tracer dilution study - no measurable radiation effect of 3H or 14C expected. This is based on an assumption that the radiopharmaceuticals are distributed throughout the total body water similar to $3H_2O$ for which the dosimetry is known. This gives an effective dose equivalent ranging from .1 to 1 mSv per radiopharmaceutical. The effective dose equivalent of a chest CT is 3-4 mSv.

TABLE 1
Intake of labeled and unlabeled ascorbic acid by each subject during depletion and repletion phases of the study

Subject	Depletion period			Repletion period	
	Phase I	Phase II	Phase III	Phase IV	Phase V
H	*Days 0–13*, ascorbic acid intake was 75 mg/day; total ^{14}C activity = 40.1 μCi (0.0013 mg)	*Days 14–47*, 0 mg/day ascorbate intake; total ^{14}C activity = 120.9 μCi containing 0.0042 mg ascorbic acid	*Days 48–104*, 0 mg/day ascorbate intake	*Days 105–227*, received 6.5 mg/day ascorbic acid; 1.0 μCi ^{14}C-labeled ascorbic acid/day	*Days 228–258*, received 600 mg/day of ascorbic acid; 1 μCi of ^{14}C-labeled ascorbic acid/day (*days 227 to 250*)
M	*Days 0–13*, ascorbic acid intake was 75 mg/day, total ^{14}C activity = 40.1 μCi (0.0013 mg)	*Days 14–47*, 0 mg/day ascorbate intake; total ^{14}C activity = 120.9 μCi containing 0.0042 mg ascorbic acid	*Days 48–97*, 0 mg/day ascorbate intake	*Days 98–227*, received 130.5 mg/day ascorbic acid; 1.0 μCi ^{14}C-labeled ascorbic acid/day	*Days 228–258*, received 350 mg/day ascorbic acid; 1 μCi of ^{14}C-labeled ascorbic acid/day (*days 227 to 250*)
P	*Days 0–13*, ascorbic acid intake was 75 mg/day; total ^{14}C activity = 40.1 μCi (0.0013 mg)	*Days 14–47*, 0 mg/day ascorbate intake; total ^{14}C activity = 120.9 μCi (0.0042 mg); total ^{131}I = 184.8 μCi (18.48 mg)	*Days 48–104*, 0 mg/day ascorbate intake	*Days 105–227*, received 6.5 mg/day ascorbic acid; 1.0 μCi ^{14}C-labeled ascorbic acid/day	*Days 228–258*, received 600 mg/day ascorbic acid; 1 μCi of ^{14}C-labeled ascorbic acid/day (*days 227 to 250*)
R	*Days 0–13*, ascorbic acid intake was 75 mg/day; total ^{14}C activity = 9.95 μCi (0.0003 mg)	*Days 14–47*, 0 mg/day ascorbate intake; total ^{14}C activity = 120.9 μCi containing 0.0042 ascorbic acid	*Days 48–110*, 0 mg/day ascorbate intake	*Days 111–227*, received 66.5 mg/day ascorbic acid; 1.0 μCi ^{14}C labeled ascorbic acid/day	*Days 228–258*, received 350 mg/day ascorbic acid; 1 μCi of ^{14}C-labeled ascorbic acid/day (days 227 to 250)
S	*Days 0–13*, ascorbic acid intake was 75 mg/day; total ^{14}C activity = 40.1 μCi (0.0013 mg)	*Days 14–47*, 0 mg/day ascorbate intake; total ^{14}C activity = 120.9 μCi (0.0042 mg); total ^{131}I 184.8 μCi (18.48 mg)	*Days 48–97*, 0 mg/day ascorbate intake *Days 98–110*, 2.5 mg/day ascorbate intake	*Days 111–227*, received 66.5 mg/day ascorbic acid; 1.0 μCi ^{14}C-labeled ascorbic acid/day	*Days 228–258*, received 600 mg/day ascorbic acid; 1 μCi of ^{14}C-labeled ascorbic acid/day (*days 227 to 250*)

Table 1, *subject S*). Thus, the total ascorbic acid intake of the men during the repletion phase ranged from 6.5 to 130.5 mg. Details of the ascorbic acid and radioactivity intake received by each subject are shown in Table 1.

Supplementation with the ascorbic-1-^{14}C acid at the level of intake of 1 μCi/day, plus the assigned dietary intake for each subject, was continued to the 227th day of the study. At that time, to insure saturation of body stores, resupplementation of all subjects was increased to either 350 or to 600 mg daily of unlabeled ascorbic acid for an additional 31 days. All subjects were on an ad libitum diet during this phase (*Phase V*). The labeled ascorbate, when administered, was given at 10:00 PM each night throughout the study.

The L-ascorbic-1-^{14}C acid employed in this experiment was obtained from New England Nuclear

APPENDIX B

SUBJECT: Detailed Information on Studies Involving Human Exposure to Ionizing Radiation

SOURCE: P.S.E.B.M 1962, Vol 109, pp 737-741.

1. Project Title: Tracer Studies of Vitamin C Utilization in Men: Metabolism of D-Glucuronolactone-6-C14, D Glucaronic 6-C14 Acid, and L Ascorbic-1-C14 Acid.

2.

a. Period: Unknown, pre 1962.

b. Location: US Army Medical Research and Nutrition Laboratory, Fitzsimons General Hospital, Denver, CO.

3. Baker EM, Sauberlich HE, Wolfskill SJ, Wallace WT, Dean, FE.

4. Sponsor: Unknown.

5. Number of subjects: 5 normal men.

6.

a. Purpose: To test whether D-Glucuronolactone is converted to L-ascorbic acid.

b. Description: 20 uCi of above 3 tracers given to men and expelled air and urine were serially collected and quantitation of the 3 tracers performed.

7. Effects: None recorded.

8. Follow-up: Not reported.

9.

a. Scientific/peer review: Unknown.

b. Informed consent: Unknown.

10. Comment: Tracer and dilution study. The effects of the C14 tracer is not expected to cause adverse radiation effects. This is based on the assumption that the radiopharmaceuticals are distributed throughout the total body water similar to $3H_2O$, for which the dosimetry is known. This gives an effective dose equivalent less than 1 mSv. The effective dose equivalent of a chest CT is 3-4 mSv.

APPENDIX C

SUBJECT: Detailed Information on Studies Involving Human Exposure to Ionizing Radiation

SOURCE: Report No 231, USAMRNL, Subproject No. 7, Project No 6-60-13-013

1. Title: Evaluation of Renal Function Utilizing Radioiodine Labeled Diodrast.

2.

a. Period: Unknown.

b. Location: US Army Medical Research and Nutrition Laboratory, Fitzsimons Army Medical Center, Aurora, CO.

3. Maier John G, CPT, MC

4. Sponsor: See 2a.

5. Subjects: 55 patients with renal disease.

6. Purpose: To determine the usefulness of I131-Diodrast in evaluating patients with renal disease by using scintillation counters to detect renal activity after injection. Patients were given 10-20 uCi of 131I-Diodrast IV.

7. Effects: Unknown. At 10-20 uCi of a glomerularly filtered agent (Diodrast), the radiation risk falls well below the estimated risk of currently approved FDA radiopharmaceutical 131I-Hippuran.

8. Follow-up: Unknown.

9.

a. Peer/scientific review: Unknown

b. Informed consent: Unknown.

10. Comment: Radiation risk and possible effects of Diodrast fall within those expected from currently approved renal radiopharmaceuticals.

ARM1.941221.005c

HSHG-PA (360-5) 25 February 1994

MEMORANDUM FOR Department of Clinical Investigation; ATTN: LTC Lieberman

SUBJECT: Public Affairs Participation in Radiation Testing Inquiries

1. I first became aware of the local impact of the issue of radiation testing in early January, when this office received a fax request from WLEX-TV in Lexington, Ky. The inquiry was about a former patient who had a physical at Fitzsimons in 1960.

2. Since that time we have had a few other media inquiries and two congressional inquiries. IAW Department of the Army guidance, the inquiries were forwarded to DA. most inquiries are sent to the installation through the Freedom of Information Act Officer. I've informed the FOIA office of all inquiries as well as LTC Michael Lieberman, the FAMC project officer for radiation testing. I've drafted letters in response to the congressional inquiries which were sent through command channels. A cursory look through old post newspapers and historical files did not turn up any substantial information on radiation testing.

3. I've spoken with our Tumor Registry Board about possible information they might have, and referred LTC Lieberman to them. We've distributed one Command Bulletin about radiation testing to inform residents and employees of the post about the issue and proper procedures to address it. I've referred LTC Lieberman to a former Fitzsimons physician who was assigned here during the 60s and now serves as a consultant. I plan to continue searching through historical documents and post newspapers as time permits.

4. POC for this memo is the undersigned, ext. 3192/3952.

Helen Littlejohn

HELEN LITTLEJOHN
GS-12, DAC
Public Affairs Officer

ARM1.941221.005d

HSHG-ZBM February 16, 1994

MEMORANDUM FOR: Clinical Investigations, LTC Lieberman

SUBJECT: Fitzsimons Research

1. At your request, we ordered from the Defense Technical Information Center issues 1 - 6 of the Annual Research Progress Report from Clinical Investigations, Fitzsimons General Hospital. Issue No. 5 is a controlled document; we requested and received assistance from the Combined Medical Library of the Office of the Surgeon General in getting that report released. It has not arrived as of this date.

2. We conducted a search for all publications from Fitzsimons (General Hospital, Army Medical Center, etc) on the Defense Technical Information Center's Technical Report Database CD-ROM for 1970-1993.

3. We requested from the Defense Technical Information Center a complete search of their on-line Technical Report Database for all publications from Fitzsimons. This search will include publications prior to 1970. It should arrive this week, and we may discover additional publications to order.

4. We suggested that you examine the Reports to the Surgeon General's Office from the Medical Nutrition Laboratory (housed at Fitzsimons), which cover the years 1951 to 1974, the publications of the Annual Symposia on Pulmonary Diseases for the years 1952-1982 and Research and Development Service reports for the years 1951-1958.

5. POC for this action is Mrs. Sue Coldren, x3407.

Ellen Sue Coldren

ALFREDA H. HANNA
Administrative Librarian
Medical Tech Library

HSHG-SGR (40-15b) 23 February 1994

MEMORANDUM FOR Michael Lieberman, LTC, Immunology Svc, Dept. of Clinical Investigations

SUBJECT: Review of Tumor Registry records for evidence of exposure to experimental radiation.

1. The Tumor Registry records of 200 patients were reviewed. There were no instances of experimental exposure recorded.

2. The following radiation exposure histories were found:

1 Patient-Exposure to radioactive fall out in Nagasaki while on active duty in the Navy. Patient now deceased due to metastatic malignant melanoma.

1 Patient-Indicated she had an unorthodox radiation treatment for a lung nodule when she was a child. Patient now deceased due to metastatic lung cancer.

4 Patients-Present during atomic weapons testing. 1 now deceased due recurrent stomach cancer. 2 alive with prostate cancer and 1 alive with colon cancer.

14 Patients-Received radiation treatment for acne in the 40's and early 50's. Consultation with Radiation Therapy revealed that it was accepted standard of care at that time.

3. POC is Bernice Kohut, Ext. 8753.

Bernice Kohut

Bernice Kohut, RN, CTR
Supervisory Medical Record Technician
Tumor Registry

HSHG-CI 25 February 1994

MEMORANDUM FOR LTC Lieberman, Dept of Clinical Investigation
FAMC

SUBJECT: Human Radiation Research Projects

1. From 1965 through 1973, while stationed at Letterman Army Medical Center and Fitzsimons General Hospital, my observations on this subject are:

2. All research projects/protocols were cleared through and approved by the department chiefs. Nuclear Medicine also went through the radioisotope committee. Informed consent was obtained from everyone. The only consent form used at this time was the standard Operation and Anesthesia form, and physicians filled in the blanks on whatever procedure they did.

3. In 1973 Fitzsimons started the clinical investigation service where at that time all research projects went to them for review and approval.

THOMAS A. VERDON, JR.
COL, MC

DEPARTMENT OF THE ARMY
U.S. ARMY MEDICAL DEPARTMENT CENTER AND SCHOOL
FORT SAM HOUSTON, TEXAS 78234-6100

COPY

REPLY TO ATTENTION OF

ARM1.941221.001
(vol. 2)

HSMC-GCI (40-38a)

15 March 1994

MEMORANDUM THRU BG John J. Cuddy, Deputy Commander for Healthcare Operations, U.S. Army Medical Command (Provisional), Fort Sam Houston, Texas 78234-6000

FOR Office of the Assistant Secretary of the Army for Manpower & Reserve Affairs, ATTN: SAMR-HP (COL David E. Suttle, GS), 111 Army Pentagon, Washington, DC 20310-0111

SUBJECT: Records of Human Radiation Research

1. Revisions to an earlier report requested by the Assistant to the Secretary of Defense are enclosed: Part I and Part II of the request for records involving experiments with human exposure to ionizing radiation within U.S. Health Services Command (HSC) (Enclosures 1 and 2).

2. Part I is the list of facilities queried. The current version of Part II reports answers obtained to date. Part II is not complete, due to the complexity of thoroughly and responsibly searching for records at 60 sites. We will provide you periodic updates of Part II until it completely reflects each medical treatment facility of HSC. Part III consists of the summaries of raw data collected to date (Enclosure 3).

3. Corporate policy in the United States Army required measures for the protection of human subjects as early as 1962, two years before the original Helsinki declaration on the responsible conduct of human experimentation in medical research. Most existing records consist of short entries in annual reports. Few specific records of informed consent have been found, but we have no reason to believe that any volunteer subjects received any unethical treatment of any sort.

4. In compiling the data provided in this report, we erred on the side of inclusion and disclosure of studies involving human exposure to ionizing radiation. If you desire any details not provided here, we seek those answers. For many of the studies described, the only extant information is the title of the protocol recorded in historical summaries.

5. Contact MAJ John D. Grabenstein, Regulatory Affairs Pharmacist, for additional information: DSN 471-2511, commercial 210-221-2511, fax 210-554-4756.

SHM Harrison COMC

3 Encls

SHANNON M. HARRISON
COL, MC
Chief, Clinical Investigation
Regulatory Office

CF: COL Fetters, HSC
COL Erdtmann, OTSG
CAPT Jemionek, DDRE

Part I: Army Medical Treatment Facilities (MTFs)

The following medical treatment facilities in U.S. Army Health Services Command (HSC) have been queried about the existence of records of human research involving ionizing radiation.

Group A. All Army hospitals within HSC that currently operate or previously operated human-use-review and/or clinical-investigation committees (also known as institutional review boards, IRBs), under the human safeguards of Army Regulation (AR) 40-38, Title 32 Code of Federal Regulations (CFR) 219, and 45 CFR 46. Most of these facilities are "teaching hospitals" that train medical, dental, and other interns, residents, and fellows. Clinical research is common at these locations. We believe that these facilities conducted all human research involving exposure to ionizing radiation with appropriate safeguards of scientific scrutiny and under conditions of informed consent.

Brooke Army Medical Center (MEDCEN), Fort Sam Houston TX 78234-6200
Dwight David Eisenhower Army Medical Center, Fort Gordon GA 30905-5650
Fitzsimons Army Medical Center, Aurora CO 80045-5001
Madigan Army Medical Center, Tacoma WA 98431-5454
Tripler Army Medical Center, Tripler AMC HI 96859-5000
William Beaumont Army Medical Center, El Paso TX 79920-5001
Walter Reed Army Medical Center, Washington DC 20307-5001
Womack Army Medical Center, Fort Bragg NC 28307-5000
Martin Army Community Hospital, Fort Benning GA 31905-6006
Keller Army Community Hospital, West Point NY 10996-1197
Letterman Army Health Clinic, Presidio of San Francisco CA 94129-6700

Group B. All other Army hospitals and stand-alone health clinics within HSC (encompassing the United States and Panama). These facilities may or may not have operated IRBs in the past. Each of these facilities currently receives advice and guidance on the ethical conduct of scientific research, as well as human-protection oversight for the purposes of AR 40-38, 32 CFR 219, and 45 CFR 46 from the Army Medical Center in their geographic region. These facilities are listed in sequence by state. It would be quite unusual for these facilities to conduct any form of organized medical research, let alone radiation research. The probability of radiation experiments at these locations is extremely small, but we queried them for the sake of completeness, to assure the American people that all efforts were made to detect radiation experiments.

NOBLE ARMY COMMUNITY HOSPITAL, FORT MCCLELLAN AL 36205-5083
LYSTER ARMY COMMUNITY HOSPITAL, FORT RUCKER AL 36362-5333
FOX ARMY COMMUNITY HOSPITAL, REDSTONE ARSENAL AL 35809-7000
BASSETT ARMY COMMUNITY HOSPITAL, FORT WAINWRIGHT AK 99703-7300
BLISS ARMY COMMUNITY HOSPITAL, FORT HUACHUCA AZ 85613-7040
U.S. ARMY HEALTH CLINIC, YUMA PROVING GROUND AZ 85365-9106
HAYS ARMY COMMUNITY HOSPITAL, FORT ORD CA 93941-5800
WEED ARMY COMMUNITY HOSPITAL, FORT IRWIN CA 92310-5065
EVANS ARMY COMMUNITY HOSPITAL, FORT CARSON CO 80913-5207
U.S. ARMY HEALTH CLINIC, FORT MCPHERSON GA 30330-5000
WINN ARMY COMMUNITY HOSPITAL, FORT STEWART GA 31314-5300
TUTTLE ARMY HEALTH CLINIC, HUNTER ARMY AIRFIELD, SAVANNAH GA 31409-5180
U.S. ARMY HEALTH CLINIC, SCHOFIELD BARRACKS HI 96857-5460
U.S. ARMY HEALTH CLINIC, ROCK ISLAND ARSENAL, ROCK ISLAND IL 61299-7240
HAWLEY ARMY COMMUNITY HOSPITAL, FORT BENJAMIN HARRISON IN 46216-7000
MUNSON ARMY COMMUNITY HOSPITAL, FORT LEAVENWORTH KS 66027-5400
IRWIN ARMY COMMUNITY HOSPITAL, FORT RILEY KS 66442-5037

Part I: Army Medical Treatment Facilities (MTFs)

Group B (continued)

BLANCHFIELD ARMY COMMUNITY HOSPITAL, FORT CAMPBELL KY 42223-1498
IRELAND ARMY COMMUNITY HOSPITAL, FORT KNOX KY 40121-5520
U.S. ARMY HEALTH CLINIC, LEXINGTON BLUE GRASS ARMY DEPOT KY 40507-5106
BAYNE-JONES ARMY COMMUNITY HOSPITAL, FORT POLK LA 71459-6000
KIMBROUGH ARMY COMMUNITY HOSPITAL, FORT MEADE MD 20755-5800
KIRK ARMY HEALTH CLINIC, ABERDEEN PROVING GROUND MD 21015-5131
U.S. ARMY ENVIRONMENTAL HYGIENE AGENCY, ABERDEEN PRVG GRD MD 21010-5422
U.S. ARMY HEALTH CLINIC, FORT DETRICK MD 21702-5000
U.S. ARMY HEALTH CLINIC, FORT RITCHIE MD 21719
CUTLER ARMY COMMUNITY HOSPITAL, FORT DEVENS MA 01433-6401
U.S. ARMY HEALTH CLINIC, SELFRIDGE AIR NATIONAL GUARD BASE MI 48045-5012
GEN LEONARD WOOD ARMY COMMUNITY HOSPITAL, FT LEONARD WOOD MO 65473-5700
PATTERSON ARMY COMMUNITY HOSPITAL, FORT MONMOUTH NJ 07703-5000
McAFEE ARMY HEALTH CLINIC, WHITE SANDS MISSILE RANGE NM 88002-5520
GUTHRIE ARMY HEALTH CLINIC, FORT DRUM NY 13602-5004
U.S. ARMY HEALTH CLINIC, SENECA ARMY DEPOT, ROMULU.S. NY 14541-5001
U.S. ARMY HEALTH CLINIC, WATERVLIET ARSENAL, WATERVLIET NY 12189-5000
REYNOLDS ARMY COMMUNITY HOSPITAL, FORT SILL OK 73503-6300
DUNHAM ARMY HEALTH CLINIC, CARLISLE BARRACKS PA 17013-5003
U.S. ARMY HEALTH CLINIC, TOBYHANNA PA 18466-6083
U.S. ARMY HEALTH CLINIC, FORT INDIANTOWN GAP PA 17003
MONCRIEF ARMY COMMUNITY HOSPITAL, FORT JACKSON SC 29207-5720
DARNALL ARMY COMMUNITY HOSPITAL, FORT HOOD TX 76544-5063
DUGWAY ARMY HEALTH CLINIC, DUGWAY PROVING GROUND UT 84022-6900
TOOELE HEALTH CLINIC, TOOELE ARMY DEPOT, TOOELE UT 84074-5014
DEWITT ARMY COMMUNITY HOSPITAL, FORT BELVOIR VA 22060-5901
MCDONALD ARMY COMMUNITY HOSPITAL, FORT EUSTIS VA 23604-5548
KENNER ARMY COMMUNITY HOSPITAL, FORT LEE VA 23801-5260
RADER ARMY HEALTH CLINIC, FORT MYER VA 22211-5050
U.S. ARMY HEALTH CLINIC, THE PENTAGON, WASHINGTON DC 20310-5801
GORGAS ARMY HOSPITAL, APO MIAMI 34004-5000
U.S. ARMY MEDICAL DEPARTMENT CENTER & SCHOOL, FORT SAM HOUSTON TX 78234

Steps Taken to Locate Records of Human Radiation Exposure

We tasked each of these MTFs with conducting a comprehensive and thorough search for records of human radiation exposure.

Each MTF appointed a responsible project officer to assemble an inventory of existing research records and statements from records custodians. Most MTFs selected the Radiation Protection Officer (RPO) for their activity. The search included at least the following:

(1) A review of all available annual historical reports.

(2) Inquiries to senior nuclear-medicine physicians, radiologists, nuclear pharmacists, radiation oncologists, and other appropriate officers regarding the existence of administrative or centralized clinical records.

(3) Requests for information at meetings of the administrative, clinical, and other appropriate staffs of the MTF.

We further instructed all project officers to take all other prudent steps to identify records and to itemize searches for records that revealed no evidence of human exposure to ionizing radiation.

We initially asked for information from 1944 to 1974. We supplemented this request with a request for an unlimited search for data.

Part II: Locations of Human Clinical Investigations

Section A. Facilities of U.S. Army Health Services Command at which we are confident that no investigational human exposures to ionizing radiation took place between 1944 and February 1994, based on reports from that facility, 15 March 1994

Group A

Dwight David Eisenhower Army Medical Center, Fort Gordon, GA
Martin Army Community Hospital, Fort Benning, GA
Womack Army Medical Center, Fort Bragg, NC
Keller Army Community Hospital, West Point, NY
Letterman Army Hlth Clinic, Presidio of San Francisco, CA

Group B

Bassett Army Community Hospital, Fort Wainwright, AK
Noble Army Community Hospital, Fort McClellan, AL
Lyster Army Community Hospital, Fort Rucker, AL
Fox Army Community Hospital, Redstone Arsenal, AL
U.S. Army Health Clinic, Yuma Proving Ground, AZ
Weed Army Community Hospital, Fort Irwin, CA
Hays Army Community Hospital, Fort Ord, CA
Evans Army Community Hospital, Fort Carson, CO
U.S. Army Health Clinic, Fort McPherson, GA
Winn Army Community Hospital, Fort Stewart, GA
Tuttle Army Health Clinic, Hunter Army Airfield, Savannah, GA
U.S. Army Health Clinic, Schofield Barracks, HI
U.S. Army Health Clinic, Rock Island Arsenal, Rock Island, IL
Hawley U.S. Army Health Clinic, Fort Benjamin Harrison, IN
U.S. Army Health Clinic, Jefferson Proving Ground, IN
Irwin Army Community Hospital, Fort Riley, KS
Blanchfield Army Community Hospital, Fort Campbell, KY
U.S. Army Health Clinic, Lexington Blue Grass Army Depot, KY
Cutler Army Health Clinic, Fort Devens, MA
Kimbrough Army Community Hospital, Fort Meade, MD
U.S. Army Health Clinic, Fort Ritchie, MD
Kirk Army Health Clinic, Aberdeen Proving Ground, MD
U.S. Army Environmental Hygiene Agency, Aberdeen Proving Ground, MD
General Leonard Wood Army Community Hospital, Fort Leonard Wood, MO
Patterson Army Community Hospital, Fort Monmouth, NJ
Bayne-Jones Army Community Hospital, Fort Polk, LA
McAfee Army Health Clinic, White Sands, NM
Guthrie Army Health Clinic, Fort Drum, NY
U.S. Army Health Clinic, Seneca Army Depot, Romulus, NY
U.S. Army Health Clinic, Watervliet Arsenal, Watervliet, NY
Dunham Army Health Clinic, Carlisle Barracks, PA
U.S. Army Health Clinic, Fort Indiantown Gap, PA
U.S. Army Health Clinic, Tobyhanna, PA
Moncrief Army Community Hospital, Fort Jackson, SC
Darnall Army Community Hospital, Fort Hood, TX
Tooele Health Clinic, Tooele Army Depot, Tooele, UT
DeWitt Army Community Hospital, Fort Belvoir, VA
Kenner Army Community Hospital, Fort Lee, VA
Rader Army Health Clinic, Fort Myer, VA
Gorgas Army Hospital (USA MEDDAC - Panama), Panama
U.S. Army Medical Department Center & School, Fort Sam Houston, TX

Part II: Locations of Human Clinical Investigations

Section A (continued)

Based on informal telephone conversations with officers at the following hospitals and clinics of U.S. Army Health Services Command, project officers identified no experiments of interest yet. We still await a written response.

Bliss Army Community Hospital, Fort Huachuca, AZ (Mr. Campbell)
Munson Army Community Hospital, Fort Leavenworth, KS (CPT Megan)
U.S. Army Health Clinic, Selfridge ANG Base, MI (CPT Kaiermeier)
McDonald Army Community Hospital, Fort Eustis, VA (MAJ Smith)

We still await any response from the following hospitals and clinics. We continue to solicit information from these sites.

U.S. Army Health Clinic, Fort Detrick, MD
Reynolds Army Community Hospital, Fort Sill, OK
Dugway Army Health Clinic, Dugway Proving Ground, UT
U.S. Army Health Clinic, The Pentagon, Washington, DC

Part II: Locations of Human Clinical Investigations

Section B. Facilities of U.S. Army Health Services Command at which investigational human exposures to ionizing radiation took place using health-care delivery resources (Major Defense Program 8) between 1944 and 1978, based on reports from that facility. We identified no evidence of impropriety in any study. 9 March 1994

General Comment: Corporate policy in the U.S. Army required measures for the protection of human subjects (including informed consent) as early as 1962, two years before the original Helsinki declaration on human research ethics.

	Total IR Studies	SE	RT	OG	DTSP	Other	Comment
Brooke Army MEDCEN	22	10	9	5	3	0	
Eisenhower Army MEDCEN	0	0	0	0	0	0	
Fitzsimons Army MEDCEN	18	16	0	0	2	0	
Letterman Army HC/MEDCEN	0	0	0	0	0	0	
Madigan Army MEDCEN	11	6	5	5	0	0	
Tripler Army MEDCEN	21	2	6	6	13	0	
Womack Army MEDCEN	0	0	0	0	0	0	
Wm Beaumont Army MEDCEN	10	10	1	0	0	0	
Walter Reed Army MEDCEN	40	18	20	10	2	0	
Total (1944 to 1978)	122	62	41	26	20	0	

Definitions (not mutually exclusive, except DTSP):

IR - ionizing radiation

SE - projects involving radiopharmaceuticals licensed by the FDA at the time of study or investigational radiopharmaceuticals subsequently licensed as safe and effective.

RT - projects involving external-source radiation therapy (e.g., for cancer or thyroid disease) used at a presumably safe and effective dose.

OG - projects involving collaborative oncology groups [e.g., Cancer & Leukemia Group B (CALGB), Gynecologic Oncology Group (GOG), Pediatric Oncology Group (POG), Southwest Oncology Group (SWOG)]. These groups, often funded by the National Institutes of Health (NIH), offer the advantage of centralized review of the science and ethics of projects conducted at multiple civilian and federal hospitals around the country.

DTSP - other projects involving the diagnosis or treatment of sick people to manage clinical disease. Excludes SE, RT, or OG categories.

Part II: Locations of Human Clinical Investigations

Section C. Facilities of U.S. Army Health Services Command at which investigational human exposures to ionizing radiation took place between 1979 and February 1994, based on entries in the automated Clinical Investigation Research System (CIRS) database. We identified no evidence of impropriety in any study. 9 March 1994

General Comment: Corporate policy in the United States Army required measures for the protection of human subjects (including informed consent) as early as 1962, two years before the original Helsinki declaration on human research ethics.

	Total IR Studies	SE	RT	OG	DTSP	Other	Comment
Brooke Army MEDCEN	136	20	94	89	22	1	ER
Eisenhower Army MEDCEN	40	6	26	24	8	0	
Fitzsimons Army MEDCEN	85	16	63	60	6	0	
Letterman Army MEDCEN (later Health Clinic)	68	22	36	31	11	0	
Madigan Army MEDCEN	78	8	58	54	10	2	ER, XR
Tripler Army MEDCEN	71	8	48	48	15	0	
Womack Army MEDCEN	1	0	0	0	0	1	XR
Wm Beaumont Army MEDCEN	58	21	22	19	15	0	
Walter Reed Army MEDCEN	169	44	90	83	33	0	
Total (1979 to 1994)	706	145	437	408	120	4	
GRAND TOTAL (1944 to 1994) (see also Section D)	828	207	478	434	144	4	

Notes:

ER - Evaluation of occupational radiation exposure of ER personnel.

XR - Field tests of new field X-ray equipment for combat hospitals.

Part II: Locations of Human Clinical Investigations

Section D. Facilities of U.S. Army Health Services Command at which investigational human exposures to ionizing radiation took place between 1944 and February 1994, based on all sources of data. We identified no evidence of impropriety in any study. 9 March 1994

General Comment: Corporate policy in the U.S. Army required measures for the protection of human subjects (including informed consent) as early as 1962, two years before the original Helsinki declaration on human research ethics.

	Total IR Studies	SE	RT	OG	DTSP	Other	Comment
Brooke Army MEDCEN	158	30	103	94	25	1	ER
Eisenhower Army MEDCEN	40	6	26	24	8	0	
Fitzsimons Army MEDCEN	103	32	63	60	8	0	
Letterman Army MEDCEN/HC	68	22	36	31	11	0	PD
Madigan Army MEDCEN	89	14	63	59	10	2	ER, XR
Tripler Army MEDCEN	92	10	54	54	28	0	
Womack Army MEDCEN	1	0	0	0	0	1	XR
Wm Beaumont Army MEDCEN	68	31	23	19	15	0	
Walter Reed Army MEDCEN	209	62	110	93	35	0	
GRAND TOTAL (1944 to 1994)	828	207	478	434	144	4	

Definitions (not mutually exclusive, except DTSP):

IR - ionizing radiation

SE - projects involving radiopharmaceuticals licensed by the FDA at the time of study or investigational radiopharmaceuticals subsequently licensed as safe and effective.

RT - projects involving external-source radiation therapy (e.g., cancer or thyroid disease) used at a presumably safe and effective dose.

OG - projects involving collaborative oncology groups [e.g., Gynecologic Oncology Group (GOG), Pediatric Oncology Group (POG), Southwest Oncology Group (SWOG)]. These groups, often funded by the National Institutes of Health (NIH), offer the advantage of centralized review of the science and ethics of projects conducted at multiple civilian and federal hospitals around the country.

DTSP - other projects involving the diagnosis or treatment of sick people to manage their own clinical disease. Excludes SE, RT, or OG. Includes evaluations of radiographic techniques (e.g., barium enemas), computerized tomography (CT) scans, and other techniques.

ER - Evaluation of occupational radiation exposure of ER personnel.

PD - Preliminary data

XR - Field tests of new field X-ray equipment for combat hospitals.

Part II:

Section D. (continued)

ISOTOPES USED IN RADIOPHARMACEUTICAL STUDIES

Atomic Symbol	Isotope, Salt	1944-1978	1979-1994	Total
Cr	Chromium-51	2	0	2
Co	Cobalt-57 (in Vit B-12)	0	1	1
F	Fluorine-18	1	1	2
Ga	Gallium Citrate-67	10	11	21
Au	Gold, Unspecified	1	0	1
In	Indium-111	3	39	42
P	Chromic Phosphate P-32	1	9	10
I	Sodium Iodide-123	5	8	13
	Sodium Iodide-125	1	1	2
	Sodium Iodide-131	7	19	26
	Iodine, Unspecified	5	5	10
Sr	Strontium-89	0	4	4
Tc	Technetium-99m	15	60	75
Tl	Thallous Chloride-201	3	7	10
Xe	Xenon-133	6	1	7
Indeterminate or Unspecified		12	40	52
Total Number of Studies *		69	204	273

* - columns do not sum arithmetically, because some studies involved more than one isotope

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ONCOLOGY GROUP PROTOCOLS (1944 to 1994)

	Unique Protocols	Iterations of Protocols at Multiple Sites
Cancer & Leukemia Group B (CALGB)	24	27
Gynecologic Oncology Group (GOG)	31	96
Pediatric Oncology Group (POG)	25	62
South Western Oncology Group (SWOG)	86	183
Other Group Projects	59	66
Total	225	434

Part III: Source Documents & References

Summary information on 706 clinical investigations involving human exposure to ionizing radiation in U.S. Army Health Services Command (HSC) medical-treatment facilities (MTFs) between 1979 and 1994. Extracted from the Clinical Investigation Research System (CIRS) database. [Additional information is available about each study listed, but only by calling up each study individually.]	Tab A
Report from Brooke Army Medical Center, Fort Sam Houston, TX	Tab B
Report from D.D. Eisenhower Army Medical Center, Fort Gordon, GA	Tab C
Report from Fitzsimons Army Medical Center, Aurora, CO	Tab D
Report from Madigan Army Medical Center, Tacoma, WA	Tab E
Report from Tripler Army Medical Center, Honolulu, HI	Tab F
Report from William Beaumont Army Medical Center, El Paso, TX	Tab G
Report from Walter Reed Army Medical Center, Washington, DC	Tab H
Report from Womack Army Medical Center, Fort Bragg, NC	Tab I
Report from Martin Army Community Hospital, Fort Benning, GA	Tab J
Report from Keller Army Community Hospital, West Point, NY	Tab K
Report from Letterman Army Health Clinic, Presidio of San Francisco CA	Tab L
Reports from Other HSC Hospitals and Clinics	Tab M
Requests for Information (26 + 28 Jan 1994, 15 Feb 1994)	Tab N
Accomplishments of Army Ionizing Radiation Research	Tab O
Army Regulation 40-7, Use of Investigational Drugs & Devices in Humans and the Use of Schedule I Controlled Drug Substances	Tab P
Army Regulation 40-38, Clinical Investigation Program	Tab Q

E

ARM1.941221.006a

HSHJ-PVR (385-11j) 25 February 1994

MEMORANDUM FOR Chief, Department of Clinical Investigation

SUBJECT: Report Summary on DoD, Human Radiation Research Review, Identification of Human Experiments Involving Exposure to Ionizing Radiation at Madigan Army Medical Center, 1944 - 1979

1. References.

a. Memorandum, HSMC-GCI (40-38a), subject: Human Radiation Research, 26 Jan 1994.

b. Memorandum, HSHJ-CI, subject: Identification of Human Experiments Involving Exposure to Ionizing Radiation at MAMC, 1944 -1974, 9 Feb 94.

c. Memorandum, HSHJ-PVR (385-11j), subject: DoD Human Radiation Research Review, Identification of Human Experiments Involving Exposure to Ionizing Radiation at Madigan Army Medical Center, 1944 -1979, 16 Feb 94.

d. DDN Message, <pmyers@aeha1.apgea.army.mil>, subject: Human Radiation Experiments, 17 Feb 94.

2. The following steps have been accomplished, as directed, summary follows. In accordance with (IAW) the above reference 1.a., encl 2-2, the attached is provided for your action per paragraph 4.

3. Dr. Moore announced at the Senior Leadership Meeting, on 10 February 1994 that MAMC was participating in the DoD, Human Radiation Research Review. CPT Kammerer, Chief, Radiation Protection Office, will be appointed as the Project Officer.

4. Notification of the following individuals, was accomplished IAW reference 1.b. on 16 February 1994, with reference 1.a. as an enclosure. The following individuals were given a suspense of 24 February 1994, to provide the information requested in reference 1.a.:

Cdr, DENTAC
MAMC, PAO
Chief, Records Management Custodian (Mrs. McFarland)
Chief, Preventive Medicine Service
Chief, Dept of Clinical Investigation
Chief, Dept of Community Medicine
Chief, Dept of Emergency Medicine
Chief, Dept of Family Practice
Chief, Dept of Medicine
Chief, Dept of Nursing

SUBJECT: Report Summary on DoD, Human Radiation Research Review, Identification of Human Experiments Involving Exposure to Ionizing Radiation at Madigan Army Medical Center, 1944 - 1979

Chief, Dept of Obstetrics/Gynecology
Chief, Dept of Pathology
Chief, Dept of Pediatrics
Chief, Dept of Physical Medicine & Rehabilitation
Chief, Dept of Psychology Service
Chief, Community Mental Health
Chief, Psychiatry
Chief, Dept of Radiology
Chief, Nuclear Medicine
Chief, Radiation Therapy
Chief, Dept of Surgery

5. All the above identified individuals responsible for their respective areas, have provided either E-mail or written responses indicating the records requested in reference 1.a., paragraph 4., do not exist.

6. During the records review the following information was identified and is included IAW reference 1.d. under paragraph 1.A.2.(1) thru (4).

a. An individual was identified by Dr. Cushner, who was reportedly at the "Bikini Island atomic bomb blast on board the USS Cortland" stationed near the bomb site. Reports that the ship was "hot" and not allowed into the Port of Bremerton because it was "too hot". He reportedly lived on ship for six months.

b. An individual was identified by Dr. Cushner, who was reportedly assigned near a desert atomic bomb test site and was sent out to clean up the debris. This individual developed bladder cancer in the 1950's and has been treated at MAMC.

c. An individual was identified during the records review in my office. During mid 1980 an individual presented himself to the Radiation Protection Office, concerning previous exposure to ionizing radiation in the 1960's. His reported exposure is most likely occupational, however, the MFR references the Smokey Project, that he has cancer and is being treated at MAMC.

d. On 24 and 25 February 1994, I contacted SGM Dryer of Patient Administration Division and requested he retain/recover any records on the three individuals.

SUBJECT: Report Summary on, DoD Human Radiation Research Review, Identification of Human Experiments Involving Exposure to Ionizing Radiation at Madigan Army Medical Center, 1944 - 1979

e. As previously stated, this information is included per reference 1.d., paragraph 1.A.2.(1) thru (4). None of these individuals were exposed to ionizing radiation experiments at MAMC.

7. Please contact me if you have any questions on the above report summary. I will retain the above materials and await further instructions.

RICKY J. KAMMERER
CPT, MS
Chief, Radiation Protection Office
DoD Project Officer

CF:
CG
DCA
JAG

ARM1.941221.006b

HSHJ-CI (385-11j) 25 February 1994

MEMORANDUM FOR RADIATION PROTECTION OFFICE (ATTN: CPT KAMMERER)

SUBJECT: List of Protocols Approved by the Department of Clinical Investigation Involving Radiation for the Years 1965 - 1979

SE Use of Emergency RISA Studies on Third Trimester Bleeding

SE Chromosome Changes After Diagnostic Radioactive Iodine Tests

OG Hydroxy Urea + Radiation + 2nd Look Crainotomy in Brain Tumors RT
(Western Oncology Group)

SE TcMAA for Lung Scanning

SE ^{67}Gallium Citrate Body Scanning for Tumor or Abcesses

OG Preoperative Hydroxyurea + Radiation in Osteosarcoma RT
(Western Oncology Group)

SE Determination of Normal Range for Six-Hour Radioactive Iodine Uptake Using 123 Iodine in Order to Eliminate Need for 24 Hour RAIU.

OG Radiotherapy, CCNU and Procarbazine in Malignant Gliomas of the Brain RT
SWOG 7404

OG 5-FU, McCCNU + Radiotherapy With or Without Testotactone for Localized Adenocarcinomas of the Exocrine Pancreas.
SWOG 7509 RT

OG Treatment of Early Squamous Cell Carcinoma of the Head and Neck with Chemotherapy or Chemoimmunotherapy Following Initial Surgery and/or Radiotherapy. ✓
SWOG 7620 RT

OG Combined CT/RT/IT for Oat Cell Cancer of the Lung. RT ✓
SWOG 7628

OG Stage III A and B Hodgkins Disease Remission Induction by Radiation Therapy Plus Chemotherapy Combination Versus Chemotherapy Alone. RT ✓
SWOG 7518

OG Phase III Protocol - Radiotherapy - Chemotherapy (MOPP) for Stages I and II, A and B Hodgkin's. RT ✓
SWOG 781

OG Radiation Therapy in Combination with BCNU, Dimethyl Trioazeno Imidazole Carboxamide (DTIC) or Procarbazine in Patrients with Malignant Gliomas of the Brain. RT
SWOG 7703

OG Combined Modality Treatment of Limited Squamous Carcinoma of the Lung. Phase III RT
SWOG 7635

SE Development of Radionuclide Angiocardiography as a Clinical Diagnostic Tool for the Quantification of Left to Right Cardiopulmonary Shunts

Dan C Moore

DAN C. MOORE, M.D.
Colonel, MC
Chief, Dept of Clinical Investigation

F

DEPARTMENT OF THE ARMY
HEADQUARTERS, TRIPLER ARMY MEDICAL CENTER
TRIPLER AMC, HAWAII 96859-5000

REPLY TO ATTN OF

ARM1.941221.007a

HSHK-CI (40-38a) 28 FEB 94

MEMORANDUM THRU Chief, Department of Clinical Investigation, ATTN: HSHK-CI (COL Banks), Tripler Army Medical Center, Tripler AMC, HI 96859-5000

FOR Chief, Clinical Investigation Regulatory Office, ATTN: HSMC-GCI (COL Harrison), AMEDD Center & School, Fort Sam Houston, TX 78234-6125

SUBJECT: Human Radiation Research

1. Reference memorandums,

a. HSMC-GCI, 24 JAN 94, subject: Records of Human Radiation Research

b. HSMC-GCI, 26 JAN 94, subject: Human Radiation Research

c. HSMC-GCI, 15 FEB 94, subject: Human Radiation Research

2. We have found the enclosed information regarding Human Radiation Research. We have reviewed our records from 1944 to present during Feb. 94. (Encl 1)

3. The results from the searches made by the following personnel outside Department of Clinical Investigation are enclosed (Encl 2).

Commander, U.S. Army Health Clinic, Schofield Barracks, HI	COL Gray
Department of Radiology, and Nuclear Medicine Service	LTC Delaplain
Pharmacy Officer	LTC Berndt
Chief, Radiation Oncology Service	MAJ Young
Headquarters Administrator	CPT Werthmann
Historian	Mr. Robinson
Historian	Mr. DeVaney
Public Affairs Officer	Mr. Vidis

4. We obtained the majority of this data from Department of Clinical Investigation Progress Reports. In some cases the only reference found to a protocol was a line in the minutes from a meeting. We found extensive files for only a handful of protocols.

HSHK-CI
SUBJECT: Human Radiation Research

5. We searched all of the boxes of records available to us. These boxes included some records of protocols, minutes of human use committee meetings and publications. All of the progress

reports since the inception of the Department of Clinical Investigation were searched.

6. Enclosed (Encl 4) is a 3½", IBM compatible, disk with this memo, Encl 1 in WordPerfect & Microsoft Excel worksheet

7. Point of contact for this action is the undersigned, 808-433-66709.

Nelson W. Rebert

NELSON W. REBERT
Captain, MS
Chief of Biochemistry Section
Department of Clinical
Investigation

CF:
Deputy Commander of Clinical Services, HSHK-DCC (COL Jones), Tripler AMC

HUMAN RADIATION RESEARCH INFORMATION

Department of Clinical Investigation
Tripler Army Medical Center
Tripler AMC, HI 96859-5000

Prefix | **Protocol Number**
Number of References in Memos | **Amount of files Found**
Principle Investigator | **Associate Investigators**
Title

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*
19/77
6
Mazat, Bruce, A. , LTC, MC
Stotler, Richard E., MAJ, MSC; Chacko, Anna K. , MAJ, MC
Indium-111 Bleomycin in the Diagnosis of Tumors

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*
26H93
1
Delaplain, Calvin, LTC, MC
Evaluation of 131I-MIBG (131I-Meta-iodobenzylguanidine sulfate) In Patients Suspected of Having Pheochromocytoma, Paraganglioma, Neuroblastoma or Medullary Hyperplasia

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*
27H93
1
Radvany, Martin G. CPT, MC
111In-CYT-103 as Diagnostic Imaging Agent in the Preoperative Differentiation of Benign and Malignant Mammographic abnormalities

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*
31/76
1
1" box 1845
Chacko, Anna K. , MAJ, MC
Clinical Evaluation of Fluorescent Scanning of the Thyroid with Americium-241

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*
3A025601A822
never started
Rogers, R. E. , LTC, MC
Earll, J. M., LTC, MC
Placental Localization With Pho/Gamma Camera, comparison of Technetium 99m and Strontium 87m

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OG
POG 9031(91)
1
Cook, Bruce A., LTC, MC
High-Stage Medulloblastoma

Encl

Prefix Number of References in Memos Principle Investigator Title	Protocol Number Amount of files Found Associate Investigators
OG 2 Berenberg, Jeffrey, COL, MC A Comparison of Aggressive Radiotherapy Plus Chemotherapy Versus Aggressive Chemotherapy in the Treatment of Limited Carcinoma of the Pancreas, Phase III	SWOG 8210(84) Uphouse, William, LTC, ; Solimando, Dominic, CPT, MSC
OG Cook, Bruce A., LTC, MC Randomized Study of Intensive Chemotherapy (MOPP/ABVD) +/- Low-Dose Total Nodal Radiation Therapy in the Treatment of Stages IIB, IIIA2, IIIB, IV. Hodgkin's Disease in Pediatric Patients	SWOG 8725(88) Reddoch, Shirley E., LTC MC
OG, RT Berenberg, Jeffrey, COL, MC Treatment of Advanced Seminoma (Stage CII(N 4) + CIII) with Combined Chemotherapy and Radiation Therapy, Phase II	SWOG 8104(83) 1/2" file BOX 1924 Uphouse, W. J., LTC, MC; Ordonez, M., LTC, MC; Ronquillo, A., MAJ, MC
OG,RT Fram, D., CPT, MC NCOG 6G-90-2: A Phase II Study of External Beam Radiation Therapy Followed by Temporary Radioactive Implant Boost With or Without Hyperthermia for Primary Glioblastoma Multiforme	41H91 1/4" (1845) BOX
OG,RT 1, approved Randomized Trail of Radical Cystectomy Compared to Preoperative Radiation Therapy and Radical Cystectomy in Patients with Invasive Primary Carcinoma of the Bladder	NBCCGA16
OG,RT Phase I Trial of Cis-Diammine-Dichloroplatinum (II) (DDP) Confined with Small-field Pelvic Radiation Therapy for Patients with Clinically Localized Invasive Primary Carcinoma of the Bladder Who Are Unsuitable for Cystectomy	NBCCGA8

Prefix Number of References in Memos Principle Investigator Title	Protocol Number Amount of files Found Associate Investigators
OG,RT	NBCG 18(85)
Berenberg, J., COL, MC	Uphouse, W. J.,MAJ, MC; Sakas, L., MAJ, MC
A Trial of Neoadjuvant Chemotherapy Followed by Combined Cisplatinum and Radiation for Patients with Localized Invasive Bladder Cancer Unsuitable for Cystectomy, Phase I/II	
OG,RT 1	NSABPB21(93)
Berenberg, J., COL, MC	
A Clinical Trial to Determine the Worth of Tamoxifen and the Worth of Breast Radiation in the Management of Patients with Node-negative, Clinically Occult, Invasive Breast Cancer Treated by Lumpectomy	
OG,RT 1	NSABPB24(91)
Berenberg, J., COL, MC	
A Clinical Trial to Evaluate The Worth of Tamoxifen In Conjunction With Lumpectomy and Breast Irradiation for the Treatment of Noninvasive Intraductal Carcinoma (DCIS) of The Breast	
OG,RT	POG 7660
Stephenson, Stephen R. LTC, MC	Cook, Bruce A., MAJ, MC
Comparison of Involved Field Radiotherapy with Adjuvant MOPP Chemotherapy in the Treatment of Stage I and II Hodgkin's Disease, Phase III	
OG,RT 2	POG 8346(85)
Cook, Bruce A., LTC, MC	Woods, Joseph, LTC, MC; Barcia, Peter, COL, MC
Comprehensive Therapy for Ewing's Sarcoma: Tailored Versus Standard Radiation Therapy, Phase III	
OG,RT 2	POG 8426(86)
Cook, Bruce A., LTC, MC	Woods, Joseph, LTC, MC
Intensive Chemotherapy (MOPP-ABVD) Plus Low-Dose Total Nodal Radiation Therapy in the Treatment of Stages IIB, II2A, IIIB, IV Hodgkin's Disease in Pediatric Patients, A Groupwide Pilot Study	

Prefix	Protocol Number
Number of References in Memos	Amount of files Found
Principle Investigator	Associate Investigators
Title	

OG,RT — POG 8631(87)
2
Cook, Bruce A., LTC, MC
Medulloblastoma Favorable Prognosis: Randomized Study of Reduced Dose Irradiation to Brain and Spinal Contents vs. Standard Dose Irradiation

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OG,RT — POG 8633(89)
1
Reddoch, Shirley E., LTC MC — Shoupe, Branden A., MAJ, MC; Hastings, Constance P., COL, MC
8633/34: The Treatment of Children Less Than Three Years of Age With Malignant Brain Tumors Using Postoperative Chemotherapy and Delayed Irradiation

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OG,RT — POG 8638(88)

Cook, B. A., LTC, MC
Randomized Phase II Study of Carboplatin (CBDCA) vs CHIP in the Treatment of Children with Progressive or Recurrent Brain Tumors

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OG,RT — POG 8696/97(87)
1
Cook, Bruce A., LTC, MC
Treatment of Hepatoblastoma (HB) with Surgery, Chemotherapy, and Radiation Therapy

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OG,RT — POG 8725(88)

Cook, B. A., LTC, MC
Randomized Study of Intensive Chemotherapy (MOPP/ABVD) + - Low-Dose Total Nodal Radiation Therapy in the Treatment of Stages IIb, IIIA2, IIIB, IV Hodgkin's Disease in Pediatric Patients

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OG,RT — POG 8832
1
COOK
Pre-Irradiation Chemotherapy in Supratentorial Malignant Tumors

Prefix Number of References in Memos Principle Investigator Title	Protocol Number Amount of files Found Associate Investigators
OG,RT 1 Reddoch, Shirley E., LTC MC Pre-Radiation Chemotherapy for Children with Supratentorial Malignant Gliomas and Poorly-Differentiated Embryonal Tumors	POG 9135(91) Shoupe, Branden A., MAJ, MC; Hastings, Constance P., COL, MC
OG,RT Reddoch, Shirley E., LTC MC Phase I/II Dose Escalating Trial of Hyperfractionated Irradiation In Treatment of Supratentorial Malignant Tumors of Childhood	POG 9136(91) Shoupe, Branden A., MAJ, MC; Hastings, Constance P., COL, MC
OG,RT 1 Cook, Bruce A., LTC, MC A Dose-Escalating Study of Cisplatin, Used Concomitantly with Hyperfractionated Irradiation in the Treatment of Children with Newly-Diagnosed Brain Stem Gliomas. A Phase I Study	POG 9139(91) Reddoch, Shirley E., LTC MC
OG,RT 1 Reddoch, Shirley E., LTC MC Treatment of Stage I, IIA and IIIA1 Hodgkin's Disease With ABVE and Low-dose Irradiation	POG 9226(92) Shoupe, Branden A., MAJ, MC; Hastings, Constance P., COL, MC
OG,RT 2 Reddoch, Shirley E., LTC MC Treatment of Children with Newly-Diagnosed Brain Stem Glioma (BSG) Using Cisplatin as a Radiosensitizer with Either Conventional or Hyperfractionated Radiotherapy	POG 9239(92) Shoupe, Branden A., MAJ, MC; Hastings, Constance P., COL, MC
OG,RT Maybee, David A., COL, MC Comparison of Involved Field (IF) Radiotherapy and MOPP + Low Bleomycin with IF Radiotherapy and A-COPP in Stage III Hodgkin's Disease	SWOG 7612 Hastings, Constance P., COL, MC

Prefix Number of References in Memos Principle Investigator Title	Protocol Number Amount of files Found Associate Investigators
OG,RT	SWOG 7712
Maybee, David A., COL, MC	Hastings, Constance P., COL, MC
Comparison of Treatment Regimens for First CNS Relapse in Childhood Acute Lymphoblastic Leukemia (CNS Leukemia Study #6), Phase III	
OG,RT	SWOG 7901
Maybee, David A., COL, MC	Hastings, Constance P., COL, MC
Rescue Therapy for Non-CNS Extramedullary Disease in Children With Acute Lymphoblastic Leukemia, Phase III	
OG,RT	SWOG 7905
Maybee, David A., COL, MC	Hastings, Constance P., COL, MC
A-COP Plus for Non-Hodgkin's Lymphoma in Children, Phase III	
OG,RT	SWOG 7994
Maybee, David A., COL, MC	Hastings, Constance P., COL, MC
Therapy for Extraocular Retinoblastoma with Cyclophosphamide, Vincristine, Adriamycin, and Irradiation	
OG,RT	SWOG 8000
Maybee, David A., COL, MC	Hastings, Constance P., COL, MC
The National Wilms' Tumor Study III	
OG,RT	SWOG 8095
Maybee, David A., COL, MC	Hastings, Constance P., COL, MC
Multimodal Therapy of Metastatic Ewing's Sarcoma With Chemo therapy Plus Irradiation and Surgery (if Feasible), Intergroup Phase III	
OG,RT 1	SWOG 8232(84)
Berenberg, Jeffrey, COL, MC	Uphouse, William, LTC, ; Solimando, Dominic, CPT, MSC; Ordonez, Marylin P., MAJ, MC
Treatment of Limited Small Cell Lung Cancer With VP16/Cis-Platinum, Alternation With Vincristine/Adriamycin-Cyclophosphamide and Radiation Therapy Versus Concurrent	

Prefix	Protocol Number
Number of References in Memos	Amount of files Found
Principle Investigator	Associate Investigators
Title	

VP16/Vincristine/Adriamycin/Cyclophosphamide and Radiation Therapy, Phase III

OG,RT	SWOG 8269
Berenberg, J.	

Concurrent chemo-radiotherapy for limited small cell carcinoma of the lung, Phase II

OG,RT	SWOG 8293(85)
Berenberg, Jeffrey, COL, MC	Uphouse, W. J., LTC, MC

Management of Locally or Regionally Recurrent by Surgically Resectable Breast Cancer, Phase III

OG,RT	SWOG 8300(84)
3	1/2" file BOX 1924
Berenberg, Jeffrey, COL, MC	Uphouse, W. J., LTC, MC; Tell, D., MAJ, MC; Woods, J., LTC, MC

Treatment of Limited Non-small Cell Lung Cancer: Radiation Versus Radiation Plus Chemotherapy (FOMi/CAP), Phase III

OG,RT	SWOG 8393(85)
1	
Berenberg, Jeffrey, COL, MC	Uphouse, William, MAJ, MC; Tell, Daniel T., MAJ, MC; Ordonez, Marylin P. LTC, MC;?Solimando, Dominic, CPT, MS; Barcia, Peter, COL, MC; Lee, Y.T. Margaret, LTC, MC

Management of Locally or Regionally Recurrent but Surgically Resectable Breast Cancer, Phase II

OG,RT	SWOG 8493(85)
1	
Berenberg, Jeffrey, COL, MC	Uphouse, W. J., LTC, MC; Tell, D., MAJ, MC; Ordonez, M., LTC, MC

Simultaneous Cisplatinum Plus Radiation Therapy Compared with Standard Radiation Therapy in the Treatment of Unresectable Squamous or Undifferentiated Carcinoma of the Head and Neck

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OG,RT	SWOG 8590(85)
2	
Berenberg, Jeffrey,, COL, Mc	Uphouse, William, MAJ, MC

Phase III Study to Determine the Effects of Combining Chemotherapy with Surgery and Radiotherapy for Resectable Squamous Cell Carcinoma of the Head and Neck

Prefix	Protocol Number
Number of References in Memos	Amount of files Found
Principle Investigator	Associate Investigators
Title	

OG,RT	SWOG 8597(86)
1	1/2"
Berenberg, Jeffrey, COL, MC	Uphouse, William, LTC, MC; Stapleton, Luke, MAJ, MC; MacMillan, Mary, RPH; Sakas, Lawrence, LTC, MC; Ronquillo, Aida, LTC, MC

Randomized Phase III Intergroup Study of Supradiaphragmatic Irradiation in Stage II-Seminoma

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OG,RT	SWOG 8598(87)
3	
Berenberg, Jeffrey, COL, MC	Uphouse, W. J., LTC, MC

A Prospective Trial for Localized Cancer of the Esophagus: Comparing Radiation as a Single Modality to the Combination of Radiation and Chemotherapy, Phase III

OG,RT	SWOG 8631(87)

Cook, Bruce A., LTC, MC
(formerly: Stephenson, S. R., LTC, MC)

Medulloblastoma Favorable Prognosis: Randomized Study of Reduced Dose Irradiation to Brain and Spinal Contents vs. Standard Dose Irradiation

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OG,RT	SWOG 8695
1	
Berenberg	

A Randomized Comparison of Hydroxyurea Versus 5-FU Infusion and Bolus Cisplatin as an Adjuvant to Radiation Therapy in Patients with Stages II-B, III and IV-A Carcinoma of the Cervix and Negative Para-aortic Nodes

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OG,RT	SWOG 8736(88)
1	
Berenberg, Jeffrey, COL, MC	Uphouse, W. J., LTC, MC; Sakas, L., LTC, MC; Stapleton, L., MAJ, MC;Martin, S., CPT, MS

Treatment of Localized Non-Hodgkin's Lymphoma: comparison of Chemotherapy (CHOP) to Chemotherapy Plus Radiation Therapy

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OG,RT	SWOG 8794(89)
1	
Berenberg, Jeffrey, COL, MC	Uphouse, W. J., LTC, MC; Sakas, L., LTC, MC; Dresner, M. L., COL, MC; Stapleton, L., MAJ, MC; Young, M. M., MAJ, MC

Prefix	Protocol Number
Number of References in Memos	Amount of files Found
Principle Investigator	Associate Investigators
Title	

Treatment of Pathologic Stage C Carcinoma of the Prostate with Adjuvant Radiotherapy

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OG,RT	SWOG 8805(88)
1	
Berenberg, Jeffrey, COL, MC	Uphouse, W. J., LTC, MC; Sakas, L., LTC, MC; Stapleton, L., MAJ, MC;Martin, S., CPT, MS; Young, M. M., MAJ, MC

Neoadjuvant Cisplatin and VP-16 Plus Concurrent Chest and Brain Irradiation for Patients with Stage III Non-Small Cell Lung Carcinoma

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OG,RT	SWOG 8812(89)
Berenberg, Jeffrey, COL, MC	Uphouse, William, LTC, ; Tell, Daniel, MAJ, MC; Brooks, Viola, COL, MC; Solimando, Dominic, CPT, MSC

Treatment of Limited Non-small Cell Lung Cancer: Radiation Versus Radiation Plus Chemotherapy (FOMi/CAP), Phase II

OG,RT	SWOG 8892(89)
1	
Berenberg, J., COL, MC	Uphouse, W. J., LTC, MC; Stapleton, L., MAJ, MC; Martin S, CPT, MS; Sakas, L., LTC, MC; Young, M. M., MAJ, MC

A Study of Radiotherapy with and without Concurrent Cisplatin in Patients with Nasopharyngeal Cancer, Phase III

OG,RT	SWOG 8896
1	
Berenberg	

Protocol for Surgical Adjuvant Therapy of Rectal Carcinoma: A Controlled Evaluation of a) Protracted Infusion 5-FU as a Radiation Enhancer and b) 5-FU Plus Methyl-CCNU Chemotherapy

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OG,RT	SWOG 8957(90)
2	
Berenberg, J., COL, MC	

Feasibility Trial of Postoperative Radiotherapy + Cisplatin Followed by Three Courses of 5-FU + Cisplatin in Patients with Resected Head and Neck Cancer, Phase II

OG,RT	SWOG 9008(92)
Berenberg, J., COL, MC	

Prefix | Protocol Number
Number of References in Memos | Amount of files Found
Principle Investigator | Associate Investigators
Title

Trial of Adjuvant Chemo-irradiation After Gastric Resection for Adenocarcinoma, Phase III

OG,RT | SWOG 9019(92)
2
Berenberg, J., COL, MC
A Phase III, Randomized, Prospective Comparison Between Chemotherapy Plus Radiotherapy Together with Surgery for Selected Stage IIIa (Positive Mediastinal Nodes) and Selected Stage IIIb (No Malignant Effusion) Non-small Cell Lung Cancer

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RT | 9132(94)
2
Reddoch, Shirley E., LTC MC
Hyperfractionated Irradiation for Posterior Fossa Ependymoma

RT | G OG 123(94)

Elg
A Randomized Comparison of Radiation Therapy and Adjuvant Hysterectomy Versus Radiation Therapy and Weekly Cisplatin and Adjuvant Hysterectomy in Patients With Bulky Stage 1B Carcinoma of the Cervix

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RT | G OG 92(94)

Elg
Treatment of Selected Intermediate Risk Patients With Stage 1B Carcinoma of the Cervix After Radical Hysterectomy and Pelvic Lymphadenectomy: Pelvic Radiation Therapy Versus No Further Therapy

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SE | 13/76

Mazat, Bruce, A. , LTC, MC
Gallium-67 Citrate in the Diagnosis of Tissue Tumors and/or Abcesses

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SE | 14/76

Chacko, Anna K. , MAJ, MC | Mazat, Bruce, A. , LTC, MC
Clinical Evaluation of Cisternography Utilizing Indium-111 DTPA

SE | 20/80
0.5" box 1845
Chacko, Anna K. , MAJ, MC
In Vivo Evaluation of Hepatobiliary System with Tc 99m HIDA

Prefix Number of References in Memos Principle Investigator Title	Protocol Number Amount of files Found Associate Investigators
SE 2X Mazat, Bruce, A. , LTC, MC Clinical Evaluation of the Thyroid Studies Utilizing 123I	29/76 Ing, Samuel, J., MAJ, MC; Chacko, Anna K., MAJ, MC by In Vivo Radionuclide
SE Chandnani, Vijay P., MD Chronic Wrist Pain: Diagnostic Accuracy of Magnetic Resonance Imaging Radionuclide Bone Scanning	38H92 Freestone, Kristen, CPT, MC; Gagliardi, Joseph A., CPT, MC; Hansen, Mark F., COL, MC; Milnor, William, H. COL, MC; Delaplain, Calvin B., LTC, MC
SE Schneier, H. A., CPT, MC (U) Intermittent L-Thyroxine Suppression of Thyroid Function	3A062110A822 Kem, D. C., MAJ, MC; Brown, G. S., MAJ, MC
SE Barber, F. Alan, MAJ, MC Evaluation of Posterior Spine Fusions in Scoliosis by Radio-isotope Bone Scan	44/76
SE 1, approved Bonilla-Santiago, Jaime, CPT, MC Correlation of CT Scanning with Positive Bone Scans in Evaluation of Metastatic Disease to Bone	no protocol #
SE 2, approved Chuck, John W., CPT, MC Thallium-201 Myocardial Imaging in Detecting Right Ventricular Dysfunction in Chronic Obstructive Pulmonary Disease	no protocol #
SE 1 approved Resnick, MAJ Thallium-201 Chloride for Diagnosis of Myocardial Ishemia and/or Myocardial Infarct	no protocol #

Prefix	Protocol Number
Number of References in Memos	Amount of files Found
Principle Investigator	Associate Investigators
Title	

SE 29/80

Landry Jr., Edmund C., CPT, MC
Radioisotope Scanning in the Diagnosis of Bone and joint Infections

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DX 14/81

Embry, Ronald L., CPT, MC
Study of the Size of the Thoracic Aorta with Computerized Tomography

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DX 19/80
1 1 1/2" BOX 1845
Chacko, Anna K. , MAJ, MC Miller, C. F., LTC, MC; Osman, M. R., LTC, MC; Ordonez, M. P. M., MAJ, MC; Faleski, E. j., CPT, MC; Shelter, P. L., COL, MC; Landry, A. J., MAJ, MSC
Study of Internal Mammary Lymph Nodes in Patients with Inner Quadrant Breast Cancer

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DX 1T84

Holmes, SM
Perfecting Radiological Technique of Percutaneous Transhepatic Portal Venography

---

DX 20H90
1
Roth, Bradley, CPT, MC
Radiologic Evaluation of Cervical Spine Trauma: A Selective Approach

---

DX 31/83
1 1/4" BOX 1893
Matthews, Robert J., CPT, MSC Hill, Marvin E., MAJ, MC
Enhancing Visualization of Small Nodules in Radiographic Examinations

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DX 33H92
2
Humphrey Jr Crandall, David B., COL, MC; Harper, Michearl T. COL, MC
Contrast Radiography in Small Bowel Obstruction: A Prospective Randomized Trial

Prefix	Protocol Number
Number of References in Memos	Amount of files Found
Principle Investigator	Associate Investigators
Title	

DX
2
Chandnani, Vijay P., MD

37H92
1/2" (1845 BOX
Gore, Robert L., CPT, MC; Gagliardi, Joseph A., CPT, MC; Hansen, Mark F., COL, MC; Milnor, William, H. COL, MC; Person, David W.

The Post-operative Scaphoid: A Comparison of Magnetic Resonance Imaging (MRI), Computed Tomography (CT), and Conventional Radiography in the Diagnosis of Fracture Healing

---

DX
1
Whitcomb, M. E., MAJ, MC

3A062110A822

(U) The Clinical, Radiologic, and Physiologic Effects of Malaria on the Lung

---

DX
Young, F. S. H., CPT, MC

3A062110A822
Smith, D. L., CPT, MC

(U) Thyroid Function in Pediatric Patients on Chronic Iodide Expectorant Medication

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DX
Kurihara, Wallace K., MAJ, MC

8/78
Barcia, Peter J. LTC, MC

Evaluation of Patients for Thyroid Disease Who Experienced Childhood Irradiation to the Head and Neck

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DX
1, approved
Ahlschier, Allan D., MAJ, MC

no protocol #
Mazat, LTC

Comparison of Diagnostic Accuracy of Double Contrast Knee Arthography and Computed Tomography of the Knee

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DX
1, approved
Blight, EdwardM., COL, MC

no protocol #

Minimum Exposure Requirements for an Excretory Urogram

DX
1, deferred
Pickett, Wallace J., CPT, MC

no protocol #

Radionuclide Imaging in Cases of Suspected Child Abuse

ARM1.941221.007ca

DEPARTMENT OF THE ARMY
UNITED STATES ARMY HEALTH CLINIC
TRIPLER ARMY MEDICAL CENTER
SCHOFIELD BARRACKS, HAWAII 96857-5460

REPLY TO
ATTENTION OF:

HSHK-HC (40-38a)

22 February 1994

MEMORANDUM THRU

Chief, Biochemistry Section, Department of Clinical Investigation
ATTN: HSHK-CI, Tripler Army Medical Center, Tripler AMC, HI 96859-5000

Chief, Department of Clinical Investigation, ATTN; HSHK-CI, Tripler Army Medical Center, Tripler AMC, HI 96859-5000

FOR Chief, Clinical Investigation Regulatory Office, ATTN: HSMC-GCI, AMEDD Center & School, FSH, TX 78234-6125

SUBJECT: Records of Human Radiation Research Search

A negative reply is submitted.

WILLIAM J. GRAY
Colonel, MC
Commanding

ARM1.941221.007cb

DEPARTMENT OF THE ARMY
HEADQUARTERS, TRIPLER ARMY MEDICAL CENTER
TRIPLER AMC, HAWAII 96859-5000

REPLY TO ATTN OF

HSHK-DRN

23 February 1994

MEMORANDUM THRU

Chief, Department of Radiology, ATTN: HSHK-DR, Tripler Army Medical Center, Tripler AMC, HI 96859-5000

Chief, Biochemistry Section, Department of Clinical Investigation, ATTN: HSHK-CI, Tripler Army Medical Center, Tripler AMC, HI 96859-5000

Chief, Department of Clinical Investigation, ATTN: HSHK-CI, Tripler Army Medical Center, Tripler AMC, HI 96859-5000

FOR Chief, Clinical Investigation Regulatory Office, ATTN: HSMC-GCI, AMEDD Center & School, Fort Sam Houston, TX 78234-6125

SUBJECT: Records of Human Radiation Research Search

This memorandum is to document that I have personally reviewed all available administrative and centralized clinical records that were in the records holding area, Bldg 113, on this date, 23 February 1994. Additionally, I have reviewed the records in the nuclear medicine service. Furthermore, I aided in the review of the clinical investigation records of protocols that included radioisotopes. Outside of those listed on the report from Clinical Investigation, I found no evidence of radiation experiments during the period 1944 to the present.

I can be reached at (808) 433-6636 for further information.

CALVIN B. DELAPLAIN
LTC MC
Chief, Nuclear Medicine Svc

DEPARTMENT OF THE ARMY
HEADQUARTERS, TRIPLER army MEDICAL CENTER
TRIPLER AMC, HAWAII 96859-5000

REPLY TO ATTN OF

HSHK-DRN

23 February 1994

MEMORANDUM THRU

2/23/94

Chief, Department of Radiology, ATTN: HSHK-DR, Tripler Army Medical Center, Tripler AMC, HI 96859-5000

2/28/94

Chief, Biochemistry Section, Department of Clinical Investigation, ATTN: HSHK-CI, Tripler Army Medical Center, Tripler AMC, HI 96859-5000

Chief, Department of Clinical Investigation, ATTN: HSHK-CI, Tripler Army Medical Center, Tripler AMC, HI 96859-5000

FOR Chief, Clinical Investigation Regulatory Office, ATTN: HSMC-GCI, AMEDD Center & School, Fort Sam Houston, TX 78234-6125

SUBJECT: Records of Human Radiation Research Search

This memorandum is to document that I have personally reviewed all available administrative and centralized clinical records that were in the records holding area, Bldg 113, on this date, 23 February 1994. Additionally, I have reviewed the records in the nuclear medicine service. Furthermore, I aided in the review of the clinical investigation records of protocols that included radioisotopes. Outside of those listed on the report from Clinical Investigation, I found no evidence of radiation experiments during the period 1944 to the present.

I can be reached at (808) 433-6636 for further information.

Michael D. Berndt

MICHAEL D. BERNDT
LTC MS
Chief, Nuclear Pharmacy

ARM1.941221.007cd

DEPARTMENT OF THE ARMY
HEADQUARTERS, TRIPLER ARMY MEDICAL CENTER
TRIPLER AMC, HAWAII 96859-5000

REPLY TO
ATTN OF

HSHK-DPT (40-38a) 23 February 1994

MEMORANDUM THRU

Chief, Biochemistry Section, Department of Clinical Investigation, ATTN: HSHK-CI, Tripler Army Medical Center, Tripler AMC, HI 96859-5000

Chief, Department of Clinical Investigation, ATTN: HSHK-CI, Tripler Army Medical Center, Tripler AMC, HI 96859-5000

FOR Chief, Clinical Investigation Regulatory Office, ATTN: HSMC-GCI, AMEDD Center & School, Fort Sam Houston, TX 78234-6125

SUBJECT: Records of Human Radiation Research Search

1. Reference memorandum dated 26 January 1994.

2. A records review of Radiation Oncology Service was completed on 23 February 1994. This review did not reveal any information regarding Human Radiation Research not further identified in the protocol data. A visit to the record archives also did not reveal any pertinent information regarding this topic.

3. A thorough review of the protocol data base furnished by Department of Clinical Investigation, CPT Rebert was made by the Chief, Radiation Oncology. Studies involving radiation therapy were so designated.

4. The POC is Carol Boback, 433-6601.

MARIANNE M. YOUNG
Major, MC
Chief, Radiation Oncology Service

ARM1.941221.007ce

DEPARTMENT OF THE ARMY
Headquarters, Tripler Army Medical Center
Tripler AMC, Hawaii 96859-5000

HSHK-XOA 24 February 1994

MEMORANDUM THRU MNR 2/28/94

Chief, Biochemistry Section, Department of Clinical Investigation, ATTN: HSHK-CI, Tripler Army Medical Center, Tripler AMC, HI 96859-5000

Chief, Department of Clinical Investigation, ATTN: HSHK-CI, Tripler Army Medical Center, Tripler AMC, HI 96859-5000

FOR Chief, Clinical Investigation Regulatory Office, ATTN: HSMC-GCI, AMEDD Center & School, Fort Sam Houston, TX 78234-6125

SUBJECT: Records of Human Radiation Research Search

1. I have reviewed records within the hospital headquarters on 7-11 Feb 93 and have not found any information regarding Human Radiation Research.

2. POC is the undersigned, (808) 433-5065.

KEVIN W. WERTHMANN
CPT, MS
Headquarters Administrator

ARM1.941221.007cf

DEPARTMENT OF THE ARMY
HEADQUARTERS, TRIPLER ARMY MEDICAL CENTER
TRIPLER AMC, HAWAII 96859-5000

REPLY TO ATTENTION OF

HSHK-PO (40-38a) 22 February 1994

MEMORANDUM THRU

Chief, Biochemistry Section, Department of Clinical Investigation, ATTN: HSHK-CI, Tripler Army Medical Center, Tripler AMC, HI 96859-5000

Chief, Department of Clinical Investigation, ATTN: HSHK-CI, Tripler Army Medical Center, Tripler AMC, HI 96859-5000

FOR Chief, Clinical Investigation Regulatory Office, ATTN: HSMC-GCI, AMEDD Center & School, Fort Sam Houston, TX 78234-6125

SUBJECT: Records of Human Radiation Research

1. Reference memorandum AMEDD C&S, HSMC-GCI, dated 24 January 1994, SAB.

2. I have reviewed the Tripler Army Medical Center (TAMC) Annual Historical Reports for the years 1947 - 1993. I have found no information regarding Human Radiation Research. Historical Reports for the years prior to 1947 are no longer maintained at TAMC. They were transferred to US Army, Hawaii in the early 1950's, apparently as part of a records consolidation program.

3. The Annual Report is an edited version of feeder material from the various departments of the medical center. The average length of the edited reports is 80 pages. Each page in each report was scanned for the requested information. If an item of interest was surfaced in the edited report, the feeder material was reviewed for details.

4. Two items of interest were found.

a. In the 1973 report, an entry referred to the Pacific nuclear program (See paragraph 1b, first sentence, enclosure 1). A detailed review of material for 1973 and 1974 turned up no additional reference to the project.

b. In the 1976 report, reference is made to a Defense Nuclear Agency CONPLAN 1-76, "Cleanup of Enewetak Atoll, Marshall Islands" (See paragraph 3, enclosure 2). No further data was uncovered on this subject.

HSHK-PO
SUBJECT: Records of Human Radiation Research

5. Point of contact is the undersigned, DSN 433-3133.

2 Encls

ALONZO H. ROBINSON
DAC, GS-13
Historian

TRIPLER ARMY MEDICAL CENTER, CY 1973

1. Mission.

a. The mission of Tripler Army Medical Center (TAMC) did not change significantly during Calendar Year 1973. The mission continues to be unique, with TAMC being the only federal hospital in the Mid-Pacific Area. The population served includes all beneficiaries of the federal health services system, including all military departments, the Veterans Administration and the United States Trust Territories in the Pacific. Population served in the State of Hawaii is approximately 236,000. Backup hospitalization and specialty consultation service is provided for hospitals further west in the Pacific.

b. Unusual mission assignments during the year included providing a physician in support of a nuclear evaluation and cleanup project on Eniwetok Atoll, and support of a project involving demilitarization of chemical munitions on Johnston Atoll. The manned spacecraft program was supported by maintaining standby teams and facilities at TAMC. During the SKYLAB III mission, when the orbiting laboratory was experiencing difficulty, a surgeon, an anesthesiologist and an operating room technician from TAMC boarded the recovery ship, the USS NEW ORLEANS, at Pearl Harbor and sailed on three separate missions in the Mid-Pacific Area to support a possible early splashdown. TAMC was a designated treatment facility for Operation Homecoming. On two occasions, TAMC provided essential medical care for returnees who became acutely ill while enroute to CONUS from Clark AFB. In both instances, these returnees remained at TAMC for less than 24 hours. TAMC provided complete Phase III medical care processing for three U. S. Army returnees. These three returnees completed their processing and medical care and were reassigned or discharged from the Army.

2. Organization. During the calendar year, a Race Relations/Equal Opportunity Officer was added to the Special Staff. A Family Practice Center was added as a professional service element, with the goal of establishing a family practice residency training program by 1 July 1974. The Force Development Division (formerly

ENCL 1

EDUCATION AND TRAINING

1. TAMC participated as Director of Health Services representative in Pole Vault 76, a JCS world-wide communications exercise in early March 1976. CINCPAC ground rules required that participants of component headquarters be present in the Emergency Action Center of the unified command's headquarters. Procedures employed were those contained in JCS publications and Pole Vault 76 scenario.

2. Members of the command participated in a mass casualty exercise on 1 Dec 76. Support was provided by Commander, 25th Infantry Division, and Commander, USASCH. Interisland overwater evacuation of casualties simulating the employment of Joint Recovery Control Center resources proved to be informative and stimulating for all concerned. At TAMC, the staff was provided multi-phased training: First, Participating in unit SOP actions in the morning; second, attending a showing of a 15-minute videotape titled, "Medical Service in the Theater of Operations," in the main hospital conference room; and third, making an orientation visit of the 25th Infantry Division Medical Battalion clearing station located on the TAMC softball field. Under this format, the quarterly Military Medicine Conference and the semi-annual disaster drill for accreditation were combined to eliminate lost time inherent in two separate affairs.

3. Defense Nuclear Agency CONPLAN 1-76 (Enewetak). Defense Nuclear Agency CONPLAN 1-76, revised 15 Sep 76, "Cleanup of Enewetak Atoll, Marshall Islands," was received. Staffing of this FCDNA CONPLAN 1-76 was at DA level and presumably involves OTSG and HQ HSC. Informal coordination between US Army CINCPAC Support Group and DA indicates FORSCOM may be tasked Army proponency for implementation with D-Day estimated as mid-1977. As written, on-site medical support for this 2-1/2 year project is to be provided by the Air Force. Backup support facilities are the hospital at Kwajalein and Tripler Army Medical Center, to include veterinary services and medical resupply.

4. Family Practice Service

a. Extensive planning was conducted, especially during early 1976, to further develop the Family Practice core curriculum and to develop a basic Behavioral Science curriculum.

(1) In July 1976, a 30-hour concentrated introductory course in Behavioral Science was presented to Family Practice residents and faculty physicians, using consultants from the University of Hawaii School of Medicine, Department of Psychiatry.

Encl 2

DEPARTMENT OF THE ARMY
HEADQUARTERS, TRIPLER ARMY MEDICAL CENTER
TRIPLER AMC, HAWAII 96859-5000

AFSHK-PM (40-38a) 10 Feb 1994

MEMORANDUM FOR Chief, Department of Clinical Investigation

SUBJECT: Records of Human Radiation Research Search

1. Reference your memorandum, SAB, dated 26 January 1994.

2. A negative report is submitted for Tripler Army Medical Center after a historical review of the files available and discussions with long time employees at this center.

Donald E. Devaney
DONALD E. DEVANEY
Alternate Historian

ARM1.941221.007ch

DEPARTMENT OF THE ARMY

HEADQUARTERS, TRIPLER ARMY MEDICAL CENTER
TRIPLER AMC, HAWAII 96859-5000

REPLY TO ATTN OF
HSHK-IO (360-5)

15 FEB 94

MEMORANDUM THRU

Chief, Biochemistry Section, Department of Clinical Investigation, ATTN: HSHK-CI, Tripler Army Medical Center, Tripler AMC, HI 96859-5000

Chief, Department of Clinical Investigation, ATTN: HSHK-CI, Tripler Army Medical Center, Tripler AMC, HI 96859-5000

FOR Chief, Clinical Investigation Regulatory Office, ATTN: HSMC-GCI, AMEDD Center & School, Fort Sam Houston, TX 78234-6125

SUBJECT: Records of Human Radiation Research Search

1. I have reviewed our records on 14 and 15 Feb. 94. I have found no information regarding Human Radiation Research. My source of information are

a. "Caducean," the in-house Tripler newspaper (12 Jan 52 thru 19 Dec 74). There are no earlier copies of the newspaper available.

b. Public Affairs news clipping files (1944-1974). These clippings are from "The Honolulu Advertiser" and "The Honolulu Star-Bulletin."

GEORGE A. VIDIS
Public Affairs Officer

APR 77

(80)

TITLE: Indium-111 Bleomycin in the Diagnosis of Tumors

PROJECT NO.: 19/77 - Ongoing

INVESTIGATORS: LTC Bruce A. Mazat, MC, Dept of Radiology
MAJ Richard E. Stotler, MSC, Pharmacy Svc
MAJ Anna K. Chacko, MC, Nuclear Medicine Svc

FUNDING: FY 77 - none; FY 78 - none

OBJECTIVES: To evaluate the clinical efficacy of Indium-111 Bleomycin in the diagnosis of tumors.

TECHNICAL APPROACH: Indium-111 Bleomycin has been studied for several years and is considered by many authors to be a valuable tumor imaging agent. We intend to utilize this agent primarily in evaluating sarcomas and adenocarcinomas as opposed to lymphomas. We will utilize basically the same techniques as we have in the Gallium-67 Citrate study.

PROGRESS: The protocol is pending approval by OTSG.

ARM1.941221.007db

Detail Summary Sheet

Prot No: TAMC 26H93 Status: Ongoing

TITLE: Evaluation Of 131I-MIBG (131I-Meta-iodobenzylguanidine Sulfate) in Patients Suspected Of Having Pheochromocytoma, Paraganglioma, Neuroblastoma or Medullary Hyperplasia

Start date: Jul 93 Est Comp Date: Jul 95

Principal Investigator: LTC Calvin B. Delaplain, MC

Department/Section: Radiology/Nuclear
Facility: TAMC

Associate Investigator: MAJ Everett L. Gayle, MC

Key Words:

Funding: FY 92: FY 93: Period Review Date: 9/93
Gifts: Decision: Continue

OBJECTIVES: This agent will be used to augment the clinical diagnosis of the before mentioned disorders.

TECHNICAL APPROACH: The study requires imaging on three consecutive days after the tracer dose is given. The patient must be seen one day for the injection of 131I-MIBG and then 24, 48 and 72 hours after tracer injection, for imaging. Additional FDA approved radiopharmaceuticals may be used for scintigraphic portrayal of adjacent organs, (e.g. kidneys with 99mTc-MAG-3 or 99mTc-DTPA) at the time of imaging.

PROGRESS:No. of Subjects Enrolled - To Date: 0
During FY93: 0

We are currently awaiting FDA approval. No other actions to date.

Detail Summary Sheet

Prot No: TAMC 27H93 Status: Ongoing

TITLE: In-CYT-103 as Diagnostic Imaging Agent in the Preoperative Differentiation of Benign and Malignant Mammographic Abnormalities

Start date: Jul 93 Est Comp Date: Indef

Principal Investigator: CPT Martin G. Radvany, MC

Department/Section: Radiology/
Facility: TAMC

Associate Investigator: LTC Michael D. Berndt, MS; LTC Calvin B. Delaplain, MC; MAJ Everett L. Gayle, MC; CPT Steven C. Yuill, MC; CPT Thomas Kilkenny, MC

Key Words:

Funding: FY 92: FY 93: Period Review Date: 9/93
Gifts: Decision: Continue

OBJECTIVES: This study is a non-randomized trial in which patients with suspicious findings on screening mammograms will be referred to the nuclear medicine department for an imaging study utilizing OncoScint.

TECHNICAL APPROACH: The patients will receive a single infusion of the antibody and undergo imaging 48 to 72 hours after infusion. After imaging is completed, patients will undergo needle localization biopsy, within 1 month, of the suspicious mass seen on mammography. The patients may be inpatients or outpatients. Two blood studies will be performed. The first blood samples will be drawn at the beginning of the study, prior to injection to determine human antimurine antibody (HAMA) titers and pregnancy status. A second blood sample will be obtained at 4 to 6 mouths to determine HAMA development.

PROGRESS:No. of Subjects Enrolled - To Date: 0
During FY93: 0

Plan to enroll and study first patients this Oct 93.

Detail Summary Sheet

Date: 5 Jan 83	Prot No: 31/76	Status: Terminated
TITLE: Clinical Evaluation of Fluorescent Scanning of the Thyroid with Americium-241		

Start Date: 1 Aug 76	Est Comp Date:
Principal Investigator: MAJ Anna K. Chacko, MC	Facility: Tripler Army Medical Center
Dept/Sec: Dept of Radiology, Nuclear Medicine Svc	Associate Investigators:
Key Words: Fluorescent scanning Thyroid	

Accumulative MEDCASE Cost: $30,000.	Est Accumulative OMA Cost: $9,000.	Periodic Review Results: Terminated

OBJECTIVES: To determine the value of fluorescent thyroid imaging as compared with other modalities of thyroid imaging in the diagnosis and treatment of a variety of thyroid abnormalities.

TECHNICAL APPROACH: Dual studies are intended to involve both conventional thyroid scanning and fluorescent technique scanning in patients studied in the thyroid clinic at TAMC.

PROGRESS: This project is terminated as the FDA has approved this use of Americium-241.

Enc.

ARM1.941221.007de

APR 69

RESEARCH AND TECHNOLOGY RESUME	1.	2. GOVT ACCESSION	3. AGENCY ACCESSION	REPORT CONTROL SYMBOL
			DA-OC-6777	CSCRD-103

4. DATE OF RESUME	5. KIND OF RESUME	6. SECURITY RPT / WRK	7. REGRADING	8. RELEASE LIMITATION	9. LEVEL OF RESUME
06 06 68	C. Terminated	U / U	NA	NL	A. Work Unit

10a. CURRENT NUMBER/CODE	10b. PRIOR NUMBER/CODE
62156011 - 3A025601A822-00-217	None

11. TITLE: (U) Placental Localization With the Pho/Gamma Camera, Comparison of Technetium 99m and Strontium 87m

12. SCIENTIFIC OR TECH. AREA	13. START DATE	14. CRIT. COMPL. DATE	15. FUNDING AGENCY
003500 Clinical Medicine	1 Jul 69	NA	Other DA

16. PROCURE. METHOD	17. CONTRACT/GRANT a. NUMBER / b. TYPE / c. DATE / d. AMOUNT	18. RESOURCES EST.	a. PROFESSIONAL MAN-YEARS	b. FUNDS (In thousands)
C. In House	NA	PRIOR FY		
		CURRENT FY		

19. GOV'T LAB/INSTALLATION/ACTIVITY
NAME
ADDRESS Research and Development Service
US Army Tripler General Hospital
APO San Franciso 96438
RESP. INDIV. LTC R. E. ROGERS, MC
TEL. 86-8621

20. PERFORMING ORGANIZATION
NAME
ADDRESS Research and Development Service
US Army Tripler General Hospital
APO San Francisco 96438
INVESTIGATORS PRINCIPAL ASSOCIATE LTC R. E. ROGERS, MC
LTC J. M. EARLL, MC
TEL 86-8621 TYPE DA

21. TECHNOLOGY UTILIZATION
Medicine

22. COORDINATION
NA

23. KEYWORDS
Placentography; Radioisotope; Technetium; Placenta previa; Placental localization

24.
(U) Technical Objective: To determine the effectiveness of Technetium 99m labeled albumin in conjunction with the gamma camera or placental localization.

25.
(U) Approach: All patients in the last half of the second trimester and in the third trimester of pregnancy presenting with signs and symptoms of placenta previa will be investigated through the use of radioisotope photo scanning using Technetium 99m labeled albumin. Those patients in which placenta previa can be positively ruled out through the use of isotope technique will be managed expectatly. Those patients in whom placenta previa is suggested by the use of the isotope technique will be further investigated by the use of retrograde arterial placentography by use of the method which is currently in use at Tripler General Hospital. Placental localization will be documented at the time of delivery either by manual exploration of the uterus or observation of the placenta at the time of cesarean section.

26. (U) Progress: This project is terminated due to the inability to obtain AEC licensure and the rotation of the principal investigators.

27. COMMUNICATIONS SECURITY	28.	29. OSD CODE	30. BUDGET CODE
☐ a. COMSEC OR COMSEC RELATED ☒ b. NOT RELATED		BR	1

31. MISSION OBJECTIVE	32. PARTICIPATION
NA	NA

33. REQUESTING AGENCY	34. SPECIAL EQUIPMENT

35. EST. FUNDS (In thousands) CFY 69	36.

DD FORM 1 AUG 64 1498 A (Items 1 to 26 identical to NASA Form 1122)

G

HSMH-DCI 28 February 1994

MEMORANDUM THRU Commander, William Beaumont Army Medical Center, El Paso, TX 79920

FOR Chief, Clinical Investigation Regulatory Office, AMEDD Center and School, Fort Sam Houston, TX 78234-6200

SUBJECT: Summary Report, Human Radiation Research

1. References:

a. Memorandum, AMEDDC&S, HSMC-GCI, 26 January 1994, subject: Human Radiation Research

b. Memorandum, AMEDDC&S, HSMC-GCI, 16 February 1994, subject: Human Radiation Research

2. This report details the findings of a record review investigation in accordance with Encl 2-1, Minimum Procedures for Identifying Human Experiments Involving Exposure to Ionizing Radiation. The Project Officer reviewed available records from William Beaumont Army Medical Center from the period 1944 - 1979. All data in this report were recovered either from the Department of Clinical Investigation annual reports, or from the Annual Historical reports from William Beaumont Army Medical Center.

3. I have listed 19 protocols incorporating ionizing radiation on human subjects performed at WBAMC during the period of interest. All except one involved radioactive pharmaceuticals. All except one was deemed to be SE by the Health Physics Officer, and no determination could be made on that protocol as the specific compounds were not listed in the review documents.

4. The actions taken by the Project Officer included:

a. Reading the WBAMC Annual Historical Reports for the years 1944-1950, 1952, 1961, 1963-67, 1977-79. No other annual reports could be found. The Annual Historical Reports added no information for this report.

b. announcing the intent and progress of the investigation at the WBAMC Administrative Staff meeting on 14 February 1994. Personnel with information were requested to contact me. No contacts were made.

c. reviewing the Department of Clinical Investigation Annual Reports with LTC Albert Moreno, C, Nuclear Medicine, WBAMC and CPT Frederick

Scudiery, Health Physics Officer, WBAMC. Memoranda submitted by each is included. This review seemed to establish the fact that most research involving ionizing radiation was done on newly-approved radiopharmaceuticals, or soon-to-be approved radiopharmaceuticals. The Department of Clinical Investigation has no patient records, consent forms or extensive documentation on the listed research projects. I assume that these records have been maintained by the Principle Investigators. Further information, if needed, can be obtained from Dr. Martin Nusynowitz, who was an investigator in most of these protocols. He currently lives in Houston, Texas.

WILLIAM F. NAUSCHUETZ
MAJ, MS
Project Officer, Human Radiation Research

Radiopharmaceutical Studies

	Year, Title	OG	SE		
1966	Parathyroid Reserves In ^{131}I Treated patients	NO	YES		
1969	The Use of RISA Blood Volume Determination to Determine Red Cell Volume (44)	NO	YES		sick: –
1970	Mottling on the Colloidal Radiogold Liver Scan	NO	YES		–
1972	Fluorine-18 on the Diagnosis of Bone Disease	NO	YES		
	Evaluation of Hemolyzing Agents on Bacteria in Septicemia	NO	YES		–
1973	^{99m}Tc Polyphosphate In the Diagnosis of Bone Disease In Patients	NO	YES		
1974	Gallium-67 Citrate In the Diagnosis of Soft Tissue Tumors	NO	YES	✓	
	Blood Pool Imaging with Indium 111 Chloride	NO	YES	✓	
	Clinical Evaluation of Cisternography Utilizing Indium-111 DTPA	NO	YES	✓	
1975	Diagnostic Adrenal Scanning with ^{131}I Iodocholesterol	NO	YES	✓	
	^{99m}Tc-Sn-DTPA Chelate In the Detection of Vesicoureteral Reflux	NO	YES	✓	
1976	^{99m}Tc Pyrophosphate Bone Scanning Agents In the Diagnosis and Assessment of Myocardial Infarction	NO	YES		
	Diagnostic Adrenal Scanning with ^{131}I (NP59)	NO	YES	✓	
	Early Detection of Fatigue Fracture by Bone Scanning with Tc99 Bone Scan Agents	NO	YES		
1977	Myocardial Perfusion Scanning with Radioactive Particles	NO	YES	✓	–
	Thallium 201 Chloride for Diagnosis of Myocardial Ischemia and/or Myocardial Infarction	NO	YES		
	Radionuclide Angiocardiography Evaluation of Cardiopulmonary Functions Using a Mobile Dual Cardiac Probe	NO	ND	✓	–

1979	Adjuvant Therapy of Soft Tissue Sarcoma with Radiation Therapy and Chemotherapy	YES	YES	✓

External Radiation

1975	^{125}I Bone Scan Densitometry in the Hyperthyroid State	NO	YES	✓

DEPARTMENT OF THE ARMY
WILLIAM BEAUMONT ARMY MEDICAL CENTER
EL PASO, TEXAS 79920-5001

ARM1.941221.008c

REPLY TO
ATTENTION OF:

HSHP-MED

3 March 1994

MEMORANDUM FOR Project Officer, Human Radiation Research

SUBJECT: Review of Human Research Radiation Records

I have reviewed records of human radiation protocols from the period 1944-1979 with the Project Officer. All protocols seem to have been appropriate for the purposes listed in the annual reports. In fact, most of the radiation protocols were preliminary efficacy studies of procedures which either have been, or are currently, used.

ALBERT MORENO
LTC, MC
Chief, Nuclear Medicine

TEL :

DEPARTMENT OF THE ARMY
WILLIAM BEAUMONT ARMY MEDICAL CENTER
EL PASO, TEXAS 79920-5001

ARM1.941221.008d

REPLY TO
ATTENTION OF:

HSHP-PMS-RP

1 March 1994

MEMORANDUM FOR Project Officer, Human Radiation Research

SUBJECT: Review of Human Research Radiation Records

I have reviewed records of human radiation from the period 1944-1979 protocols with the Project Officer. I feel that all were safe and effective. However, I am unsure as to the status of ^{18}Fl during 1972. Also, Protocol 77/16 did not list radionuclides used in the research in the document I reviewed. No determination could be made on that protocol.

Frederick M. Scudiery

FREDERICK M. SCUDIERY
CPT, MS
C, Health Physics

SOURCE: WBAMC CI ANNUAL REPORTS

1967
a) Parathyroid Reserve in ^{131}Iodine Treated Patients.
b) The Active Transport of ^{131}Iodine by Choroid Plexus by Offspring of Vitamin A Deficient Rabbit

1968
1967 b still active.

1969
The use of RISA Blood Volume Determination to Determine Red Cell Volume.

1970
Calibration of 99m Technetium.

1971 none

1972
a) Radioimmunoassay of ACTH
b) Fluorine-18 in the Diagnosis of Bone Disease in Patients.
c) Physical Performance Characteristics of the Nuclear Chicago Pho Gamma H.P. Imaging Syst

1973
a) 1972 b still active.
b) ^{99m}Tc Polyphosphate in the Diagnosis of Bone Disease

1974

a) 1973 b) still active.
b) Blood pool Imaging with Indium 111 chloride.
c) Gallium-67 Citrate in the Diagnosis of Soft Tissue Tumors:
d) Clinical Evaluation of Cisternography Utilizing Indium-111 DTPA

1975

a) 1973 b) still active.
b) 1974 c) still active.
c) 1974 d) still active.
d) ^{125}I Bone Densitometry in the Hyperthyroid State.
e) Diagnostic Adrenal Scanning with ^{131}I-Iodocholesterol
f) ^{99m}Tc-Sn-DPTA Chelate in the Detection of Vesicoureteral Reflux

1976

a) 1975 d) still active.
b) 1975 e) still active.
c) 1975 f) still active.
d) Mechanisms Involved in the Formation of ^{99m}Tc labeled Diphosphonate & Pyrophosphonate as Bone Scanning Agents.
e) 99m Tc Pyrophospate Bone Scanning Agents in the Diagnosis and Assessment of Myocardial Infarction
f) 1975 e) still active.
g) Early Detection of Fatigue Fracture by Bone Scanning with Tc 99 Bone Scan Agents.

1977

1975 a) still act e.

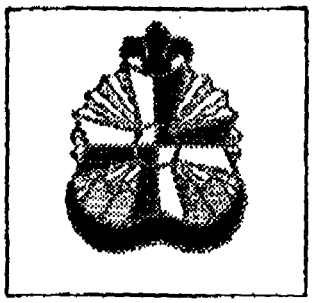
1975 f) still active.

1976 d) still active.

[redacted]

ARM1.941221.008f

FAX Transmittal From :



MAJ William F. Nauschuetz, Ph.D.
Chief, Infectious Disease Research Laboratory and
Assistant Chief, Department of Clinical Investigation
Dept. of Clinical Investigation
William Beaumont Army Medical Center
El Paso, Texas 79920

(915) 569-2233/1060
FAX: (915) 569-1500

Message For:

MAJ John Grabenstein
USA Medical Dept Center and School
CIRO
FAX (210) 554-4756

John,

The data you requested:
1969 RISA used ^{51}Cr ✗
1970 radiogold: unknown, and protocol is not on file ✗
1972 bacterial protocol was discontinued before being started
1977 myocardial perfusion used ^{99m}Tc and ^{131}I ✗
1977 angiocardiography is unknown, and protocol is not on file

For the 1969 RBC volume, all patients had elevated RBC volume via crit (so, no healthy patients were used)

Let me know what else I can do.....Bill

H

Department of Medicine (continued) PAGE

1502 ALGB Protocol #7011, Intensive 6-Mercaptopurine Therapy with Vincristine and Prednisone Inducer Dosing in Previously Treated Acute Lymphocytic Leukemia of Childhood. (FY-71) (T). 109

1503 ALGB Protocol #7122, Comparison of Intermittent Cytosine Arabinoside Plus Cyclophosphamide with Cytosine Arabinoside Plus Daunorubicin in Induction and Maintenance of Untreated Acute Myelocytic Leukemia. (FY-72) (O). 110

1504 ALGB Protocol #7112, Treatment of Recurrent Childhood Acute Lymphocytic Leukemia: Vincristine/Prednisone/Cyclophosphamide/L-Asparaginase Induction Followed by Cytosine Arabinoside/BCNU/Cyclophosphamide. (FY-71) (O). 110

1505 ALGB Protocol #6801, Combination of Prednisone, Vincristine, and Rubidomycin (Daunomycin) in the Treatment of Acute Lymphoblastic Leukemia (Reinduction Regimen). (FY-68) (O). 111

1506 ALGB Protocol #6801S, Combination of L-Asparaginase, Prednisone, Vincristine and Daunorubincin in the Treatment of Acute Lymphoblastic Leukemia-Reinduction Regimen. (FY-69) (O). 112

1507 ALGB Protocol #7201, Combination Chemotherapy of Acute Myelocytic Leukemia (All Ages) with Two Dose Levels of Arabinosyl-Cytosine (Ara-C) + Thioguanine (TG). (FY-71) (O). 112

1508 ALGB Protocol #7121, Comparison of Intermittent Cytosine Arabinoside Plus Thioguanine with Cytosine Arabinoside Plus CCNU [1, (2-chloroethyl)3-cyclohexyl-1-nitrosourea] in Induction and Maintenance of Untreated Acute Myelocytic Leukemia. (FY-71) (O). 113

1509 ALGB Protocol #7131, Hydroxyurea, 6-Mercaptopurine, and Dexamethasone in the Treatment of Blastic Phase of Chronic Granulocytic Leukemia. (FY-72) (O). 113

1510 ALGB Protocol #7051, The Treatment of Lymphosarcoma and Reticulum Cell Sarcoma. (FY-70) (O). 114

1511 ALGB Protocol #6604, Intensive Radiotherapy --Chemotherapy Study of Generalized Hodgkin's Disease. (FY-67) (O). 114

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Department of Medicine (continued) PAGE

1512 ALGB Protocol #6951, Combination Chemotherapy of Generalized Hodgkin's Disease. (FY-69) (O). 115

1513 ALGB Protocol #7141, Adriamycin in the Treatment of Malignant Solid Tumors of Childhood. (FY-71) (O). 116

1514 ALGB Protocol #7181, Adriamycin (NSC #123, 127) and Amputation in Primary Osteogenic Sarcoma. (FY-72) (O). 116

1515 ALGB Protocol #7161, Comparison of Prednisone Plus Oral L-Phenylalanine Mustard, Intravenous L-Phenylalanine Mustard and Intravenous L-Phenylalanine Mustard Plus BCNU for Multiple Myeloma. (FY-71) (O). 117

1516 ALGB Protocol #7291, Intergroup Rhabdomyosarcoma Study. Role of Post Operative Radiotherapy and Combinations of Dactinomycin, Vincristine, Cyclophosphamide, and Adriamycin in Childhood Rhabdomyosarcoma. (FY-73) (O). 118

1521 ALGB Protocol #7261, Comparison of Combined Triple Alkylating Agents (L-Phenylalanine Mustard - NSC #8806, Cyclophosphamide-NSC #26271, BCNU (1,3,-bis-(2-chloroethyl)1-nitrosourea- NSC #409962) Plus Prednisone with Single Alkylating Agent (L-Phenylalanine Mustard) Plus Prednisone for Multiple Myeloma - A Phase III Study. (FY-73) (O). 117

1522 ALGB Protocol #7283, The Treatment of Small Cell Carcinoma of the Lung. Combination Chemotherapy Plus Radiation Therapy with and without Prophylactic Whole Brain Radiation. A Comparison of Cyclophosphamide (NSC #2627), Vincristine (NSC #67574), and Methotrexate (NSC #740) Versus Cyclophosphamide - A Phase III Study. (FY-73) (O). 118

1525 ALGB Protocol #7299, Intergroup Ewing's Sarcoma Study. Clinical Trial of Radiotherapy and Chemotherapy in Managing Non-metastatic Ewing's Sarcoma. (FY-73) (O). 118

1526 ALGB Protocol #7341, Ifosfamide (NSC #109724) N-(2-chloroethyl) $-N^1$(-2-chloroethyl)-N^1-0-propylene Phosphate Diamide in the Treatment of Disseminated (Stage IV) Neuroblastoma. A Phase II-III Study. (FY-73) (O). 119

(2)

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	Department of Medicine (continued)	PAGE
1611	WRAMC Protocol #7103, Comparison of Radiation Therapy Plus Chemotherapy in Localized Bronchogenic Carcinoma. (FY-71) (T).	130
1612	WRGH Protocol #7108, Study of the Use of Gallium 67 Citrate to Localize Lymphomas. (FY-72) (T).	125
1613	WRGH Protocol #7203, Study of Non-Absorbable Antibiotics as a Means of Reducing Infection in Leukopenic Patients. (FY-72) (T).	124
1614	WRAMC Protocol #7109, Comparison of Actinomycin-D vs Bleomycin, Adriamycin, and Actinomycin-D in Hodgkin's Disease and Lymphomas. (FY-73) (O).	125
1615	WRAMC Protocol #7107, Comparison of Bleomycin and Adriamycin vs Bleomycin, Adriamycin, & 5-FU in Squamous Cell Carcinoma. (FY-73) (O).	126
1616	WRAMC Protocol #7202, Use of Streptozotocin in Hodgkin's Disease, Lymphosarcoma, Reticulum Cell Sarcoma, and Solid Tumors. (FY-72) (O).	125
1617	WRAMC Protocol #7105, Phase II Study of the Combined Use of Bleomycin and Adriamycin in the Treatment of Adult Malignancies. (FY-73) (O).	126
1619	WRGH Protocol #7201, Study to Evaluate the Efficacy of New Combinations of Chemotherapeutic Agents Against Metastatic Breast Carcinoma. (FY-72) (T).	125
1621	WRGH Protocol #7208, Phase II Study, 5-Azacytidine in Acute Leukemia. (FY-73) (O).	127
1622	Authorization for Non-Protocol Use of Bleomycin. (FY-73) (O).	128
1623	Administration of Adriamycin. (FY-73) (T).	128
1801	The Use of Vitamin A Acid as an Investigation Drug in Clinical Trial. (FY-71) (T).	131
1901	Studies on Infectious Mononucleosis. (FY-72) (T).	132

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Department of Surgery

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DEPARTMENT OF THE ARMY
WALTER REED ARMY MEDICAL CENTER
WASHINGTON, DC 20307-5001

REPLY TO ATTENTION OF:

HSHL-CI(40-38) 14 January 1994

MEMORANDUM FOR Chief, Clinical Investigation Regulatory Office, AMEDDC&S, HSMC GCI, Ft. Sam Houston, TX 78234-6125

SUBJECT: Request for Records of Human Research

1. Reference memorandum dated 11 January 1994, enclosed please find the requested information.

2. The listings are taken from the Annual Progress Report located in the WRAMC library.

3. Consent forms are stored with the PI for a period of 5 years.

4. Review of ongoing protocols which had high risk was done periodically by DCI. Compliance was ascertained in all protocols. No problems were found. We at DCI thinks that the investigators comply with our regulations in filing and keeping the informed consent forms.

1 Encl
as

GEORGE C. TSOKOS
MAJ, MC
Asst Chief
Dept of Clinical Investigation

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4141 A Randomized Study of Adriamycin as an Adjuvant after Surgery and Radiation Therapy in Patients with High Risk Endometrial Carcinoma Stage I and Occult Stage II (FY-78 C). 415

DEPARTMENT OF RADIOLOGY

Nuclear Medicine Service

4501 Clinical Evaluation of Fluorescence Scanning of the Thyroid with an Americium 241 Source (FY-73 PO). 416

4502 Plasma Angiotension Levels and Response to Anti-hypertensive Therapy in Essential Hypertension (FY-73 C). 417

4514 Clinical Evaluation of Indium-III DTPA (FY-75 O). 418

4515 Broad Clinical Evaluation of ^{99m}Technetium Labelled Stannous Glucoheptonoate as a Diagnostic Agent for Studying the Kidney (FY-75 C). 419

4518 Clinical Evaluation of ^{99m}Technetium Electrolytically Labelled Human Serum Albumin for Injection 99mTc(E) HSA (FY-76 C). 420

(18)

DEPARTMENT OF THE ARMY
WOMACK ARMY MEDICAL CENTER
FORT BRAGG, NORTH CAROLINA 28307-5000

REPLY TO
ATTENTION OF:

HSXC-FM (40-38a) 1 March 1994

MEMORANDUM FOR Chief, Clinical Investigation Regulatory Office, AMEDD Center & School, Fort Sam Houston, TX 78234

SUBJECT: Human Radiation Research at Womack Army Medical Center, 1944-1974

1. At the direction of the Chief, Clinical Investigation Regulatory Office, I conducted a search for any evidence of Human Subject Research involving ionizing radiation during the period 1944-1974. This document details the actions that I took and the persons that I contacted as I searched thoroughly for any evidence of this research.

2. The following offices were contacted, with the POC and results as follows:

a. I reviewed the hospital historical files for any evidence of radiation research. My review confirms the Adjutant's report (1LT Walters) that there are no annual reports present in the hospital files prior to 1981. Similarly, there is no evidence of organized research activity during the period in question.

b. The publications section was contacted. Mr. McAllister has no record of hospital historical reports, annual reports or research studies retired through the publications section.

c. Plans, Training, Mobilization and Security for Womack Army Medical Center (LTC Kirchmar) has no record of historical or annual reports for the hospital prior to 1981.

d. The Radiation Protection Office (CPT Dudevoir) has documents dating back only to 1976. There is no evidence of organized research activity involving ionizing radiation to that point.

e. All Department Chiefs were asked to look for evidence of research involving ionizing radiation. No department reported evidence of such research for the period in question.

f. The hospital Public Affairs Officer (Mrs. Tippy) has no evidence of radiation research during the period in question. Similarly, the 18th ABN Corps Public Affairs Office (Mr. Saxton) has no evidence of research during that period.

HSXC-FM (40-38a)
SUBJECT: Human Radiation Research at Womack Army Medical Center, 1944-1974

g. The 18th ABN Corps Historian (SGT Belew) has no record of radiation research during the period in question. This was confirmed by a telephone call to the FORSCOM Historian's office.

3. To summarize, this search for the use of ionizing radiation in human subject research during the period 1944-1974 yielded no evidence of organized research activity. Because many of the records have been formally retired (or may have been lost) for that period, I cannot be absolutely certain that such research did not take place. I am, however, certain that documentation of that research does not exist within the control of Womack Army Medical Center at the present time. POC is the undersigned at (910) 432-8422/9704.

V. G. McGlaughlin

VICTOR G. McGLAUGHLIN, M.D.
MAJ, MC
Director, Clinical Investigation

ARM1 941221 011

DEPARTMENT OF THE ARMY
HEADQUARTERS UNITED STATES ARMY MEDICAL DEPARTMENT ACTIVITY
FORT BENNING, GEORGIA 31905-6100

REPLY TO ATTENTION OF

HSXB-PMH (385-11j) February 25, 1994

MEMORANDUM FOR Commander, AMEDD Center & School, ATTN: HSMC-GCI, Fort Sam Houston, Texas 78234-6125

SUBJECT: Human Radiation Research Records

1. Reference memorandum, AMEDD Center & School, HSMC-GCI, 15 February 1994, subject: Human Radiation Research.

2. We do not have any records of research involving human exposure to ionizing radiation between 1944 and the present. All ionizing radiation exposures at MACH and DENTAC have been IAW guidelines established in AR 40-5 and TB MED 521.

3. Point of contact for this action is, 1LT Orvall B. Baker, Radiation Protection Officer, USAMEDDAC, ATTN: HSXB-PMH, Fort Benning, GA, 31904-6100. Telephone numbers, DSN 784-1513, commercial 706-544-1513, or fax 706-687-2698.

Orvall B. Baker
1LT, USA
Chief, Health Physics

K

HSUD (HSMC-GCI/15 Feb 94) 1st End LTC Hicks/ad/688-3405
SUBJECT: Human Radiation Research

Commander, USA Medical Department Activity, West Point, NY
28 Feb 94

FOR Commander, USA Medical Department Center and School,
ATTN: HSMC-GCI, (COL S. Harrison) Ft Sam Houston,
TX 78234-6100

A negative report is submitted for USA MEDDAC, West Point.

FOR THE COMMANDER:

M. Hicks

MICHAEL C. HICKS
LTC, MS
Deputy Commander for Administration

ARM1.941221.012ba

DEPARTMENT OF THE ARMY
U.S. ARMY MEDICAL DEPARTMENT ACTIVITY
West Point, New York 10996-1197

REPLY TO
ATTENTION OF:
HSUD-DSS-CI

28 February 1994

MEMORANDUM FOR COL Shannon M. Harrison, Consultant to The Surgeon General for Clinical Investigation, Clinical Investigation Regulatory Office, AMEDD C&S HSMC GCI, 1608 Stanley Road, Fort Sam Houston, TX 78234-6125

SUBJECT: Human Radiation Research

1. As directed by your office regarding memorandum 26 January 1994, we have conducted at the USA MEDDAC, West Point, New York a thorough investigation for any radiation research pertaining to ionizing agents for human research from the period of 1944-1974.

2. The Chief of Radiology at Keller Army Hospital was tasked with reviewing all records regarding this time to include radiographic files and report files. A review from this office elicited no files regarding any evidence of ionizing radiation research. Because of current policy within the Army for such records storage the only active files that are kept in this installation is within the past 5 years (see enclosure 1).

3. Within the United States Military Academy, we requested assistance from the Institutional Review Office and specifically the Director of Policy Plans and Analysis. They did a thorough search of their files between 1944 and 1974 and were unable to find any evidence of radiation exposure research on human subjects for that time. This agency is in charge of extensive yearly data collection for analysis for a number of issues at the Superintendent's discretion (see enclosure 2).

4. Finally, the United States Military Academy Historian researched the Superintendent's Annual Historical Reviews from 1944-1974 and the United States Military Archives which were unproductive in indicating any human research involving ionizing radiation (see enclosure 3).

Robert A Arciero LTC

Encls (3)

ROBERT A. ARCIERO
LTC, MC
C, Clinical Investigation
C, Joint & Soft Tissue Trauma Fellowship

ARM1.941221.012bb

HSUD-HX 14 February 1994

MEMORANDUM FOR: C, Joint & Soft Tissue Trauma Fellowship

SUBJECT: Human Radiation Research

1. Reference memorandum dated 4 February 1994 concerning reports of research involving radiation exposure to humans, the radiology department at Keller Army Community Hospital has no records of any such research.

2. The following areas were checked for information:

Radiology file room	IA33
Radiologists Office	IA37
NCOIC's Office	IA16

In addition all storage areas contained within the department of Radiology were searched.

3. As a policy all patient records without a current report in the last five years are purged and destroyed. Our current active files range from 1989-1994.

4. Point of contact for this information is SFC Raraigh x4849.

Jeffrey Yngstrom M.D.
CPT, MC
C, Radiology Department

ARM1.941221.012bc

MAOR (HSUD-DSS-CI/4 Feb 94) 1st End Dr. Butler/dm/7379/2614
SUBJECT: Human Radiation Research

Director, Policy Plans & Analysis, USMA, West Point, NY 10996 18 Feb 94

FOR LTC Robert A. Arciero, C, Joint & Soft Tissue Trauma Fellowship, MEDDAC, USMA, West Point, NY 10996

1. As you requested we have searched our files for research involving radiation exposure of human subjects between 1944 and 1974. We have no records of any such research.

2. If we may be of any further assistance please let us know.

Attachments
as

PATRICK A. TOFFLER
COL, IN
Director, Policy, Plans & Analysis

Encl 2

ARM1.941221.012bd

MAAS-H 11 February 1994

MEMORANDUM FOR MEDDAC, ATTN: Jane Reddington

SUBJECT: Human Radiation Research

1. Ref: Memo HSUD-DSS-CI, dated 4 Feb 94, SAB.

2. A thorough review of the USMA Superintendent's Annual Historical Reviews from 1944-1974 found no references to research involving human exposure to ionizing radiation. That was not an unanticipated finding because if there was any involvement of Military Academy personnel in research of that type it was believed that it would have had to have been a cooperative effort with another research facility and not reported in this review.

3. A review of records in the USMA Archives has similarly been unproductive primarily because medical records are not retired to that agency.

Stephen B. Grove

DR. STEPHEN B. GROVE
USMA Historian

Encl 3

DEPARTMENT OF THE ARMY
US ARMY MEDICAL DEPARTMENT ACTIVITY
FORT MCCLELLAN, ALABAMA 36205-5083

REPLY TO
ATTENTION OF

HSXQ-DR (40-38a)

7 February 1994

MEMORANDUM FOR Commander, US Army Medical Department Center and School, ATTN: HSMC-GCI, Fort Sam Houston, Texas 76234-6100

1. Reference memorandum, HSMC-GCI, 28 January 1994, subject: Human Radiation Research.

2. There are no records or documents in the Department of Radiology relating to human ionizing.

3. The POC is the undersigned.

Laurie P. Potter

LAURIE P. POTTER
SFC, USA
NCOIC, Department of Radiology

HSXQ-IM (HSMC-GCI) (25) 1st End Ms. Thrash/DSN 865-2502
SUBJECT: Human Radiation Research

CDR, USA MEDDAC, ATTN: HSXQ-IM, FORT MCCLELLAN, ALL 36205-5083

FOR CHIEF, CLINICAL INVESTIGATION REGULATORY OFFICE, U.S. ARMY MEDICAL DEPARTMENT CENTER AND SCHOOL, ATTN: HSMC-OCI, FORT SAM HOUSTON, TX 78234-6100

1. Negative response is provided per basic memorandum.

2. The POC is Ms. Thrash, Records Management Officer, Information Management Division, USA MEDDAC, DSN 865-2134/2502 or Commercial (205) 848-2134/2502.

FOR THE COMMANDER:

TIMOTHY C. FITE
2LT, MS
Chief, Information Management Division

HSXY-PMS (HSMC-GCI/28 Jan 94) (40-38a) 1st End CPT Moser/jkj/ DSN 598-2975
SUBJECT: Human Radiation Research Summary Report

Commander, U.S. Army Aeromedical Center, Fort Rucker, AL 36362

FOR HQ, U.S. Army Medical Department Center and School, ATTN: HSMC-GCI (COL Harrison), 1608 Stanley Road, Fort Sam Houston, Texas 78234-6125.

1. References:

a. Telephone conversation between CPT Moser, this office, and MAJ Grabenstein, U.S. AMEDD, Regulatory Affairs Pharmacist, 17 Feb 94, and 25 Feb 94, subject as above (SAB).

b. Telephone conversation between CPT Moser, this office, and Ms. Webb, USAAMC historian, 11 Feb 94, 18 Feb 94, and 24 Feb 94, SAB.

c. Telephone conversation between CPT Moser, this office, and Ms. Whindham, USAAMC Information Management Division, 11 Feb 94, SAB.

d. Telephone conversation between CPT Moser, this office, and Ms. Carter, USAAMC Chief, Patient Administration, 11 Feb 94, SAB.

e. Telephone conversation between CPT Moser, this office, and SFC Forster, NCOIC, Radiology Clinic, USAAMC, 11 Feb 94, SAB.

f. Telephone conversation between CPT Moser, this office, and MAJ Jenke, Chief, Orthopedic/Urology Clinic, 15 Feb 94, SAB.

g. Local Area Network (LAN) message to Human Use Clinical Investigation Committee members, 15 Feb 94, SAB.

2. No documentation exists to verify or deny research involving human exposure to ionizing radiation between 1944 to 1987 in the U.S. Army Aeromedical Center. Annual historical reports could not be located prior to 1987.

3. Contact project officer CPT Moser, Chief, Environmental Health and Radiation Protection Officer, at DSN 558-2975 or (205) 255-2975 if you have any questions.

TOMMY MAYES
LTC, MS
Deputy Commander for Administration

ARM1.941221.013d

HSXW-PM (40-38a) 28 Feb 94

MEMORANDUM FOR HSMC-GCI (MAJ Grabenstein)

SUBJECT: Human Radiation Research

1. In response to your memo dated 15 Feb 94, I am providing the following response:

a. Project officer: CPT Cherie A. Miller, Environmental Science Officer/Collateral duty Radiation Protection Officer, MEDDAC, Redstone Arsenal, ATTN: HSXW-PM, Redstone Arsenal, AL 35809-7000, DSN 788-0144, Comm (205)842-0144, FAX: (205) 842-0141.

b. Historical reports for our organization were not available for years prior to 1992. The installation historian has no evidence of any human radiation studies based on his review of installation records and the mission and short history of Redstone Arsenal.

c. The radiologist assigned to our facility has no knowledge or records indicating any human use studies were ever conducted by the Radiology Department or other related entities.

d. The installation radiation protection officer has previously contacted all organizations operating on RSA to determine if there are records indicating human use studies. All responses were negative.

e. Radiation Protection files for our facility are available to 1988. Review of these records reveal no indicators of human use radiation studies.

f. Fox Army Community Hospital was opened in 1943 and moved into the new structure in 1978. Fox has not had services in oncology, radioimmunoassay, nuclear medicine, use of radioisotopes, or clinical investigations at any time. There is no evidence of a requirement for radiation safety committee in QI records.

2. POC is CPT Miller, DSN 788-0144.

Cherie A. Miller

CHERIE A. MILLER
CPT, MS
Environmental Science Officer

DEPARTMENT OF THE ARMY
HEADQUARTERS, US ARMY MEDICAL DEPARTMENT ACTIVITY (ALASKA)
FORT WAINWRIGHT, ALASKA 99703-7300

ARM1.941221.013e

REPLY TO ATTENTION OF:

HSUC-ZA (40-38a) 25 February 1994

MEMORANDUM FOR Chief, Clinical Investigation Regulatory Office, ATTN HSMC-GCI, 1608 Stanley Road, AMEDD Center & School, Fort Sam Houston, TX 78234-6125

SUBJECT: Human Radiation Research

1. Reference your memos dated 28 Jan 94 and 15 Feb 94, subject as above.

2. Medical facilities at the present Fort Wainwright were under the jurisdiction of the Army Air Corps, Ladd Field, from inception of the base in 1940 until formation of the USAF in 1948. Between then and transfer of the hospital from Ladd AFB to the US Army's jurisdiction in 1961 the medical facility belonged to the USAF. No records exist from that period.

3. The IMO/Adjutant office and PAD have been checked for any records of research involving human exposure to ionizing radiation. Not only have no such records been found, but there is no evidence that formal medical research of any sort has been carried out at any time at this small MEDDAC. As a consequence no human use committee exists, although one would be convened if any member of the medical staff proposed to carry out medical research.

4. In the absence of clinical investigation there is no project officer.

DAVID B. GIFFORD
COL, MC
Commanding

DEPARTMENT OF THE ARMY
UNITED STATES ARMY HEALTH CLINIC
YUMA PROVING GROUND, YUMA, ARIZONA 85365-9106

REPLY TO
ATTENTION OF

ARM1.941221.013f

HSXJ-YC

28 February 1994

MEMORANDUM FOR Chief, Clinical Investigation Regulatory Office, HSMC-GCI, Consultant to the Surgeon General for Clinical Investigation, U.S. Army Medical Department Center and School, Fort Sam Houston, TX 768234-6100

SUBJECT: Human Radiation Research

1. In accordance with your memorandum of 15 February 1994, a negative response is hereby submitted. There has not been any research done on any human subjects in the field of radiation at the U.S. Army Health Clinic, Yuma Proving Ground.

2. POC at this facility is Mr. Jerry A. Papin, Industrial Hygienist, DSN 899-2201, commercial (602) 328-2201, or fax DSN 899-3197.

TIMOTHY A. MAREAN
CPT, MC
Acting Director
Health Services

DEPARTMENT OF THE ARMY

HEADQUARTERS
U.S. ARMY MEDICAL DEPARTMENT ACTIVITY (MEDDAC) FORT IRWIN
FORT IRWIN, CALIFORNIA 92310-5065

REPLY TO
ATTENTION OF

ARM1.941221.013g

HSXK-SO (385) 28 February 1994

MEMORANDUM FOR Commander, U.S. Army Medical Department Center and School, ATTN: HSMC-GCI, Fort Sam Houston, TX 78234-6100

SUBJECT: Human Radiation Research

1. Reference HSMC-GCI Letter, same subject, dated 15 February 1994.

2. To the best of our knowledge, no research involving radiation exposure of human subjects was conducted between 1944 and 1979 on Fort Irwin.

3. The information requested for the project officer is as follows:

Guy D. Chaffee, DAC
Safety Manager/Radiation Protection Officer

USA MEDDAC
HSXK-SO
Fort Irwin, CA 92310-5065

DSN 470-5166
Commercial (619) 386-5166
FAX DSN 470-5389

4. If there are any questions, please contact Mr. Chaffee at the number given in paragraph 3, above.

Michael A Noe for

ROBERT C. HARVEY
COL, MC
Commanding

DEPARTMENT OF THE ARMY

HEADQUARTERS
U.S. ARMY MEDICAL DEPARTMENT ACTIVITY (MEDDAC) FORT IRWIN
FORT IRWIN, CALIFORNIA 92310-5065

REPLY TO
ATTENTION OF

ARM1.941221.013h

HSXK-IM (40-38a) 25 February 1994

MEMORANDUM FOR Commander, U.S. Army Medical Department Center and School, ATTN: HSMC-GCI, Fort Sam Houston, TX 78234-6100

SUBJECT: Human Radiation Research

1. Reference HSMC-GCI Letter, same subject, dated 28 January 1994.

2. During 1944 and 1974, Fort Irwin was in deactivation status; therefore no research involving radiation exposure of human subjects, to the best of our knowledge, was conducted.

3. Point of contact for this action is the undersigned at DSN 470-4836 or commercial 619-386-4836, or 1Lt Bell at DSN 470-3741 or commercial 619-386-3741.

FOR THE COMMANDER:

Barbara L. Teach

BARBARA L. TEACH
Freedom of Information Act
Officer

ARM1.941221.013i

DEPARTMENT OF THE ARMY
LETTERMAN U.S. ARMY HEALTH CLINIC
PRESIDIO OF SAN FRANCISCO, CALIFORNIA 94129-6700

REPLY TO ATTENTION OF:

HSHH-DCA (40-38a) 15 March 1994

MEMORANDUM FOR Commander, U.S. Army Medical Department Center and School, ATTN: HSMC-GCI (COL Harrison), Ft. Sam Houston, TX 78234-6100

SUBJECT: Search for Records of Human Radiation Research

1. References:

a. Memorandum, AMEDD Center and School, HSMC-GCI, 28 Jan 94, subject: Human Radiation Research.

b. Memorandum, AMEDD Center and School, HSMC-GCI, 15 Feb 94, subject: Human Radiation Research.

c. Memorandum, AMEDD Center and School, HSMC-GCI, 3 Mar 94, SAB.

2. Letterman U.S. Army Health Clinic (LUSAHC) has no records which document human radiation research during the period between 1944 and 1979. During the past three years Letterman Army Medical Center (LAMC) has downsized to a hospital and finally to a clinic. Due to these closure activities, many historical records are no longer located here. The records of Clinical Investigations, Radiation Therapy, and Nuclear Medicine were either transferred or retired when these departments left Letterman. COL Pamplin, who is our BRAC Officer, was the former Chief of Clinical Investigations at LAMC. He has confirmed that LUSAHC did not maintain any Clinical Investigations' files after its closure.

3. The Nuclear Regulatory Commission (NRC) terminated LAMC's NRC license on 10 December 1993. As part of the decommissioning process, all Health Physics records pertaining to the use of ionizing radiation (IR) at LAMC/LUSAH/LUSAHC were sent to the Army Environmental Hygiene Agency (AEHA). These records are being converted to electronic storage media by AEHA for archival purposes. LAMC Radioisotope Control Committee (RCC) minutes are part of these records. According to CPT Cima (the former LAMC Radiation Protection Officer), the LAMC RCC began in 1970. These minutes would document any potential human use applications of IR at LAMC after that date.

HSHH-DCA
SUBJECT: Search for Records of Human Radiation Research

3. POC is the undersigned, DSN 586-2153.

KELLEY C. ROBERSON
LTC, MS
Deputy Commander for
Administration

ARM1.941221.013ja

DEPARTMENT OF THE ARMY
U.S. ARMY MEDICAL DEPARTMENT ACTIVITY
FORT CARSON, COLORADO 80913-5101

REPLY TO
ATTENTION OF

HSXE-RPO (HSCM-GCI/28 Jan 94) (40-38a) 1st End 1LT Kraimer/jk/DSN 691-7361
SUBJECT: Summary Report of Human Experiments Involving Exposure to Ionizing Radiation 1944-1979, Evans Army Community Hospital

Commander, USA MEDDAC, ATTN: HSXE-RPO, Fort Carson, CO 80913-5101 9 March 1994

FOR Chief, Clinical Investigation Regulatory Office, ATTN: HSMC-GCI, 1608 Stanley Road, AMEDD Center & School, Fort Sam Houston TX 78234-6125

1. A search for records pertaining to human radiation experiments was conducted IAW procedures outlined in memorandum, AMEDD Center & School, HSMC-GCI, 28 Jan 94 and 15 Feb 94, subject: Human Radiation Research.

a. 1LT Joyce Kraimer, Radiation Protection Officer was appointed Project Officer by LTC(P) Jacqueline Johnson, Chief, Public Health and Safety Department on 25 FEB 94. An extension of the suspense date (through 18 MAR) and exception to rank requirements (CPT/GS-11 or higher) was received per phone conversation with MAJ John Grabenstein, POC, Clinical Investigation Regulatory Office (25 FEB 94).

b. The Administrative Officer, 1LT Matthew Smith, was tasked to review the available annual historical reports for the period requested. The reports for that period were unavailable; were forwarded to the HSC historian, Dr. Austerman. Per telephonic instructions from MAJ Grabenstein (2 MAR 94) a memorandum to indicate record disposition was acceptable (Encl 1).

c. Dr. Cyrus Partington, senior radiologist on staff, was contacted 1 March and asked about any experiments, research that may have been done here. He indicated that no clinical investigations were done at this MTF, nor in conjunction with Fitzsimons Army Medical Center or area VA hospitals (Encl 2).

d. Statements regarding radiation experiments at Occupational Health Clinics at Fort Carson and Pueblo Army Depot were requested (Encl 3). Negative replies were received, (Encl 4 and 5).

2. In summary, no records of research and/or clinical investigations for the period 1944-1979 involving ionizing radiation were found at this facility.

FOR THE COMMANDER:

MATTHEW M. SMITH
1LT, AR
Administrative Officer

Encl
as

DEPARTMENT OF THE ARMY
U.S. ARMY MEDICAL DEPARTMENT ACTIVITY
FORT CARSON, COLORADO 80913-5101

REPLY TO
ATTENTION OF

ARM1.941221.013jb

HSXE-ADM

4 March 1994

MEMORANDUM FOR RECORD

SUBJECT: Annual Historical Reports - Evans Army Community Hospital

1. The Evans Army Community Hospital annual historical reports for the period of 1944-1979 have been forwarded to the Health Services Command Historian.

2. It is the policy of Evans Army Community Hospital to keep annual historical reports on hand for a period of five years. Therefore the only historical reports that are currently available would be for the years 1989 to 1993.

3. The POC for this memorandum is the undersigned at DSN 691-7129/7295.

FOR THE COMMANDER:

MATTHEW M. SMITH
1LT, AR
Administrative Officer

DEPARTMENT OF THE ARMY
U.S. ARMY MEDICAL DEPARTMENT ACTIVITY
FORT CARSON, COLORADO 80913-5101

REPLY TO
ATTENTION OF

HSXE-XR

2 March 1994

MEMORANDUM THRU Commander, Evans Army Community Hospital, Fort Carson, Colorado 80913-5101

FOR Chief, Clinical Investigation Regulatory Office, ATTN: HSMC-GCI, AMEDD Center & School, Fort Sam Houston, Texas 78234-6125

SUBJECT: Human Radiation Research

1. This is to verify that no clinical investigation or other research at this facility has been done since its founding.

2. Nuclear Radiology has been available at this facility since 1987. Only routine diagnostic studies and some treatments of hyperthyroidism with radioactive iodine have been performed. No research protocols or other types of research either involving injected radionuclides or radiation of any kind have been followed.

Cyrus Partington

CYRUS PARTINGTON, MS, MD, FACR
Staff Radiologist, Senior Expert

S: 10 March 1994

HSXE-PH&SD (40) 1 March 1994

MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: Identification of Human Experiments Involving Exposure to Ionizing Radiation (1944 to 1979)

1. LT Kraimer, Radiation Safety Officer, is the Project Officer for the above subject.

2. Request you provide in writing the following statement, "No human experiments involving radiation exposure were conducted at (whichever is applicable) Pueblo Army Depot/Occupational Health, Preventive Medicine Service, US Army MEDDAC, Fort Carson, CO."

3. The POC is 1LT Kraimer, ext. DSN 691-7361

Jacqueline D Johnson

JACQUELINE D. JOHNSON
LTC, AN
Chief, Public Health & Safety Department

Encl
Instructions

DISTRIBUTION:
Mr. Bilak, OIC, Pueblo OHC
CPT Creedon, C, OH/IHS

ARM1.941221.013je

SDSTE-PU-MO 3 March 1994

MEMORANDUM FOR Chief, Public Health & Safety Department

SUBJECT: Identification of Human Experiments Involving Exposure to Ionizing Radiation (1944 to 1979)

1. Case discussion with the Radiation Protection Officer, Pat Steranka, at Pueblo Depot Activity. She has reviewed all existing records which date to 1950. These records do not reflect or show evidence of human experiments conducted as to Pueblo Depot Activity.

2. Point of contact is the undersigned, ext 4176.

JOHN J. BILAK, P.A.-C
OIC Occupational Health Clinic

HSXE-PH&S-OH/IH 8 March 1994

MEMORANDUM THRU: Chief, Public Health & Safety Department

FOR: Radiation Protection Officer

Subject: Human Experiments Involving Ionizing Radiation

I have been assigned to Ft. Carson since July 1991. I have no first hand knowledge of and can find no evidence of any human experiments involving human exposure to ionizing radiation at Ft. Carson for the time period from 1944 to 1979.

Joseph F Creedon Jr.
Cpt SP
Chief, Occ Health & Ind Hygiene

s: 1 MAR 94

HSHF-HC-McP-CDR (HSMC-GCI/15 Feb 94) (40-38a) 1st End
Subject: Human Radiation Research

Commander, U.S. Army Health Services, ATTN: HSHF-HC-McP-CDR,
Fort McPherson, GA 30330-5000 23 February 1994

Chief, Clinical Investigation Regulatory Office, ATTN: HSMC-GCI,
U.S. Army Medical Department Center and School,
Fort Sam Houston TX 78234-6100

1. The project officer for this clinic is:

Joe W. Butler
LTC, MS
Deputy Commander for Administration
U.S. Army Health Clinic
Fort McPherson, GA 30330-5000
DSN: 572-2604
Commercial (404) 752-2604
FAX (DSN) 572-2191 (Com) 404-752-2191

2. For further information, please contact the undersigned.

MICHAEL K. McCAFFERY
COL, MC
Commanding

s: 15 Mar 94

HSHF-HC-McP-CDR (HSMC-GCI/4 Mar 94) (40-38a) 1st End
Subject: Search for Records of Human Radiation Research

Commander, U.S. Army Health Services, ATTN: HSHF-HC-McP-DCA,
Fort McPherson, GA 30330-5000 8 March 1994

Chief, Clinical Investigation Regulatory Office, ATTN: HSMC-GCI,
U.S. Army Medical Department Center and School,
Fort Sam Houston TX 78234-6100

1. The above subject has been discussed at the Clinic Staff Meeting, Joint Staff Meeting, with the NCOIC, Radiology, and a message sent to all clinics through E-Mail.

2. After a thorough search through files in Radiology and Headquarters, a negative response is submitted.

JOE W. BUTLER
LTC, MS
Deputy Commander for
Administration

HSUB-PAD (HSMC-GCI/15Feb94 (40-38a) 1st End MAJ Fisher/dct/DSN 870-6723
SUBJECT: Human Radiation Research

Commander, USA MEDDAC, ATTN: HSUB-PAD, Fort Stewart, Georgia 31314-5300
25 February 1994

FOR Chief, Clinical Investigation Regulatory Office, AMEDD C&S HSMC GCI,
1608 Stanley Road, Fort Sam Houston, Texas 78234-6125

1. A negative reply is submitted.

2. Point of contact is MAJ Ricky A. Fisher, DSN 870-6194, or Commercial (912) 767-6194.

FOR THE COMMANDER:

for HAROLD K. WYNN
Chief, Information
Management Division

HSUB-THC 10 March 1994

MEMORANDUM FROM Director, Tuttle Army Health Clinic, Hunter Army Airfield, Savannah, GA 31409-5180

MEMORANDUM FOR Chief, Clinical Investigation Regulatory Office, AMEDD C&S HSMC GCI, 1608 Stanley Road, Fort Sam Houston, TX 78234-6125

SUBJECT: Search for Records of Human Radiation Research

1. In response to your memorandum (SAB) dated 4 March 1994, a negative reply is submitted.

2. Point of contact is CPT McDowell-Banks, DSN 971-5551, or Commercial (912) 352-5551.

ISMAEL C. HERNANDEZ
LTC, MC
Director, TAHC

ARM1.941221.013n

DEPARTMENT OF THE ARMY
UNITED STATES ARMY HEALTH CLINIC
TRIPLER ARMY MEDICAL CENTER
SCHOFIELD BARRACKS, HAWAII 96857-5460

REPLY TO
ATTENTION OF:

HSHK-HC (40-38a)

S: 1 March 1994
22 February 1994

MEMORANDUM FOR Chief, Clinical Investigation Regulatory Office, ATTN: HSMC-GCI, USAMEDD Center and School, Fort Sam Houston, Texas 78234-6100

SUBJECT: Human Radiation Research

1. Reference memorandum, DA, USA Medical Department Center and School, HSMC-GCI, 28 Jan 94, subject as above.

2. Tripler Army Medical Center (TAMC) is coordinating response for this action for all TAMC activities, including the United States Army Health Clinic, Schofield Barracks, Hawaii. The point of contact is Captain Rebert, Department of Clinical Investigation, TAMC, 433-6709.

WILLIAM J. GRAY
Colonel, MC
Commanding

CF:
HSHK-C, TAMC

S: 15 March 1994

HSXP-RIA (HSMC-GCI/4 March 1994) (40-38a) 1st End
SUBJECT: Search for Records of Human Radiation Research

Officer-in-Charge, US Army Health Clinic, ATTN: HSXP-RIA, Rock Island, IL 61299-7240 08 MAR 1994

FOR Commander, US Army Medical Department Center and School, ATTN: HSMC-GCI (COL Harrison), Fort Sam Houston, TX 78234-6100

1. This correspondence is forwarded in response to memorandum of 4 March 1994.

2. Mrs. Susan Leuthauser, Ph.D. in Radiation Biology, was assigned as project officer. Her negative response is contained in enclosures.

3. If further information is required, feel free to contact Mrs. Leuthauser at the US Army Health Clinic, Rock Island Arsenal, (309)782-0806.

Paul D. Smith DO

Encl
nc

PAUL D. SMITH, D.O.
MAJ, MC
Officer-in-Charge
US Army Health Clinic

HSXP-RIA Mar 9, 1994

MEMORANDUM FOR RECORD

SUBJECT: Records of Human Radiation Research

1. An investigation was conducted to locate records of human radiation exposure between 1944 and 1974 at the Rock Island Arsenal U.S. Army Health Clinic.

2. Historical summaries located at the post Historical Office were reviewed. There was no record of human ionizing radiation research conducted at this Rock Island Arsenal Health Clinic (encl 1). Interviews were conducted with former employees: the clinic nurse during the years 1947 to 1979 and the clinic pharmacist during 1967 to 1977. According to these employees, there were no clinical investigations conducted on ionizing radiation using human subjects during that period. Interviews with post Radiation Protection Office also revealed no record of human radiation research conducted at the Rock Island Arsenal U.S. Army Health Clinic.

3. All efforts taken by this office yielded no records of human research exposure to ionizing radiation between 1944 and 1979 at the Rock Island Arsenal Health Clinic.

Susan Leuthauser
Industrial Hygienist

AMSMC-HO (715B) 9 Mar 94

MEMORANDUM FOR HSXP-RIA Industrial Hygienist (Susan Leuthauser)

SUBJECT: Human Radiation Research

1. In response to your request for information regarding the above subject. The AMCCOM Historical Office found no record of human radiation research being conduct at Rock Island Arsenal (RIA) Health Clinic, or RIA Industrial Laboratory between 1944 and 1974.

2. The RIA Laboratory's Radiochemistry Unit used a Cobalt 60 irradiation facility in the study of radiation effects on various Ordnance materials. No evidence of human radiation research was found in connect with this unit.

3. The AMSMC-HO POC is the undersigned.

HERBERT P. LEPORE
Command Historian

HSXP-RIA (340a) 8 Mar 1994

MEMORANDUM FOR AMSMC-HO (ATTN: Herbert LePore)

SUBJECT: Human Radiation Research

1. This U.S. Army Health Clinic received a request for information concerning records of human research exposures to ionizing radiation between 1944 and 1974. Routine clinical diagnostic and therapeutic procedures are not included in this search. This inquiry is mandated by the Secretary of Defense and has a suspense date of 15 Mar 1994.

2. This office would like to request your immediate assistance to locate such records. These include letters, memoranda, reports, logs, handwritten notes, written procedures, photographs, maps, machine readable materials and all other writings.

3. Please contact this office by 11 March even if you find no records.

5. The POC is the undersigned.

SUSAN LEUTHAUSER
Industrial Hygienist

CF:
HSXP-RIA/Bob Platt

DEPARTMENT OF THE ARMY
HAWLEY U.S. ARMY HEALTH CLINIC
BUILDING 300
FORT BENJAMIN HARRISON, INDIANA 46216-7000

REPLY TO
ATTENTION OF

HSIH-PAD

18 February 1994

MEMORANDUM FOR Chief, Clinical Investigation Regulatory Office, ATTN: HSMC-GCI, 1608 Stanley Road, AMEDD Center & School, Fort Sam Houston, TX. 78234-6125

SUBJECT: Human Radiation Research

1. The Chief of Patient Administration and the supervisor of Outpatient Records, conducted a search for records of patients involved in the Human Radiation Research program. No records were found.

2. The clinic historian, PAO, and the personnel officer were tasked to search for any information on this subject in their historical files. The hospital's historical files were searched for information dating back to 1944 through 1974 covering Human Radiation Research. No information was found on the subject.

3. The announcement was made in our staff meetings concerning this matter. I am convinced that a thorough search was made of Hawley Health Clinic's files. The result is, nothing can be found on the subject.

4. POC for this is CPT White, DSN: 699-5887 or Commercial 317-549-5887.

FOR THE COMMANDER:

Anthony E. White

ANTHONY E. WHITE
CPT, MS
Chief, Patient Administration Division

DEPARTMENT OF THE ARMY
U.S. ARMY JEFFERSON PROVING GROUND
MADISON, INDIANA 47250-5100

REPLY TO
ATTENTION OF

HSXM-PM-O-J (40-38a) 25 February 1994

MEMORANDUM FOR Chief, Clinical Investigation Regulatory Office, ATTN: HSMC-GCI, 1608 Stanley Road, AMEDD Center and School, Ft Sam Houston, TX 78234-6125

SUBJECT: Human Radiation Research

1. Reference memorandum, HSMC-GCI, dated 28 Jan 94, subject: Human Radiation Research.

2. A review of available records in this office has produced no evidence of research identified at the subject ever being conducted at this facility.

3. Contact with Administrative Officer, Records Holding, at this installation has produced no evidence of research identified at the subject ever being conducted at this installation.

4. Contact with the Radiation Protection Officer at this installation has produced no evidence of research identified at the subject ever being conducted at this installation.

5. POC for response is the undersigned at DSN 480-7330.

RONALD G. WILLIAMS
Occupational Health Nurse

CF: RPO, MEDDAC
Ft. Knox, KY

HSXM-PM-O-J (40-38a) 23 February 1994

MEMORANDUM FOR Chief, Administrative Office

SUBJECT: Human Radiation Research

IAW the attached memorandum, require a review of records now maintained in record holding area to identify any records that may relate to subject.

RONALD G. WILLIAMS
Occupational Health Nurse

STEJP-PE 1st End 23 February 1994

Per your request, a review of records has been conducted. No information pertaining to human radiation research was found.

SHARON A. KING
Chief, Administrative Services Div.

STEJP-CT-EN (40-38a) 24 February 1994

MEMORANDUM FOR Occupational Health Nurse

SUBJECT: Human Radiation Research

1. Reference memorandum, HSXM-PM-J, 23 February 1994, subject: SAB.

2. A review of records in this office has resulted in a negative response to the request. No evidence has been found of the identified research having been conducted at this facility.

3. Point of contact for this response is the undersigned at x7303.

RICHARD H. HERRING
Radiation Protection Officer

ARM1.941221.013r

DEPARTMENT OF THE ARMY
USA MEDICAL DEPARTMENT ACTIVITY
FORT RILEY, KANSAS 66442-5037

REPLY TO
ATTENTION OF

HSXX-PMS

25 February 1994

MEMORANDUM FOR CLINICAL INVESTIGATION REGULATORY OFFICE, ATTN HSMC GCI MAJ GRABENSTEIN, CDR AMEDDC&S, 1608 STANLEY ROAD, FORT SAM HOUSTON TX 78234-6125

SUBJECT: Human Radiation Research, Negative Response

1. References.

a. AR 40-5, Preventive Medicine, Oct 90.

b. Memo from COL Harrison to Cdr's dated 15 Feb 94, subj. same.

c. Memo from COL Harrison to Cdr's dated 28 Jan 94, subj. same.

2. The project officer is CPT Robert A. Donovan, 089-46-8968, until 28 Mar 94. The project officer after this date is 1LT Mark A. Ireland, 579-74-9532 at DSN 856-2678 or Comm (913) 239-2678.

3. The response for the USA MEDDAC, Ft. Riley, KS, is negative based on the following:

a. File Search, Irwin Army Community Hospital (IACH), Information Management Office (IMO), Sherry Stahl's office, Rm 2M2, Permanent Files, 870-5j, Historical Files. Files contain pictures, mission statements, general orders, maps, hospital bulletins, assumptions of commands and historical files from 1958 through 1993, except 1970, 1968, 1966, 1965 and 1964 as confirmed by Ms Micheline Fields, Chief, IMO.

b. Interview 1430, 25 Feb 94, CPT Donovan and Ms Fields: There are no other hospital historical files.

c. Telcon, 1430, 24 Feb 94, CPT Donovan and MSG William P. Shreve, NCOIC, Patient Administration Division (PAD): There are no files regarding human radiation research.

d. Interview, 1440, 25 Feb 94, CPT Donovan and SFC Mary Ellen Austin, NCOIC, Mobilization, Education, Training and Security Division (METS): There are no files regarding human radiation research.

HSXX-PMS
SUBJECT: Human Radiation Research, Negative Response

e. Interview, 0830, 23 Feb 94, CPT Donovan and Mr. Michael R. Walter, Installation Radiation Protection Officer, 1st ID, NBC: There are no files regarding subject maneuvers or human radiation research files.

f. Interview, 1452, 25 Feb 94, CPT Donovan and LTC Anita J. Schmidt, Chief Nurse, 16th MASH: There are no files regarding human radiation research.

4. POC is CPT Donovan/1LT Ireland.

FOR THE DIRECTOR OF HEALTH SERVICES:

for Donovan CPT, MS
PATRICIA E. GONZALVES
Lieutenant Colonel, AN
Chief, Preventive Medicine Service

CF:
CDR
DCCS
DCA
IMO
METS
PAD
16th MASH
RPO

HSXM-PCM-R 23 February 1994

MEMORANDUM FOR COL SHANNON HARRISON, CHIEF, CLINICAL INVESTIGATION REGULATORY OFFICE, AMEDD CENTER & SCHOOL, FT SAM HOUSTON, TX 78234-6125

SUBJECT: Report on the Investigation of Human Radiation Research at Blue Grass Army Depot

1. General History.

The Blue Grass Army Depot is composed of two facilities located about twenty-five miles apart; one near Lexington, Kentucky and the other near Richmond, Kentucky. Both facilities were constructed in the 1941-42 time period. The Lexington facility was under the command of the Signal Corps and principally involved in repair of electronic equipment. The Richmond facility was under the command of the Ordnance Corps and was principally involved in munitions storage. The two facilities came under a joint command in the 1970's. The Lexington facility is currently scheduled for closure in 1994. Each facility had a Health Clinic, staffed by one general medical officer, two to three nurses and a laboratory technician. The mission of these clinics was to provide general medical care for active duty personnel and occupational health care for depot employees. The Lexington Health Clinic was closed in November 1993.

2. Record Review.

A review of records maintained at the current Occupational Health Clinic show no evidence that this facility has ever participated in any medical research involving ionizing radiation or radio-isotopes. Ms. Betty Jo Smallwood, former Head Nurse at the Lexington Health Clinic, denies any knowledge of any such records which were maintained at that clinic before closure. Employee records are periodically reviewed by the Medical Officer as part of routine occupational health surveillance. No indication has ever been found in these records that would indicate that any employee had been involved in medical experimentation with ionizing radiation.

3. Interviews.

a. Mr. David Easter, current Depot Historian and Public Affairs Officer, was interviewed. He denied any knowledge of any records which would indicate that experimentation with ionizing radiation was conducted at this depot.

b. Ms. Georgia Noland, current clinic laboratory technician has been employed at the clinic since 1965. She denies any participation (e.g., collecting blood samples) in any medical experimentation. She also denies any knowledge of any equipment stored at the clinic which might have been used in such experimentation (e.g., scintillation counters, spectrum analyzers).

c. Mr. Patrick Riddell, current pharmacist, has been employed at the depot since 1967. He denies any knowledge of any medicines passing through the pharmacy which might be associated with medical experimentation.

d. Mr. George Cochran, current Depot Industrial Hygienist has been employed at the depot in this capacity since 1980. He denies any knowledge of any experimentation with radioactive substances.

4. Conclusion.

No evidence has been found to indicate that any human experimentation with ionizing radiation was ever done at the Blue Grass Army Depot.

JAMES L. HOWSE, JR.
MD
Medical Officer

ARM1.941221.013ta

DEPARTMENT OF THE ARMY
HEADQUARTERS, U.S. ARMY MEDICAL DEPARTMENT ACTIVITY
FORT KNOX, KENTUCKY 40121-5520

REPLY TO
ATTENTION OF:

HSXM-PM-R

23 February 1994

MEMORANDUM FOR Chief, Clinical Investigation Regulatory Office, ATTN: HSMC-GCI, 1608 Stanley Road, AMEDD Center and School, Fort Sam Houston, TX. 78234-6125

SUBJECT: Human Radiation Research

1. General History.

In 1934, the Shoemaker Annex served as the Post Hospital until 1940 when a 1000 bed wooden mobilization hospital was constructed. An additional section was completed in 1941 bringing the wartime capacity to 2400 beds. This particular Fort Knox Hospital provided medical care, not only for Fort Knox personnel, but patients from other military hospitals, including patients evacuated from overseas. This hospital continued to operate from this building until 1957. In April of 1957, a 500 hundred bed Hospital named Ireland Army Community Hospital (IACH) was dedicated. Eventually the IACH was finally completed in 1980.

2. Record Review.

a. The Radiation Protection Officer (RPO), USA MEDDAC, Fort Knox, KY conducted a search for records involving human radiation research. The RPO discussed this matter with Mr. Rolfe G. Smith, Command Records Management Officer (CRMO). Mr. Smith stated there are no records on hand nor are there any documents indicating any of the subject records which have been transferred or retired from this organization which pertained to human radiation research. The CRMO directed the RPO to review the Organizational History Files of IACH. No records existed pertaining to this subject. The organizational files reviewed included the years 1951-1958 and 1968-1974. The review revealed no radiation experimental records using human subjects existed.

b. The Nuclear Medicine Clinic personnel did a search for records and discovered no records existed for human radiation research.

c. During the 1950's through the early part of the 1970's, a U. S. Army medical research laboratory was in operation at Fort Knox, KY. The U.S. Army Medical Research Laboratory (USAMRL) conducted experiments using only animal subjects. Radioactive materials were used in conducting these experiments. No records indicated that human subjects were used. The USAMRL record's review included years 1953-1964, 1969-1974, and 1977.

d. A copy of the minutes of the Radioisotope Committee of USAMRL dated 6 September 1955 did exist which discussed an experiment conducted by LT Shemesh in the X-ray and Photo Section of the Radiobiology Department. According to the minutes, three men were x-rayed with a 35 mm x-ray motion picture camera. Apparently, each man was subjected to two series of x-rays, consisting of a 3 sec exposure of the moving hand and a three second exposure of the leg on 25 August 1955. The projected dose to their extremities was estimated to have been 8 roentgens to the hand and 25 roentgens to the leg. The technique factors used were: For the hand, 70 mA, 90 kVp, and a 3 second exposure and for the leg, 100 mA, 100 kVp, and a 3 second exposure. The names of the three men used in the experiment were SP2 Wayne Mckeehan, PFC Peter Melotti, and PVT David Swanson. In February 1994, Ireland Army Community Hospital's RPO reviewed the minutes and concluded that the amount of radiation those soldier's received had no health hazards associated with the experiment since the whole body was not exposed. Please find the enclosed report for your information.

3. This facility will be responsible for forwarding a copy of Jefferson Proving Ground's (JPG) search for records document. JPG is located in Indiana and is an outlying clinic of Fort Knox, KY.

4. Interviews.

a. Mr. Tom Billings, current supervisor of chemistry in the Department of Pathology, IACH. Mr. Billings worked for the USAMRL and his job description was experimenting with photon oxidation using snake venom. He stated there were no human subjects used for experimental purposes using ionizing radiation.

b. Mr. Tom Watts, currently retired. Mr. Watts worked in the USAMRL as the head of the Engineering Department. He stated that no human subjects were used for radiation experiments.

c. Mr. Dailey McPeak, currently retired. Mr. McPeak conducted radiation experiments with animals in order to determine how to properly treat radiation sickness. He looked

HSXM-PM-R
SUBJECT: Human Radiation Research

specifically at the blood count change and the physiological effects radiation had. He stated there were no human subject used for these experiments.

4. Point of contact for this correspondance is COL Mary F. Vaeth, C, Preventive Medicine Service or 2LT William P. Argo, Radiation Protection Officer at DSN 464-7621 or commerical (502) 624-7621.

FOR THE COMMANDER:

ENCL

THOMAS I. CLEMENTS
COL, MC
COMMANDING

MINUTES OF THE RADIOISOTOPE COMMITTEE MEETING OF 6 SEPTEMBER 1955

PRESENT: Dr. Krebs, Radiobiology Department
Dr. Westphal, Biochemistry Department
Mr. Eskelson, Biochemistry Department
Lt. Collins, Pathology
Capt. Laird, Radiological Safety Officer

The meeting was called to order at 1250 by the chairman. Dr. Krebs was present in the absence of Dr. Kereiakes, representing the Radiobiology Department. There was no new business to be transacted by the committee.

For the benefit of the new members of the committee, Mr. Eskelson reviewed a problem with which he was confronted several weeks previous involving the disposal of radioactive wastes. A single rat which had received C^{14} in an experiment died and was estimated to have retained radiocarbon in a quantity of about 5,000 counts per minute. This problem had been presented to the previous Radiological Safety Officer, Capt. Krohn who recommended its being wrapped in ordinary paper and discarded for burial at the sanitary fill at the post. Capt. Krohn deemed it inadvisable to dispose of this animal by ashing due to the radiocarbon discharge into the air as radioactive CO_2. He also deemed it inadvisable to dissolve the carcus in concentrated H_2SO_4 and discharge it into the plumbing system.

The chairman of the committee announced that the laboratory will exhibit its portable x-ray machine at a medical meeting at Fort Benning Georgia, August 21-23, 1955. This exhibit will be essentially the same as that at the meeting of the AMA association in Atlantic City, 1955. The chairman of the committee has been requested by the chairman of the Radiobiology Department to secure the necessary approval by the Atomic Energy Commission for the transportation of the Th^{170} for the unit.

The chairman of the committee reported on the results of an experiment conducted by Lt Shemesh in the X-ray and Photo Section of the Radiobiology Department. Three men were x-rayed with the 35 mm x-ray motion picture camera in building 1024. Each man was subjected to two series of x-rays, consisting of a three second exposure of the moving hand and a three second exposure of the leg on 25 August 1955. Under the following conditions, SP2 Wayne McKeehan, Pfc Peter Melotti, and Pvt David Swanson were estimated to receive 8 roentgens to the hand and 25 roentgens to the leg. According to the measurements made by the x-ray department personnel:

On the hand.....70 ma, 90 kv, 3 seconds pulsed
On the leg.....100 ma, 100 kv, 3 seconds pulsed

The apparently large exposure in terms of roentgens was discussed by the radioisotope committee members and it was agreed that the dose was higher than expected and potentially serious. Dr. Westphal and Lt Collins suggested that the Radiological Safety Officer investigate the matter further to determine the safety factor of the x-ray motion picture camera and potential hazards to human beings.

There was no further business.

The meeting adjourned at 1330 hours.

Robert D. Laird

ROBERT D. LAIRD
CAPT MC
Chairman
Radioisotope Committee

DISTRIBUTION:
C. O. - information
Dir. Res. - information
Dr. Krebs
Dr. Westphal
Pvt Davis
Lt. Collins
Capt. Laird

DEPARTMENT OF THE ARMY
HEADQUARTERS, MEDICAL DEPARTMENT ACTIVITY
FORT CAMPBELL, KENTUCKY 42223-1498

REPLY TO
ATTENTION OF:

HSXD-PM-EH (40-38a) 11 Mar 94

MEMORANDUM FOR AMEDD Center and School, ATTN: HSMC-GCI, Fort Sam Houston, TX 78234-6100

SUBJECT: Human Radiation Research

1. Reference memorandum, AMEDD Center and School, HSMC-GCI, dtd 3 Mar 94, Subject: Search for Records of Human Radiation Research.

2. Research revealed no evidence of human radiation experiments conducted at Fort Campbell, KY. All historical records were reviewed from 1944 to 1974, and the following personnel were contacted:

a. Mr. Walt Powers, Chief of Preventive Medicine and Radiation Protection Officer for the hospital from 1950 to 1980. Mr. Powers states that no experiments were conducted at Fort Campbell, KY.

b. Mr. Dick Allen, Post Safety Officer from 1951 to 1981, and Post Radiation Protection Officer from 1962 to 1979. Mr. Allen states that no experiments were conducted at Fort Campbell, KY.

c. CPT White spoke with several civilians that worked at the hospital since the 1960's, and they knew of no experiments conducted at Fort Campbell, KY.

3. POC is CPT White, Chief, Environmental Health/Radiation Protection Officer, DSN 635-3431/3123 or commercial (502) 798-3431/3123, FAX (502) 798-8812.

Encl

GEORGE J. BROWN
COL, MC
Commanding

ARM1.941221.013va

DEPARTMENT OF THE ARMY
US ARMY MEDICAL DEPARTMENT ACTIVITY
FORT POLK,LOUISIANA 71459-6000

REPLY TO
ATTENTION OF:

HSXV-PAD (40)

10 March 1994

MEMORANDUM FOR Chief, Clinical Investigation Regulatory Office, ATTN: HSMC-GCI, 1608 Stanley Road, AMEDD Center and School, Fort Sam Houston, Texas 78234-6125

SUBJECT: Human Radiation Research

1. A thorough review of all hospital records indicate that no incidents of Human Radiation Research occurred between 1944 and 1979 at Bayne-Jones Army Community Hospital.

2. Records from various hospital agencies were reviewed and no reference to the above subject was found. The list of agencies contacted and their responses are enclosed.

3. Point of Contact for this memorandum is CPT Swanson at DSN 863-3172.

MICHAEL A. DUNN
COL, MC
Commanding

Encl
as

HSXV-PAD

S: 1 March 1994
24 February 1994

MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: Human Radiation Research

1. I have been appointed the BJACH project officer for the above issue. I am required to determine if our facility has record of radiation exposure experiments involving human subjects conducted between 1944 and 1974.

2. Request you review your department's historical reports and documents for reference to radiological testing. Any documentation identified should be safeguarded until further notice.

3. Response is requested NLT 1 MAR 94. A negative response is required. The suspense is necessary to allow me to meet suspense times to HSC and DOD. Your cooperation is appreciated.

4. POC is the undersigned at 3172/3175.

5. USAMEDDAC - We provide the best!

GREGORY A. SWANSON
CPT, MS
Chief, Patient Administration Division

DISTRIBUTION
DCCS
C, Preventive Medicine
C, Radiology
C, Pharmacy
C, PTMS
C, IMD
Public Affairs Officer
Medical Librarian

HSXV-DCCS (HSXV-PAD) 1st End (40) Ms. Abbott/ca/3105
SUBJECT: Human Radiation Research

Deputy Commander for Clinical Services 1 March 1994

FOR Chief, Patient Administration Division

In response to basic memorandum, this office submits a negative response.

Beatriz H. Coquilla LTC MC

BEATRIZ H. COQUILLA
LTC, MC
Deputy Commander for
Clinical Services

HSXV-PS (HSXV-PAD/24 Feb 94) 1st End MAJ Dennis /cd/3233
SUBJECT: Human Radiation Research

Chief, Pharmacy Service, USAMEDDAC, Ft Polk, LA 71459-6000
28 Feb 1994

FOR Chief, PAD

1. The Pharmacy Service does not keep records, that I know of, beyond 5 years.

2. Point of contact is undersigned, at 3233.

3. USAMEDDAC, Fort Polk--we provide the best!

CHRISTINE R. DENNIS
MAJ, MS
Chief, Pharmacy Service

ARM1.941221.013ve

HSXV-PAO (360) 28 Feb 94

MEMORANDUM FOR Chief, Patient Administration Division

SUBJECT: Human Radiation Research

1. Reference memorandum dated 24 Feb 94, sab.

2. Negative response is submitted.

3. Point of contact is undersigned at 3860.

4. USAMEDDAC - We Provide the best!

DARLENE G. TORRES
Public Affairs Officer

HSXV-PTMS 24 February 1994

MEMORANDUM FOR C, PAD

SUBJECT: Human Radiation Research

1. Reference HSXV-PAD memorandum, dated 24 Feb, subject as above.

2. Our department's historical reports and documents have been

HSXV-PMS (HSXV-PAD/24 February 1994) 1st End SSG Faralli/csf/2051
SUBJECT: Human Radiation Research

Chief, Preventive Medicine Service 7 March 1994

FOR Chief, Patient Administration Division

1. Negative reply.

2. Point of contact is SSG Faralli at 2051.

ROBERTO N. NANG
MAJ, MC
Chief, Preventive Medicine
Service

ARM1.941221.013vh

HSXV-DR

7 March 1994

MEMORANDUM FOR C, PATIENT ADMINISTRATION DIVISION

SUBJECT: Human Radiation Research

1. Review of Department of Radiology's historical records indicates no radiation exposure experiments on human subjects were ever conducted. This includes the time period in question (1944 to 1974).

2. Point of contact for this action is the undersigned, ext. 3393/4.

for JOHN R. OLSEN, M.D.
LTC, MC
Chief, Department of Radiology

ARM1.941221.013vi

HSXV-DN-CED-L 7 March 1994

MEMORANDUM FOR CPT Swanson, Chief, PAD

SUBJECT: Human Radiation Testing Information

1. No information on human radiation testing is kept at the medical library.

2. Point of contact is the undersigned at 3726.

3. USAMEDDAC, Ft. Polk--we provide the best!

Cecelia B. Higginbotham

Cecelia B. Higginbotham
Administrative Librarian

HSHL-AB-ZX (HSMC-GCI/28 Jan 94) 1st End
SUBJECT: Human Radiation Research

Commander, Kirk U.S. Army Health Clinic, Aberdeen Proving Ground, MD 21005-5131 1 March 1994

FOR COMMANDER, U.S. ARMY MEDICAL DEPARTMENT CENTER AND SCHOOL, ATTN: HSMC-GCI, Fort Sam Houston, TX 78234-6100

1. Searches were made of the following in respect to human radiation research:

a. All available records in the Outpatient Medical Records Section; no records were found.

b. All annual reports from 1975 to 1993; no reports of radiation research were found.

c. All available Annual Historical Reports from 1967-1974; no reports of radiation research were found.

d. Professional program booklets were found for 1970, 1971, and 1974; no reports of radiation research were found.

e. All available records from 1944-present in the Occupational Health Clinic-Aberdeen Area, and from 1983-present in the Occupational Health Clinic-Edgewood Area; no reports of radiation research were found.

f. All radiation protection officers at Aberdeen Proving Ground were contacted telephonically. According to their search, no radiation research was conducted at Kirk U.S. Army Health Clinic.

g. The U.S. Army Environmental Hygiene Agency was contacted telephonically. According to their search, no human radition research was done.

2. The POC is CPT Marcos E. Maldonado, MC, DSN 298-3830 or commercial 410-278-3830.

FOR THE COMMANDER:

Shirley A. Bolton

SHIRLEY A. BOLTON
LTC, MS
Deputy Commander for
Administration

HSHB- MR-L Date: 17 Feb 94

MEMORANDUM FOR Public Affairs Officer, ATTN: HSHB-CE (Ms. Riley)

SUBJECT: Questionnaire on Human Radiation Research

1. Instructions to Division Records Custodian:

a. Review your local files for any file documents, projects, or records, from 1944 to 1974, related to human research involving ionizing radiation. Ensure they are retained and not transferred or destroyed.

b. Provide below a written list of titles of all research projects, documents, or reports found in your files that involved human use of ionizing radiation. Common and routine clinical practices are to be excluded. This list should include any research that supported the FDA in approving certain radiopharmaceuticals for safe use in diagnosis or therapy.

Title:_____ Report No._____
Title:_____ Report No._____
Title:_____ Report No._____
Title:_____ Report No._____
Title:_____ Report No._____
Title:_____ Report No._____
Title:_____ Report No._____
Title:_____ Report No._____
Title:_____ Report No._____
Title:_____ Report No._____

c. Attach to this questionnaire photocopies of pages of any "discussions" of research involving human exposure to ionizing radiation citing the year and page number on the photocopy.

2. If no records, reports, or documents are found, the division records custodian is to sign below indicating he/she has thoroughly reviewed the division's local files for the above information.

Kassandra M. Phillips
(signature of custodian)

3. This questionnaire must be completed, signed and returned by 18 February 1994. The POC for assistance is CPT Hamilton, Health Physics Division, at ext. 3548/3502.

No records of this routine found.

Division Name: Laser Microwave Division

Division Chief Signature: Samuel J Dimstio MAJ, MS

HSHB-MR-HM (HSHB-CE/7Feb 94) (40) 1st End CPT Hamilton/dh/ 5-3548
SUBJECT: Human Radiation Research/Experiments

17 FEB 1994

Chief, Health Physics Division

THRU Directorate, Radiation and Entomological Sciences

FOR Public Affairs Officer, ATTN: HSHB-CE (Ms Riley)

1. All local files were searched and no information was found relating to human radiation research.

2. The two enclosures are signed statements from our records custodians indicating the thoroughness of the search for these records.

2 Encls
as

for WILLIAM B. JOHNSON
LTC, MS
Chief, Health Physics Division

HSHB- MR-H Date: 8 February 1994

MEMORANDUM FOR Public Affairs Officer, ATTN: HSHB-CE (Ms. Riley)

SUBJECT: Questionnaire on Human Radiation Research

1. Instructions to Division Records Custodian:

a. Review your local files for any file documents, projects, or records, from 1944 to 1974, related to human research involving ionizing radiation. Ensure they are retained and not transferred or destroyed.

b. Provide below a written list of titles of all research projects, documents, or reports found in your files that involved human use of ionizing radiation. Common and routine clinical practices are to be excluded. This list should include any research that supported the FDA in approving certain radiopharmaceuticals for safe use in diagnosis or therapy.

Title: None found. Report No. _____
Title: _____ Report No. _____
Title: _____ Report No. _____
Title: _____ Report No. _____
Title: _____ Report No. _____
Title: _____ Report No. _____
Title: _____ Report No. _____
Title: _____ Report No. _____
Title: _____ Report No. _____
Title: _____ Report No. _____

c. Attach to this questionnaire photocopies of pages of any "discussions" of research involving human exposure to ionizing radiation citing the year and page number on the photocopy.

2. If no records, reports, or documents are found, the division records custodian is to sign below indicating he/she has thoroughly reviewed the division's local files for the above information.

L. Carlene Peters
(signature of custodian)

3. This questionnaire must be completed, signed and returned by 18 February 1994. The POC for assistance is CPT Hamilton, Health Physics Division, at ext. 3548/3502.

Division Name: Health Physics

Division Chief Signature: William B. Johnson LTC, MS

Encl 1

HSHB-MR-HM (40) 16 February 1994

MEMORANDUM FOR RECORD

SUBJECT: Review of Health Physics Division Classified Reference Files

1. Reference memorandum, HSHB-CE, PAO, 7 February 1994, subject: Human Radiation Research/Experiments.

2. On 15 February 1994, CPT Robert Friedman and Mr. David Alberth, Health Physics Division, reviewed the Health Physics Division's classified reference files in the security safe located in the USAEHA Security Office. This review served two purposes:

a. To perform the annual review of the Health Physics Division's classified materials for purposes of security downgrading, retention, or destruction.

b. To determine if any of the classified files contained information on research involving radiation exposure of human subjects from 1944 to 1974.

3. The classified files contained information related to INRAD studies (individual CNWDI security access required to review), specific radiation incidents, and USAEHA special radiation protection studies. Based upon guidance from the Joint DOD/DOE Nuclear Weapons Radiation Protection Study Group, none of the INRAD files can be downgraded at this time and all INRAD files were recommended for retention. The files on specific radiation incidents and special radiation protection studies were recommended for retention based on their historical value as potential reference material for base closure and environmental remediation projects.

4. Two files were not Health Physics Division property and were given to the Security Manager for disposition.

Encl 2

HSHB-MR-HM
SUBJECT: Review of Health Physics Division Classified Reference Files

5. All Health Physics Division classified files were reviewed with respect to the guidance given in the referenced memorandum. No information on research involving radiation exposure of human subjects from 1944 to 1974 was found.

ROBERT J. FRIEDMAN, III
CPT, MS
Nuclear Medical Science Officer
Health Physics Division

DAVID P. ALBERTH
Health Physicist
Health Physics Division

CF:
DRES
C, HPD
C, MHPB
C, IHPB
PAO
CPT Hamilton, HPD
USAEHA Security Manager

HSHB- Date: 17 Feb 94

MEMORANDUM FOR Public Affairs Officer, ATTN: HSHB-CE (Ms. Riley)

SUBJECT: Questionnaire on Human Radiation Research

1. Instructions to Division Records Custodian:

a. Review your local files for any file documents, projects, or records, from 1944 to 1974, related to human research involving ionizing radiation. Ensure they are retained and not transferred or destroyed.

b. Provide below a written list of titles of all research projects, documents, or reports found in your files that involved human use of ionizing radiation. Common and routine clinical practices are to be excluded. This list should include any research that supported the FDA in approving certain radiopharmaceuticals for safe use in diagnosis or therapy.

Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____

c. Attach to this questionnaire photocopies of pages of any "discussions" of research involving human exposure to ionizing radiation citing the year and page number on the photocopy.

2. If no records, reports, or documents are found, the division records custodian is to sign below indicating he/she has thoroughly reviewed the division's local files for the above information.

David L. Dickson
(signature of custodian)

3. This questionnaire must be completed, signed and returned by 18 February 1994. The POC for assistance is CPT Hamilton, Health Physics Division, at ext. 3548/3502.

Division Name: Entomological Sciences Division

Division Chief Signature: David L. Dickson

HSHB- Date: 22 Feb 94

MEMORANDUM FOR Public Affairs Officer, ATTN: HSHB-CE (Ms. Riley)

SUBJECT: Questionnaire on Human Radiation Research

1. Instructions to Division Records Custodian:

a. Review your local files for any file documents, projects, or records, from 1944 to 1974, related to human research involving ionizing radiation. Ensure they are retained and not transferred or destroyed.

b. Provide below a written list of titles of all research projects, documents, or reports found in your files that involved human use of ionizing radiation. Common and routine clinical practices are to be excluded. This list should include any research that supported the FDA in approving certain radiopharmaceuticals for safe use in diagnosis or therapy.

Title:_____ Report No._____
Title:_____ Report No._____
Title: None Report No._____
Title:_____ Report No._____
Title:_____ Report No._____
Title:_____ Report No._____
Title:_____ Report No._____
Title:_____ Report No._____
Title:_____ Report No._____
Title:_____ Report No._____

c. Attach to this questionnaire photocopies of pages of any "discussions" of research involving human exposure to ionizing radiation citing the year and page number on the photocopy.

2. If no records, reports, or documents are found, the division records custodian is to sign below indicating he/she has thoroughly reviewed the division's local files for the above information.

_____
(signature of custodian)

3. This questionnaire must be completed, signed and returned by 18 February 1994. The POC for assistance is CPT Hamilton, Health Physics Division, at ext. 3548/3502.

Division Name: KMD

Division Chief Signature: Thomas R Bender

HSHB- Date: 25 Feb 94

MEMORANDUM FOR Public Affairs Officer, ATTN: HSHB-CE (Ms. Riley)

SUBJECT: Questionnaire on Human Radiation Research

1. Instructions to Division Records Custodian:

a. Review your local files for any file documents, projects, or records, from 1944 to 1974, related to human research involving ionizing radiation. Ensure they are retained and not transferred or destroyed.

b. Provide below a written list of titles of all research projects, documents, or reports found in your files that involved human use of ionizing radiation. Common and routine clinical practices are to be excluded. This list should include any research that supported the FDA in approving certain radiopharmaceuticals for safe use in diagnosis or therapy.

Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____

c. Attach to this questionnaire photocopies of pages of any "discussions" of research involving human exposure to ionizing radiation citing the year and page number on the photocopy.

2. If no records, reports, or documents are found, the division records custodian is to sign below indicating he/she has thoroughly reviewed the division's local files for the above information.

Thomas J. Fitts
(signature of custodian)

3. This questionnaire must be completed, signed and returned by 18 February 1994. The POC for assistance is CPT Hamilton, Health Physics Division, at ext. 3548/3502.

Division Name: Chief Headquarters Operations Division

Division Chief Signature: Thomas J. Fitts

HSHB- Date: 16 Feb 94

MEMORANDUM FOR Public Affairs Officer, ATTN: HSHB-CE (Ms. Riley)

SUBJECT: Questionnaire on Human Radiation Research

1. Instructions to Division Records Custodian:

a. Review your local files for any file documents, projects, or records, from 1944 to 1974, related to human research involving ionizing radiation. Ensure they are retained and not transferred or destroyed.

b. Provide below a written list of titles of all research projects, documents, or reports found in your files that involved human use of ionizing radiation. Common and routine clinical practices are to be excluded. This list should include any research that supported the FDA in approving certain radiopharmaceuticals for safe use in diagnosis or therapy.

Title:_____ Report No._____
Title:_____ Report No._____
Title:_____ Report No._____
Title:_____ Report No._____
Title:_____ Report No._____
Title:_____ Report No._____
Title:_____ Report No._____
Title:_____ Report No._____
Title:_____ Report No._____
Title:_____ Report No._____

NEGATIVE

NEGATIVE

c. Attach to this questionnaire photocopies of pages of any "discussions" of research involving human exposure to ionizing radiation citing the year and page number on the photocopy.

2. If no records, reports, or documents are found, the division records custodian is to sign below indicating he/she has thoroughly reviewed the division's local files for the above information.

B. Louise Monks
(signature of custodian)

3. This questionnaire must be completed, signed and returned by 18 February 1994. The POC for assistance is CPT Hamilton, Health Physics Division, at ext. 3548/3502.

Division Name: Logistics

Division Chief Signature: Ray R. Fender

RAY R. FENDER
Acting Chief
Logistics

HSHB-MI (HSHB-CE/7 Feb 94) 1st End
SUBJECT: Human Radiation Research/Experiments

DIH 17 Feb 94

FOR Public Affairs Office, ATTN: HSHB-CE (Ms. Riley)

Negative responses from DIH are enclosed as requested.

Donna M. Doganiero

Encl
nc

DONNA M. DOGANIERO
Director, Industrial Hygiene

HSHB-MI Date: 16 Feb 94

MEMORANDUM FOR Public Affairs Officer, ATTN: HSHB-CE (Ms. Riley)

SUBJECT: Questionnaire on Human Radiation Research

1. Instructions to Division Records Custodian:

a. Review your local files for any file documents, projects, or records, from 1944 to 1974, related to human research involving ionizing radiation. Ensure they are retained and not transferred or destroyed.

b. Provide below a written list of titles of all research projects, documents, or reports found in your files that involved human use of ionizing radiation. Common and routine clinical practices are to be excluded. This list should include any research that supported the FDA in approving certain radiopharmaceuticals for safe use in diagnosis or therapy.

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Title:_____Report No._____
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Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____

c. Attach to this questionnaire photocopies of pages of any "discussions" of research involving human exposure to ionizing radiation citing the year and page number on the photocopy.

2. If no records, reports, or documents are found, the division records custodian is to sign below indicating he/she has thoroughly reviewed the division's local files for the above information.

C Janice Thrasher
(signature of custodian)

3. This questionnaire must be completed, signed and returned by 18 February 1994. The POC for assistance is CPT Hamilton, Health Physics Division, at ext. 3548/3502.

Division Name: Director O/DIH

Division Chief Signature: + Donna Mc

HSHB-MI-W Date: 15 FEB 94

MEMORANDUM FOR Public Affairs Officer, ATTN: HSHB-CE (Ms. Riley)

SUBJECT: Questionnaire on Human Radiation Research

1. Instructions to Division Records Custodian:

a. Review your local files for any file documents, projects, or records, from 1944 to 1974, related to human research involving ionizing radiation. Ensure they are retained and not transferred or destroyed.

b. Provide below a written list of titles of all research projects, documents, or reports found in your files that involved human use of ionizing radiation. Common and routine clinical practices are to be excluded. This list should include any research that supported the FDA in approving certain radiopharmaceuticals for safe use in diagnosis or therapy.

Title:_____ Report No._____
Title:_____ Report No._____
Title:_____ Report No._____
Title:_____ Report No._____
Title:_____ Report No._____
Title:_____ Report No._____
Title:_____ Report No._____
Title:_____ Report No._____
Title:_____ Report No._____
Title:_____ Report No._____

c. Attach to this questionnaire photocopies of pages of any "discussions" of research involving human exposure to ionizing radiation citing the year and page number on the photocopy.

2. If no records, reports, or documents are found, the division records custodian is to sign below indicating he/she has thoroughly reviewed the division's local files for the above information.

Joan A. Hall
(signature of custodian)

3. This questionnaire must be completed, signed and returned by 18 February 1994. The POC for assistance is CPT Hamilton, Health Physics Division, at ext. 3548/3502.

Division Name: IH Programs

Division Chief Signature: [signature]

HSHB-MI-H Date: 16 FEB 94

MEMORANDUM FOR Public Affairs Officer, ATTN: HSHB-CE (Ms. Riley)

SUBJECT: Questionnaire on Human Radiation Research

1. Instructions to Division Records Custodian:

a. Review your local files for any file documents, projects, or records, from 1944 to 1974, related to human research involving ionizing radiation. Ensure they are retained and not transferred or destroyed.

b. Provide below a written list of titles of all research projects, documents, or reports found in your files that involved human use of ionizing radiation. Common and routine clinical practices are to be excluded. This list should include any research that supported the FDA in approving certain radiopharmaceuticals for safe use in diagnosis or therapy.

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c. Attach to this questionnaire photocopies of pages of any "discussions" of research involving human exposure to ionizing radiation citing the year and page number on the photocopy.

2. If no records, reports, or documents are found, the division records custodian is to sign below indicating he/she has thoroughly reviewed the division's local files for the above information.

Jacqueline J Owens
(signature of custodian)

3. This questionnaire must be completed, signed and returned by 18 February 1994. The POC for assistance is CPT Hamilton, Health Physics Division, at ext. 3548/3502.

Division Name: HEALTHCARE HAZARDS

Division Chief Signature: Gy A McKee

HSHB- Date: 18 FEB 94

MEMORANDUM FOR Public Affairs Officer, ATTN: HSHB-CE (Ms. Riley)

SUBJECT: Questionnaire on Human Radiation Research

1. Instructions to Division Records Custodian:

a. Review your local files for any file documents, projects, or records, from 1944 to 1974, related to human research involving ionizing radiation. Ensure they are retained and not transferred or destroyed.

b. Provide below a written list of titles of all research projects, documents, or reports found in your files that involved human use of ionizing radiation. Common and routine clinical practices are to be excluded. This list should include any research that supported the FDA in approving certain radiopharmaceuticals for safe use in diagnosis or therapy.

Title:_____ Report No._____
Title:_____ Report No._____
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Title:_____ Report No._____
Title:_____ Report No._____

c. Attach to this questionnaire photocopies of pages of any "discussions" of research involving human exposure to ionizing radiation citing the year and page number on the photocopy.

2. If no records, reports, or documents are found, the division records custodian is to sign below indicating he/she has thoroughly reviewed the division's local files for the above information.

_____
(signature of custodian)

3. This questionnaire must be completed, signed and returned by 18 February 1994. The POC for assistance is CPT Hamilton, Health Physics Division, at ext. 3548/3502.

Program 54 did not exist during the period in question. Any work would be captured under Prgm 55.

Division Name: Program 54 - Directorate of Industrial Hygiene

Division Chief Signature: Andrew B. Russell

HSHB-MI-S Date: 16 Feb 94

MEMORANDUM FOR Public Affairs Officer, ATTN: HSHB-CE (Ms. Riley)

SUBJECT: Questionnaire on Human Radiation Research

1. Instructions to Division Records Custodian:

a. Review your local files for any file documents, projects, or records, from 1944 to 1974, related to human research involving ionizing radiation. Ensure they are retained and not transferred or destroyed.

b. Provide below a written list of titles of all research projects, documents, or reports found in your files that involved human use of ionizing radiation. Common and routine clinical practices are to be excluded. This list should include any research that supported the FDA in approving certain radiopharmaceuticals for safe use in diagnosis or therapy.

Title:_____ Report No._____
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c. Attach to this questionnaire photocopies of pages of any "discussions" of research involving human exposure to ionizing radiation citing the year and page number on the photocopy.

2. If no records, reports, or documents are found, the division records custodian is to sign below indicating he/she has thoroughly reviewed the division's local files for the above information.

JN H. McDermott MAJ, MS
(signature of custodian)

3. This questionnaire must be completed, signed and returned by 18 February 1994. The POC for assistance is CPT Hamilton, Health Physics Division, at ext. 3548/3502.

~~Division~~ Program Name: Sanitation & Hygiene

Division Chief Signature: JH McDermott

HSHB-MI-I Date: 2-9-94

MEMORANDUM FOR Public Affairs Officer, ATTN: HSHB-CE (Ms. Riley)

SUBJECT: Questionnaire on Human Radiation Research

1. Instructions to Division Records Custodian:

a. Review your local files for any file documents, projects, or records, from 1944 to 1974, related to human research involving ionizing radiation. Ensure they are retained and not transferred or destroyed.

b. Provide below a written list of titles of all research projects, documents, or reports found in your files that involved human use of ionizing radiation. Common and routine clinical practices are to be excluded. This list should include any research that supported the FDA in approving certain radiopharmaceuticals for safe use in diagnosis or therapy.

Title: NONE Report No. _____
Title: _____ Report No. _____
Title: _____ Report No. _____
Title: _____ Report No. _____
Title: _____ Report No. _____
Title: _____ Report No. _____
Title: _____ Report No. _____
Title: _____ Report No. _____
Title: _____ Report No. _____
Title: _____ Report No. _____

c. Attach to this questionnaire photocopies of pages of any "discussions" of research involving human exposure to ionizing radiation citing the year and page number on the photocopy.

2. If no records, reports, or documents are found, the division records custodian is to sign below indicating he/she has thoroughly reviewed the division's local files for the above information.

Sandra P. Mark
(signature of custodian)

3. This questionnaire must be completed, signed and returned by 18 February 1994. The POC for assistance is CPT Hamilton, Health Physics Division, at ext. 3548/3502.

Division Name: Pgm 59, OIH

Division Chief Signature: Sandra P. Mark

HSHB- Date: 18 Feb 94

MEMORANDUM FOR Public Affairs Officer, ATTN: HSHB-CE (Ms. Riley)

SUBJECT: Questionnaire on Human Radiation Research

1. Instructions to Division Records Custodian:

a. Review your local files for any file documents, projects, or records, from 1944 to 1974, related to human research involving ionizing radiation. Ensure they are retained and not transferred or destroyed.

b. Provide below a written list of titles of all research projects, documents, or reports found in your files that involved human use of ionizing radiation. Common and routine clinical

[redacted]

HSHB- Date: 10 FEB 1994

MEMORANDUM FOR Public Affairs Officer, ATTN: HSHB-CE (Ms. Riley)

SUBJECT: Questionnaire on Human Radiation Research

1. Instructions to Division Records Custodian:

a. Review your local files for any file documents, projects, or records, from 1944 to 1974, related to human research involving ionizing radiation. Ensure they are retained and not transferred or destroyed.

b. Provide below a written list of titles of all research projects, documents, or reports found in your files that involved human use of ionizing radiation. Common and routine clinical practices are to be excluded. This list should include any research that supported the FDA in approving certain radiopharmaceuticals for safe use in diagnosis or therapy.

Title:_____Report No._____
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Title:_____Report No._____
Title:_____Report No._____
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Title:_____Report No._____
Title:_____Report No._____

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2. If no records, reports, or documents are found, the division records custodian is to sign below indicating he/she has thoroughly reviewed the division's local files for the above information.

(signature of custodian)

3. This questionnaire must be completed, signed and returned by 18 February 1994. The POC for assistance is CPT Hamilton, Health Physics Division, at ext. 3548/3502.

Division Name: TOXICOLOGY

Division Chief Signature:

HSHB- Date: 16 FEB 1994

MEMORANDUM FOR Public Affairs Officer, ATTN: HSHB-CE (Ms. Riley)

SUBJECT: Questionnaire on Human Radiation Research

1. Instructions to Division Records Custodian:

a. Review your local files for any file documents, projects, or records, from 1944 to 1974, related to human research involving ionizing radiation. Ensure they are retained and not transferred or destroyed.

b. Provide below a written list of titles of all research projects, documents, or reports found in your files that involved human use of ionizing radiation. Common and routine clinical practices are to be excluded. This list should include any research that supported the FDA in approving certain radiopharmaceuticals for safe use in diagnosis or therapy.

Title:_____ Report No._____
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Title:_____ Report No._____

c. Attach to this questionnaire photocopies of pages of any "discussions" of research involving human exposure to ionizing radiation citing the year and page number on the photocopy.

2. If no records, reports, or documents are found, the division records custodian is to sign below indicating he/she has thoroughly reviewed the division's local files for the above information.

Laurita K. Hamilton
(signature of custodian)

3. This questionnaire must be completed, signed and returned by 18 February 1994. The POC for assistance is CPT Hamilton, Health Physics Division, at ext. 3548/3502.

Division Name: Vision Conservation Office

Division Chief Signature: A. Thompson

HSHB- Date: 16 FEB 1994

MEMORANDUM FOR Public Affairs Officer, ATTN: HSHB-CE (Ms. Riley)

SUBJECT: Questionnaire on Human Radiation Research

1. Instructions to Division Records Custodian:

a. Review your local files for any file documents, projects, or records, from 1944 to 1974, related to human research involving ionizing radiation. Ensure they are retained and not transferred or destroyed.

b. Provide below a written list of titles of all research projects, documents, or reports found in your files that involved human use of ionizing radiation. Common and routine clinical practices are to be excluded. This list should include any research that supported the FDA in approving certain radiopharmaceuticals for safe use in diagnosis or therapy.

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2. If no records, reports, or documents are found, the division records custodian is to sign below indicating he/she has thoroughly reviewed the division's local files for the above information.

Sandra K. Harris
(signature of custodian)

3. This questionnaire must be completed, signed and returned by 18 February 1994. The POC for assistance is CPT Hamilton, Health Physics Division, at ext. 3548/3502.

Division Name: OHN Office

Division Chief Signature: Loretta A. Loach

HSHB-MO-B (340)

MEMORANDUM FOR PAO

SUBJECT: Human Radiation Research/Experiments

Bio-Acoustics Division has a negative reply.

MICHAEL H. PENGELLY
LTC, MS
Chief, Bio-Acoustics Division

HSHB-MO-F Date: 18 Feb 94

MEMORANDUM FOR Public Affairs Officer, ATTN: HSHB-CE (Ms. Riley)

SUBJECT: Questionnaire on Human Radiation Research

1. Instructions to Division Records Custodian:

a. Review your local files for any file documents, projects, or records, from 1944 to 1974, related to human research involving ionizing radiation. Ensure they are retained and not transferred or destroyed.

b. Provide below a written list of titles of all research projects, documents, or reports found in your files that involved human use of ionizing radiation. Common and routine clinical practices are to be excluded. This list should include any research that supported the FDA in approving certain radiopharmaceuticals for safe use in diagnosis or therapy.

Title:_____ Report No._____
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2. If no records, reports, or documents are found, the division records custodian is to sign below indicating he/she has thoroughly reviewed the division's local files for the above information.

Denise G. Williams
(signature of custodian)

3. This questionnaire must be completed, signed and returned by 18 February 1994. The POC for assistance is CPT Hamilton, Health Physics Division, at ext. 3548/3502.

Division Name: OHMIS Management Ofc

Division Chief Signature: [signature]

.ist 9
:o file/pipe:
'dev/tty...
9 611: 18 Feb 94 OHMIS Coordinat Human Radiation Research/Exper
(Message # 9: 611 bytes)
)a Fri, 18 Feb 94 11:48:40 EST
From: OHMIS Coordinating Ofc 5-2926 <hshbmof@aeha1.apgea.army.mil>
To: hshbmo@aeha1.apgea.army.mil, hshbce@aeha1.apgea.army.mil
:c: dtompkin@aeha1.apgea.army.mil
Subject: Human Radiation Research/Experiments

HSHB-MO-F (40) 18 Feb 94

MEMORANDUM THRU DOEH

FOR Public Affairs Office

SUBJECT: Human Radiation Research/Experiments

1. Reference memorandum, HSHB-CE, 7 Feb 94, SAB.

2. This office submits a negative response.

//s//
DAVID J. TOMPKINS
MAJ, MS
Chief, OHMIS Management Office

<-

HSHB- Date: 2/15/94

MEMORANDUM FOR Public Affairs Officer, ATTN: HSHB-CE (Ms. Riley)

SUBJECT: Questionnaire on Human Radiation Research

1. Instructions to Division Records Custodian:

a. Review your local files for any file documents, projects, or records, from 1944 to 1974, related to human research involving ionizing radiation. Ensure they are retained and not transferred or destroyed.

b. Provide below a written list of titles of all research projects, documents, or reports found in your files that involved human use of ionizing radiation. Common and routine clinical practices are to be excluded. This list should include any research that supported the FDA in approving certain radiopharmaceuticals for safe use in diagnosis or therapy.

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c. Attach to this questionnaire photocopies of pages of any "discussions" of research involving human exposure to ionizing radiation citing the year and page number on the photocopy.

2. If no records, reports, or documents are found, the division records custodian is to sign below indicating he/she has thoroughly reviewed the division's local files for the above information.

_____
(signature of custodian)

3. This questionnaire must be completed, signed and returned by 18 February 1994. The POC for assistance is CPT Hamilton, Health Physics Division, at ext. 3548/3502.

Division Name: HHA / Negative Response

Division Chief Signature: Barry R Thayer

DTR 22 Feb 94

HSHB- Date: 18Feb94

MEMORANDUM FOR Public Affairs Officer, ATTN: HSHB-CE (Ms. Riley)

SUBJECT: Questionnaire on Human Radiation Research

1. Instructions to Division Records Custodian:

a. Review your local files for any file documents, projects, or records, from 1944 to 1974, related to human research involving ionizing radiation. Ensure they are retained and not transferred or destroyed.

b. Provide below a written list of titles of all research projects, documents, or reports found in your files that involved human use of ionizing radiation. Common and routine clinical practices are to be excluded. This list should include any research that supported the FDA in approving certain radiopharmaceuticals for safe use in diagnosis or therapy.

Title: None found Report No. _____
Title: _____ Report No. _____
Title: _____ Report No. _____
Title: _____ Report No. _____
Title: _____ Report No. _____
Title: _____ Report No. _____
Title: _____ Report No. _____
Title: _____ Report No. _____
Title: _____ Report No. _____
Title: _____ Report No. _____

c. Attach to this questionnaire photocopies of pages of any "discussions" of research involving human exposure to ionizing radiation citing the year and page number on the photocopy.

2. If no records, reports, or documents are found, the division records custodian is to sign below indicating he/she has thoroughly reviewed the division's local files for the above information.

Brian J Rubey
(signature of custodian)

3. This questionnaire must be completed, signed and returned by 18 February 1994. The POC for assistance is CPT Hamilton, Health Physics Division, at ext. 3548/3502.

Division Name: Laboratory Customer Service Division

Division Chief Signature: Brian J Rubey

DTT 22 Feb 94

HSHB- Date: 18 February 1994

MEMORANDUM FOR Public Affairs Officer, ATTN: HSHB-CE (Ms. Riley)

SUBJECT: Questionnaire on Human Radiation Research

1. Instructions to Division Records Custodian:

a. Review your local files for any file documents, projects, or records, from 1944 to 1974, related to human research involving ionizing radiation. Ensure they are retained and not transferred or destroyed.

b. Provide below a written list of titles of all research projects, documents, or reports found in your files that involved human use of ionizing radiation. Common and routine clinical practices are to be excluded. This list should include any research that supported the FDA in approving certain radiopharmaceuticals for safe use in diagnosis or therapy.

Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____

c. Attach to this questionnaire photocopies of pages of any "discussions" of research involving human exposure to ionizing radiation citing the year and page number on the photocopy.

2. If no records, reports, or documents are found, the division records custodian is to sign below indicating he/she has thoroughly reviewed the division's local files for the above information.

(signature of custodian)

3. This questionnaire must be completed, signed and returned by 18 February 1994. The POC for assistance is CPT Hamilton, Health Physics Division, at ext. 3548/3502.

Division Name: **Organic Environmental Chemistry**

Division Chief Signature:

HSHB- Date: 14 Feb 94

MEMORANDUM FOR Public Affairs Officer, ATTN: HSHB-CE (Ms. Riley)

SUBJECT: Questionnaire on Human Radiation Research

1. Instructions to Division Records Custodian:

a. Review your local files for any file documents, projects, or records, from 1944 to 1974, related to human research involving ionizing radiation. Ensure they are retained and not transferred or destroyed.

b. Provide below a written list of titles of all research projects, documents, or reports found in your files that involved human use of ionizing radiation. Common and routine clinical practices are to be excluded. This list should include any research that supported the FDA in approving certain radiopharmaceuticals for safe use in diagnosis or therapy.

Title:_____ Report No._____
Title:_____ Report No._____
Title:_____ Report No._____
Title:_____ Report No._____
Title:_____ Report No._____
Title:_____ Report No._____
Title:_____ Report No._____
Title:_____ Report No._____
Title:_____ Report No._____
Title:_____ Report No._____

c. Attach to this questionnaire photocopies of pages of any "discussions" of research involving human exposure to ionizing radiation citing the year and page number on the photocopy.

2. If no records, reports, or documents are found, the division records custodian is to sign below indicating he/she has thoroughly reviewed the division's local files for the above information.

Christine Scheffler
(signature of custodian)

3. This questionnaire must be completed, signed and returned by 18 February 1994. The POC for assistance is CPT Hamilton, Health Physics Division, at ext. 3548/3502.

Division Name: Radiological and Inorganic Chemistry

Division Chief Signature: Roger E. Berard

HSHB-ME-A Date: 17 Feb 94

MEMORANDUM FOR Public Affairs Officer, ATTN: HSHB-CE (Ms. Riley)

SUBJECT: Questionnaire on Human Radiation Research

1. Instructions to Division Records Custodian:

a. Review your local files for any file documents, projects, or records, from 1944 to 1974, related to human research involving ionizing radiation. Ensure they are retained and not transferred or destroyed.

b. Provide below a written list of titles of all research projects, documents, or reports found in your files that involved human use of ionizing radiation. Common and routine clinical practices are to be excluded. This list should include any research that supported the FDA in approving certain radiopharmaceuticals for safe use in diagnosis or therapy.

Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____

c. Attach to this questionnaire photocopies of pages of any "discussions" of research involving human exposure to ionizing radiation citing the year and page number on the photocopy.

2. If no records, reports, or documents are found, the division records custodian is to sign below indicating he/she has thoroughly reviewed the division's local files for the above information.

Jean L. Whitsell
(signature of custodian)

3. This questionnaire must be completed, signed and returned by 18 February 1994. The POC for assistance is CPT Hamilton, Health Physics Division, at ext. 3548/3502.

Division Name: RICHARD L. KUSSMAN

for Division Chief Signature: David L. Campbell
Cf, APMB APED

HSHB- Date: 17 Feb 94

MEMORANDUM FOR Public Affairs Officer, ATTN: HSHB-CE (Ms. Riley)

SUBJECT: Questionnaire on Human Radiation Research

1. Instructions to Division Records Custodian:

a. Review your local files for any file documents, projects, or records, from 1944 to 1974, related to human research involving ionizing radiation. Ensure they are retained and not transferred or destroyed.

b. Provide below a written list of titles of all research projects, documents, or reports found in your files that involved human use of ionizing radiation. Common and routine clinical practices are to be excluded. This list should include any research that supported the FDA in approving certain radiopharmaceuticals for safe use in diagnosis or therapy.

Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____

c. Attach to this questionnaire photocopies of pages of any "discussions" of research involving human exposure to ionizing radiation citing the year and page number on the photocopy.

2. If no records, reports, or documents are found, the division records custodian is to sign below indicating he/she has thoroughly reviewed the division's local files for the above information.

Jeanneen Healy Hay, Division Secretary, WDED
(signature of custodian)

3. This questionnaire must be completed, signed and returned by 18 February 1994. The POC for assistance is CPT Hamilton, Health Physics Division, at ext. 3548/3502.

Division Name: JESSIE B. CABELLON, LTC, MS, C, WDED

Division Chief Signature: Jessie B. Cabellon

HSHB-ME-W

Date: 24 February 1994

MEMORANDUM FOR Public Affairs Officer, ATTN: HSHB-CE (Ms. Riley)

SUBJECT: Questionnaire on Human Radiation Research

1. Instructions to Division Records Custodian:

a. Review your local files for any file documents, projects, or records, from 1944 to 1974, related to human research involving ionizing radiation. Ensure they are retained and not transferred or destroyed.

b. Provide below a written list of titles of all research projects, documents, or reports found in your files that involved human use of ionizing radiation. Common and routine clinical practices are to be excluded. This list should include any research that supported the FDA in approving certain radiopharmaceuticals for safe use in diagnosis or therapy.

Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____
Title:_____Report No._____

c. Attach to this questionnaire photocopies of pages of any "discussions" of research involving human exposure to ionizing radiation citing the year and page number on the photocopy.

2. If no records, reports, or documents are found, the division records custodian is to sign below indicating he/she has thoroughly reviewed the division's local files for the above information.

Betty L. Spurlin
(signature of custodian)

3. This questionnaire must be completed, signed and returned by 18 February 1994. The POC for assistance is CPT Hamilton, Health Physics Division, at ext. 3548/3502.

Division Name: Water Quality Engineering Division

Division Chief Signature: [signature]

HSHB-Z (HSMC-GCI/26 Jan 94) (40) 1st End
SUBJECT: Human Radiation Research

Commander, U.S. Army Environmental Hygiene Agency, Aberdeen Proving Ground, Maryland 21010-5422 28 February 1994

FOR Chief, Clinical Investigation Regulatory Office, U.S. AMEDD Center & School, Fort Sam Houston, TX 78234-6100

1. This is a summary of the actions taken at the U.S. Army Environmental Hygiene Agency (USAEHA) to find and secure records or reports of research projects involving exposure of human subjects to ionizing radiation between 1944 and 1974.

2. The USAEHA Project Officer for the records search was CPT Daniel S. Hamilton, Health Physics Division. In a cooperative effort, the project officer and the USAEHA Public Affairs Officer, Ms Evelyn Riley, found no evidence in the content of USAEHA historical reports, from 1944 to 1974, to indicate human exposure to ionizing radiation for the purpose of research. Enclosure one contains documented signatures of this review.

3. The project officer tasked USAEHA Records Management Office, Archives Section, to pull records utilizing a series of key word searches. A total of 132 records were reviewed by the project officer and documented signatures of this review are in enclosure two. No records were found on human radiation research. Retired records at the Federal Records Center were not reviewed because all of USAEHA records are archived and kept on microfiche at USAEHA prior to transfer.

4. Each USAEHA Division custodian was tasked to search their local files as specified in enclosure three. The results of that search are contained in enclosure three. All responses were negative.

5. Point of Contact is CPT Hamilton, DSN 584-3548 or commercial (410) 671-3548.

3 Encls
as

James R. Wiles
JAMES R. WILES
Colonel, MS
Commanding

ARM1.941221.013xb

HSHB-CE (40)

MEMORANDUM FOR RECORD

SUBJECT: Review of USAEHA Historical Reports for Human Radiation Research

1. During the week of 14 - 18 February 1994, Captain Daniel S. Hamilton, Health Physics Division, and Ms. Evelyn Riley, Public Affairs Officer, USAEHA, performed a review on 26 USAEHA annual historical reports for the years 1944 through 1974.

2. There was no documentation in the 26 reports which indicated knowledge of experimentation involving ionizing radiation on human subjects.

3. The following signatures are provided for authentication of this review.

EVELYN B. RILEY
Chief, Public Affairs

DANIEL S. HAMILTON
CPT, MS
Project Officer
Health Physics Division

Encl 1

ARM1.941221.013xc

HSHB-MR-HM (40)

MEMORANDUM FOR RECORD

SUBJECT: Review of Archives for Human Radiation Research

1. During the week of 14-18 February 1994, Captain Daniel S. Hamilton, Health Physics Division, and Ms. Phyllis Anders, Records Management Technician, Information Management Services Branch, performed a thorough review of all USAEHA's archive records, dated 1 January 1944 through 31 December 1974.

2. Records from all USAEHA archives were reviewed using a key word search provided by the project officer. One-hundred-thirty-two records were pulled for review. There was no evidence or statement found within the 132 records which indicated knowledge of experimentation involving ionizing radiation on human subjects.

3. The following signatures are provided for authentication of this review:

Phyllis C. Anders

PHYLLIS C. ANDERS
Technical Information Assistant
Information Management Services

DANIEL S. HAMILTON
CPT, MS
Project Officer
Health Physics Division

Fact 2

ARM1.941221.013xd

S: 18 February 1994

HSHB-CE (40-38a) 07 February 1994

MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: Human Radiation Research/Experiments

1. The Secretary of Defense and The Surgeon General of the Army has directed all medical units to report on research involving radiation exposure of human subjects between 1944 to 1974. To comply with this directive, forward a copy of the enclosure to each of your Division Chiefs for completion.

2. Inform all staff members under your supervision of the effort underway to collect the above information. Instruct any personnel aware of such research, even if it was conducted by other agencies of the Government, to inform the project officer identified in paragraph 5.

3. Negative responses are required.

4. Return all responses to the Public Affairs Office, ATTN: HSHB-CE (Ms. Riley), on or before 18 February 1994.

5. Additional information and assistance may be obtained by contacting CPT Daniel S. Hamilton, Health Physics Division, Human Radiation Research Project Officer, at ext. 3548/3502.

Encl
as

James R. Wiles
JAMES R. WILES
Colonel, MS
Commanding

DISTRIBUTION:
Medical Director
DEHE
DOEH
CofS
DRES
DLS
DIH

ENCL 3

3XR-FR (340d) 10 March 1994

MEMORANDUM FOR Chief, Clinical Investigation Regulatory Office, Consultant to the Surgeon General For Clinical Investigation, ATTN: COL Shannon Harrison

SUBJECT: Human Radiation Research

1. To the best of my knowledge, no research involving human exposure to ionizing radiation has ever taken place at Fort Ritchie, Maryland. Our current Health Clinic was not even built until 1964.

2. In an effort to find any records related to this subject, I spoke with the Chief of Radiology at Kimbrough Army Community Hospital (KACH), Fort Meade, MD. We are a part of that MEDDAC and she was not aware of any research having taken place here. I also spoke with Mr. Everett, who is in charge of the Fort Ritchie Records Holding Area. He conducted a thorough search of existing files and could find nothing.

3. If there is anything more I can do, please let me know. (DSN 277-4455).

Kennington B. Condie

KENNINGTON B. CONDIE
CPT, MS
Clinic Administrator

ARM1.941221.013za

DEPARTMENT OF THE ARMY
U.S. ARMY MEDICAL DEPARTMENT ACTIVITY
FORT DEVENS, MASSACHUSETTS 01433-6401

REPLY TO
ATTENTION OF:

HSXF DR (40-38a)

22 February 1994

MEMORANUDM FOR AMEDD Center & School, HSMC-GCI
Attn: Regulatory Affairs Pharmacist
Fort Sam Houston, Texas 78234-6100

SUBJECT: Human Radiation Research

1. After a thorough review of files within the Cutler Army Health Clinic, Department of Radiology, and a full discussion with the command staff, I have found NO record of any research involving human exposure to ionizing radiation ever being performed at this medical facility. Additionally, NO human-use committee nor project officers have been active at this medical facility.

2. Points of Contact for further information are SSG Tozier-Robbins or the undersigned @ (508) 796-6890/6764/ AV 256-6890-6764.

JAMES W. PARRISH
SFC, USA
NCOIC, Radiology, CAHC

ARM1.941221.013zb

DEPARTMENT OF THE ARMY
U.S. ARMY MEDICAL DEPARTMENT ACTIVITY
FORT DEVENS, MASSACHUSETTS 01433-6401

REPLY TO
ATTENTION OF

HSXF-DR (40-38a) 28 February 1994

MEMORANDUM FOR Chief, Clinical Investigation Regulatory Office,
ATIN: HSMC-GCI, 1608 Stanley Road, AMEDD Center & School,
Fort Sam Houston, TX 78234-6125

SUBJECT: Human Radiation Research at Cutler Army Community Hospital, Fort Devens, MA.

1. The following sources were reviewed and consulted in our report on human research involving exposure to ionizing radiation at this facility:

a. Annual Historical Reports. The Plans, Training, Mobilization, & Security Section could provide only reports from 1980 to 1992. Upon examination, there is no reference of any department conducting human experiments involving exposure to ionizing radiation.

b. The Radiation Protection Section within the Department of Radiology. Upon review of records dated 1989 thru 1993, there was no mention of research ever being conducted on patients. The above records were the only ones available.

c. The Department of Radiology. According to the Chief Radiologist from 1986 to 1993, LTC Evelyn L. Ramos, no research involving human exposure to ionizing radiation has ever been conducted in this medical facility.

d. According to the Commander, COL Royal Hudson, the DCCS, LTC Kevin Keenan. and the DCA MAJ Deborah Gilbertson, no cases of human experiments involving exposure to ionizing radiation have been performed at the medical facility.

e. A request for information on this subject has been transmitted throughout the MEDDAC via P-MAIL. There have been no responses.

f. The Project Officers for this information are SSG Tozier-Robbins or the undersigned at (508) 796-6890/6764, AV 256-6890/6764/6765.

JAMES W. HARRISH
SFC, USA
RPO, NCOIC, Radiology

ARM1.941221.013zc

HSXP-MD (40-38a) 1 March 1994

MEMORANDUM FOR Headquarters, U.S. Army Medical Department Center and School, ATTN: HSMC-GCI (COL Harrison), Fort Sam Houston, Texas 78234-6000

SUBJECT: Human Radiation Research

1. References:

a. Memorandum, HSMC-GCI, 28 January 1994, sab.

b. Memorandum, HSMC-GCI, 15 February 1994, sab.

2. All department/service chiefs on distribution list at enclosure 1 have conducted reasonable searches of their areas of responsibility. No documents relating to human radiation research were identified.

3. Searches were conducted on two different occasions as mandated by references a and b. Copy of the department/service chiefs findings are attached as enclosure 2.

4. POC this MEDDAC is CPT Plante at 314-596-0490, DSN 581-0490.

FOR THE COMMANDER:

2 Encls

DENNIS W. DOHANOS
Colonel, Medical Service Corps
Deputy Commander for Administration

HSXP-PA

S: 28 February 1994
22 February 1994

ARM1.941221.013zd

MEMORANDUM FOR SEE DISTRIBUTION

SUBJECT: Search for Human Radiation **Research Documents**

1. References:

a. Memorandum, HSXP-PA, 4 Feb 94, subject as above.

b. Memorandum , AMEDD Center & School, HSMC-GCI, 18 Feb 94, subject: Human Radiation Research

2. General Leonard Wood Army Community Hospital just completed a search for records for human radiation exposures as requested by reference a.

3. Reference (b) is a second request for human radiation research records that was received this week (enclosure 1) expanding the time frame for the search. Records search must include from the year 1944 to present.

4. All departments/service chiefs listed on the distribution of this memorandum will take the necessary steps to ensure that a reasonable search of their areas of responsibility has been conducted.

5. Response to this memorandum will be done using the attached (enclosure 2) response sheet, signed by the department/service chief and returned to Patient Administration NLT COB 28 Feb 94.

6. POC is CPT Plante, 6-0490 or LT Torres, 6-3937.

2 Enclosures

KAREN N. PLANTE
CPT, MS
C, PAD

DISTRIBUTION:

Adjutant (Headquarters)
COI Coordinator
C. Clinical Support Division
C. Community Mental Health
C. Coordinated Care Division
C. Department of Dentistry
C. Department of Medicine
C. Department of Nursing
C. Department of Surgery
C. DPCCM
C. Education Division
C. IMD
C. Internal Review
C. Logistics
C. Ministry and Pastoral Care
C. Nutrician Care Division
C. PAD
C. Pathology
C. Personnel
C. Pharmacy
C. PMOS
C. Preventive Medicine
C. Psychiatry & Neurology
C. Radiology
C. RMD

HSXP (40-14c)

MEMORANDUM FOR Chief, Patient Administration Division

SUBJECT: DoD Human Radiation Research Review

1. A reasonable search of documents and records located in my areas of responsibility has been conducted. The results are as follows (mark as appropriate):

X a. No documents or records referring to the time period 1944-present, relating to human research involving ionizing radiation were found in my areas.

_____ b. I have identified documents referring to the time period 1944-present which may involve human radiation research. I request the project officer review these documents to determine their applicability to human radiation research.

2. Point of contact is CTC D. Fleshin 3-596-0472
(name and phone)

Diane J Fleshin
Signature of verifying official

Education Division
Department/Service

1 Mar 94
Date

HSXP (40-14c)

MEMORANDUM FOR Chief, Patient Administration Division

SUBJECT: DoD Human Radiation Research Review

1. A reasonable search of documents and records located in my areas of responsibility has been conducted. The results are as follows (mark as appropriate):

X a. No documents or records referring to the time period 1944-present, relating to human research involving ionizing radiation were found in my areas.

_____ b. I have identified documents referring to the time period 1944-present which may involve human radiation research. I request the project officer review these documents to determine their applicability to human radiation research.

2. Point of contact is MR RAY, 6-1357 (name and phone).

Richard N. Ray
Signature of verifying official

PLANS MOBILIZATION, OPS & SECURITY
Department/Service

28 FEB 1994
Date

HSXP (40-14c)

MEMORANDUM FOR Chief, Patient Administration Division

SUBJECT: DoD Human Radiation Research Review

1. A reasonable search of documents and records located in my areas of responsibility has been conducted. The results are as follows (mark as appropriate):

__X__ a. No documents or records referring to the time period 1944-present, relating to human research involving ionizing radiation were found in my areas.

_____ b. I have identified documents referring to the time period 1944-present which may involve human radiation research. I request the project officer review these documents to determine their applicability to human radiation research.

2. Point of contact is Col Michael W. Judal (314) 596-0408
(name and phone)

Michael W. Judal
Signature of verifying official

USA DENTAC FLW MO. U.S. Army
Department/Service

28 Feb. 94
Date

HSXP (40-14c)

MEMORANDUM FOR Chief, Patient Administration Division

SUBJECT: DoD Human Radiation Research Review

1. A reasonable search of documents and records located in my areas of responsibility has been conducted. The results are as follows (mark as appropriate):

__X__ a. No documents or records referring to the time period 1944-present, relating to human research involving ionizing radiation were found in my areas.

_____ b. I have identified documents referring to the time period 1944-present which may involve human radiation research. I request the project officer review these documents to determine their applicability to human radiation research.

2. Point of contact is Jan Clark, 6-0520.
(name and phone)

JOHN C. KUBINA, MAJ, MS
Signature of verifying official

Resource Management Division
Department/Service

28 February 1994
Date

HSXP (40-14c)

MEMORANDUM FOR Chief, Patient Administration Division

SUBJECT: DoD Human Radiation Research Review

1. A reasonable search of documents and records located in my areas of responsibility has been conducted. The results are as follows (mark as appropriate):

X a. No documents or records referring to the time period 1944-present, relating to human research involving ionizing radiation were found in my areas.

_____ b. I have identified documents referring to the time period 1944-present which may involve human radiation research. I request the project officer review these documents to determine their applicability to human radiation research.

2. Point of contact is SSG Samuel VARGAS, 6-9069.
(name and phone)

Vijay K Sangar

VIJAY K. SANGAR, MAJ, MC
Signature of verifying official

Ch, Department of Radiology
Department/Service

18 FEB 94
Date

HSXP (40-14c)

MEMORANDUM FOR Chief, Patient Administration Division

SUBJECT: DoD Human Radiation Research Review

1. A reasonable search of documents and records located in my areas of responsibility has been conducted. The results are as follows (mark as appropriate):

(X) a. No documents or records referring to the time period 1944-present, relating to human research involving ionizing radiation were found in my areas.

( ) b. I have identified documents referring to the time period 1944-present which may involve human radiation research. I request the project officer review these documents to determine their applicability to human radiation research.

2. Point of contact is MAJ Elaine G. Gross. 6-0451
(name and phone)

Elaine G. Gross
Signature of verifying official

C, CSD
Department/Service

25 July 94
Date

HSXP (40-14c)

MEMORANDUM FOR Chief, Patient Administration Division

SUBJECT: DoD Human Radiation Research Review

1. A reasonable search of documents and records located in my areas of responsibility has been conducted. The results are as follows (mark as appropriate):

__X__ a. No documents or records referring to the time period 1944-present, relating to human research involving ionizing radiation were found in my areas.

_____ b. I have identified documents referring to the time period 1944-present which may involve human radiation research. I request the project officer review these documents to determine their applicability to human radiation research.

2. Point of contact is COL Phyllis Farson, 596-0441.
(name and phone)

Phyllis H Farson Col AN

PHYLLIS H. FARSON, COL, AN, C, DEPT OF NURS
Signature of verifying official

Department of Nursing
Department/Service

25 February 1994
Date

HSXP (40-14c)

MEMORANDUM FOR Chief, Patient Administration Division

SUBJECT: DoD Human Radiation Research Review

1. A reasonable search of documents and records located in my areas of responsibility has been conducted. The results are as follows (mark as appropriate):

__X__ a. No documents or records referring to the time period 1944-present, relating to human research involving ionizing radiation were found in my areas.

_____ b. I have identified documents referring to the time period 1944-present which may involve human radiation research. I request the project officer review these documents to determine their applicability to human radiation research.

2. Point of contact is JERRY SNOBL 6-2018.
(name and phone)

Signature of verifying official

C&I
Department/Service

25 Feb 94
Date

HSXP (40-14c)

MEMORANDUM FOR Chief, Patient Administration Division

SUBJECT: DoD Human Radiation Research Review

1. A reasonable search of documents and records located in my areas of responsibility has been conducted. The results are as follows (mark as appropriate):

✓ a. No documents or records referring to the time period 1944-present, relating to human research involving ionizing radiation were found in my areas.

_____ b. I have identified documents referring to the time period 1944-present which may involve human radiation research. I request the project officer review these documents to determine their applicability to human radiation research.

2. Point of contact is CPT Plante 6-0490.
(name and phone)

Karen M. Plante
Signature of verifying official

PAD
Department/Service

25 Feb 94
Date

HSXP (40-14c)

MEMORANDUM FOR Chief, Patient Administration Division

SUBJECT: DoD Human Radiation Research Review

1. A reasonable search of documents and records located in my areas of responsibility has been conducted. The results are as follows (mark as appropriate):

__X__ a. No documents or records referring to the time period 1944-present, relating to human research involving ionizing radiation were found in my areas.

_____ b. I have identified documents referring to the time period 1944-present which may involve human radiation research. I request the project officer review these documents to determine their applicability to human radiation research.

2. Point of contact is _____.
(name and phone)

M L SAMPSON, M D
COL MC

Signature of verifying official

Department/Service

23 Feb 94

Date

HSXP (40-14c)

MEMORANDUM FOR Chief, Patient Administration Division

SUBJECT: DoD Human Radiation Research Review

1. A reasonable search of documents and records located in my areas of responsibility has been conducted. The results are as follows (mark as appropriate):

__X__ a. No documents or records referring to the time period 1944-present, relating to human research involving ionizing radiation were found in my areas.

_____ b. I have identified documents referring to the time period 1944-present which may involve human radiation research. I request the project officer review these documents to determine their applicability to human radiation research.

2. Point of contact is Gloria A. Bradshaw, 596-0475.
(name and phone)

DENNIS R. PAYNE, MAJ, MS
Signature of verifying official

Chief, Logistics Division
Department/Service

23 February 1994
Date

HSXP (40-14c)

MEMORANDUM FOR Chief, Patient Administration Division

SUBJECT: DoD Human Radiation Research Review

1. A reasonable search of documents and records located in my areas of responsibility has been conducted. The results are as follows (mark as appropriate):

✓ a. No documents or records referring to the time period 1944-present, relating to human research involving ionizing radiation were found in my areas.

_____ b. I have identified documents referring to the time period 1944-present which may involve human radiation research. I request the project officer review these documents to determine their applicability to human radiation research.

2. Point of contact is Sgt Stovall 6-6552 (name and phone).

KEVIN J. TOOK
MAJ, MC
567-72-7211

Signature of verifying official

P+N

Department/Service

23 Feb 94

Date

HSXP (40-14c)

MEMORANDUM FOR Chief, Patient Administration Division

SUBJECT: DoD Human Radiation Research Review

1. A reasonable search of documents and records located in my areas of responsibility has been conducted. The results are as follows (mark as appropriate):

X a. No documents or records referring to the time period 1944-present, relating to human research involving ionizing radiation were found in my areas.

X see below b. I have identified documents referring to the time period 1944-present which may involve human radiation research. I request the project officer review these documents to determine their applicability to human radiation research.

2. Point of contact is Mr James M. Pitt 67038.
(name and phone)

James M Pitt
Signature of verifying official

Chief, Internal Review Office
Department/Service

1 March 1994
Date

The Radiation Protection Officer reviewed the Audit records which made reference to human radiation research. The research consisted only of a medical research project involving ultrasounds of gallbladders in 1986. Ultrasound is non-ionizing radiation and does not fit the parameters of the information requested.

K.N.P

HSXP (40-14c)

MEMORANDUM FOR Chief, Patient Administration Division

SUBJECT: DoD Human Radiation Research Review

1. A reasonable search of documents and records located in my areas of responsibility has been conducted. The results are as follows (mark as appropriate):

__X__ a. No documents or records referring to the time period 1944-present, relating to human research involving ionizing radiation were found in my areas.

_____ b. I have identified documents referring to the time period 1944-present which may involve human radiation research. I request the project officer review these documents to determine their applicability to human radiation research.

2. Point of contact is Connie Lubina, 6-0407 .
(name and phone)

Mary L. DeShurley

MARY L. DESHURLEY
Signature of verifying official

Chief, Information Management Division
Department/Service

25 February 1994
Date

HSXP (40-14c)

MEMORANDUM FOR Chief, Patient Administration Division

SUBJECT: DoD Human Radiation Research Review

1. A reasonable search of documents and records located in my areas of responsibility has been conducted. The results are as follows (mark as appropriate):

(X) a. No documents or records referring to the time period 1944-present, relating to human research involving ionizing radiation were found in my areas.

_____ b. I have identified documents referring to the time period 1944-present which may involve human radiation research. I request the project officer review these documents to determine their applicability to human radiation research.

2. Point of contact is SFC Valvo (name and phone) 596-1507.

Pat. Valvo K. [illegible] MS
Signature of verifying official

ACofMHS
Department/Service

23 Feb 94
Date

HSXP (40-14c)

MEMORANDUM FOR Chief, Patient Administration Division

SUBJECT: DoD Human Radiation Research Review

1. A reasonable search of documents and records located in my areas of responsibility has been conducted. The results are as follows (mark as appropriate):

__X__ a. No documents or records referring to the time period 1944-present, relating to human research involving ionizing radiation were found in my areas.

_____ b. I have identified documents referring to the time period 1944-present which may involve human radiation research. I request the project officer review these documents to determine their applicability to human radiation research.

2. Point of contact is LARRY STONE, LTC MS.
(name and phone)

Larry Stone
Signature of verifying official

S Pharmacy Svc
Department/Service

23 Feb 94
Date

HSXP (40-14c)

MEMORANDUM FOR Chief, Patient Administration Division

SUBJECT: DoD Human Radiation Research Review

1. A reasonable search of documents and records located in my areas of responsibility has been conducted. The results are as follows (mark as appropriate):

___✓___a. No documents or records referring to the time period 1944-present, relating to human research involving ionizing radiation were found in my areas.

_____b. I have identified documents referring to the time period 1944-present which may involve human radiation research. I request the project officer review these documents to determine their applicability to human radiation research.

2. Point of contact is CH(MAJ) J.A. Roberts.
(name and phone)

Signature of certifying official

Chief Ministry & Pastoral Care
Department/Service

24 Feb 1994
Date

HSXP (40-14c)

MEMORANDUM FOR Chief, Patient Administration Division

SUBJECT: DoD Human Radiation Research Review

1. A reasonable search of documents and records located in my areas of responsibility has been conducted. The results are as follows (mark as appropriate):

X a. No documents or records referring to the time period 1944-present, relating to human research involving ionizing radiation were found in my areas.

_____ b. I have identified documents referring to the time period 1944-present which may involve human radiation research. I request the project officer review these documents to determine their applicability to human radiation research.

2. Point of contact is Dr Michael, 576-0462.
(name and phone)

David L. Nichols, MD COL, MC
Signature of verifying official

Dept Medicine
Department/Service

24 Feb 94
Date

HSXP (40-14c)

MEMORANDUM FOR Chief, Patient Administration Division

SUBJECT: DoD Human Radiation Research Review

1. A reasonable search of documents and records located in my areas of responsibility has been conducted. The results are as follows (mark as appropriate):

X a. No documents or records referring to the time period 1944-present, relating to human research involving ionizing radiation were found in my areas.

_____ b. I have identified documents referring to the time period 1944-present which may involve human radiation research. I request the project officer review these documents to determine their applicability to human radiation research.

2. Point of contact is LTC Janice A. Phelan 596-1762.
(name and phone)

Signature of verifying official

Nutrition Care Division
Department/Service

23 February 1994
Date

HSXP (40-14c) 23 February 1994

MEMORANDUM FOR Chief. Patient Administration Division

SUBJECT: DoD Human Radiation Research Review

1. A reasonable search of documents and records located in my areas of responsibility has been conducted. The results are as follows (mark as appropriate):

X a. No documents or records referring to the time period 1944-present, relating to human research involving ionizing radiation were found in my areas.

_____ b. I have identified documents referring to the time period 1944-present which may involve human radiation research. I request the project officer review these documents to determine their applicability to human radiation research.

2. Point of contact is MAJ Timothy W. Crain, 596-0050.
(name and phone)

TIMOTHY W. CRAIN, M.D., MAJ, MC
Signature of verifying official

Chief, Dept of Surgery
Department/Service

23 Feb 94
Date

HSXP (40-14c)

MEMORANDUM FOR Chief, Patient Administration Division

SUBJECT: DoD Human Radiation Research Review

1. A reasonable search of documents and records located in my areas of responsibility has been conducted. The results are as follows (mark as appropriate):

Knull a. No documents or records referring to the time period 1944-present, relating to human research involving ionizing radiation were found in my areas.

_____ b. I have identified documents referring to the time period 1944-present which may involve human radiation research. I request the project officer review these documents to determine their applicability to human radiation research.

2. Point of contact is _____.
(name and phone)

Signature of verifying official

KENNETH M. WILLIAMS
MAJ, MS
CHIEF, PERSONNEL DIVISION

Department/Service

Date 970223

HSXP-CC (1) 23 February 1994

MEMORANDUM FOR HSXP-PA

SUBJECT: Search for Human Radiation Research Documents

Negative reply is submitted.

JOHN D. ABSHIER
Chief, Coordinated Care Division

HSXP (40-14c)

MEMORANDUM FOR Chief, Patient Administration Division

SUBJECT: DoD Human Radiation Research Review

1. A reasonable search of documents and records located in my areas of responsibility has been conducted. The results are as follows (mark as appropriate):

__X__ a. No documents or records referring to the time period 1944-present, relating to human research involving ionizing radiation were found in my areas.

_____ b. I have identified documents referring to the time period 1944-present which may involve human radiation research. I request the project officer review these documents to determine their applicability to human radiation research.

2. Point of contact is SFC Gerardo Soto.
(name and phone)

Gerardo Soto
Signature of verifying official

Department of Pathology
Department/Service

23 February 1994
Date

HSXP (40-14c)

22 Feb 94

MEMORANDUM FOR Chief, Patient Administration Division

SUBJECT: DoD Human Radiation Research Review

1. A reasonable search of documents and records located in my areas of responsibility has been conducted. The results are as follows (mark as appropriate):

✓ a. No documents or records referring to the time period 1944-present, relating to human research involving ionizing radiation were found in my areas.

_____ b. I have identified documents referring to the time period 1944-present which may involve human radiation research. I request the project officer review these documents to determine their applicability to human radiation research.

2. Point of contact is LTC KOPP (314) 596-0469 (name and phone).

Daniel L. Kopp LTC, MC
Signature of verifying official

C, DPCCM
Department/Service

22 Feb 94
Date

HSXP (40-14c) 23 Feb 94

MEMORANDUM FOR Chief, Patient Administration Division

SUBJECT: DoD Human Radiation Research Review

1. A reasonable search of documents and records located in my areas of responsibility has been conducted. The results are as follows (mark as appropriate):

X a. No documents or records referring to the time period 1944-present, relating to human research involving ionizing radiation were found in my areas.

_____ b. I have identified documents referring to the time period 1944-present which may involve human radiation research. I request the project officer review these documents to determine their applicability to human radiation research.

2. Point of contact is M. Elizabeth Zuschlag 6-0551.
(name and phone)

M. Elizabeth Zuschlag
Signature of verifying official

Adjutant
Department/Service

23 Feb 94
Date

ARM1.941221.013ze

DEPARTMENT OF THE ARMY
HEADQUARTERS, US ARMY MEDICAL DEPARTMENT ACTIVITIES
FORT MONMOUTH, NEW JERSEY 07703-5000

REPLY TO ATTENTION OF

HSXS-PVM (40-38a)

1 March 1994

MEMORANDUM FOR CHIEF, CLINICAL INVESTIGATION REGULATORY OFFICE, CONSULTANT TO THE SURGEON GENERAL FOR CLINICAL INVESTIGATION, U.S. ARMY MEDICAL DEPARTMENT CENTER AND SCHOOL, FORT SAM HOUSTON, TEXAS 78234-6100

SUBJECT: Human Radiation Research

1. Reference memorandum, AMEDD Center and School, HSMC-GCI, 15 Feb 94, Subject: Human Radiation Research.

2. Patterson Army Community Hospital (PACH) is a small hospital whose radiology department is limited to diagnostic x-ray and mammography. There is no record of any other types of procedures ever being performed.

3. Preventive Medicine records are available back to 1987, Annual Historical Reports are destroyed after 5 years IAW AR 40-226, and no other records seem to be in existence.

4. The hospital radiologist, Dr. Helen Lim, has been here at PACH since 1977 and she stated that no research has been performed since she has been here.

5. The CECOM Safety Office's Health Physics Branch was contacted and they stated that they also were unaware of any radiation research ever being performed at PACH. (CECOM Safety chairs the installation's Radiation Control Committee and provides the installation with a radiation protection officer).

6. POC for this matter is MAJ Timothy M. Mallon DSN 992-2658/2579.

for Dolores G. Lowe
RICHARD A. GOLDMAN
COL, MC
Commanding

DEPARTMENT OF THE ARMY
McAFEE US ARMY HEALTH CLINIC
WHITE SANDS MISSILE RANGE, NEW MEXICO - 88002-5520

REPLY TO
ATTENTION OF

HSHM-MHC 2 March 1994

MEMORANDUM FOR Chief, Clinical Investigation Regulatory Office,
ATTN: HSMC-GCI, AMEDD Center & School, Fort Sam
Houston, TX 78234-6125

SUBJECT: Human Radiation Research

1. Reference memorandum, AMEDD Center & School, HSMC-GCI, 25 February 1994, subject: Human Radiation Research.

2. The following information is provided from research into the historical files and from interviews with employees of McAfee USA Health Clinic:

a. There is no incidence of any Radiation Research ever being conducted at McAfee in the existing historical reports from 1978 thru 1993.

b. Ms Dolores Esparza, an employee since 1964, has no knowledge of any Radiation Research having been conducted at McAfee USA Health Clinic.

c. Ms Sharon Reese, Nuclear Effects Directorate, White Sands Missile Range, AMC, found no evidence of Human Research in the historical reports or in personnel interviews.

3. Any questions concerning the findings at McAfee USA Health Clinic should be directed to the undersigned, (505)678-1138.

KIMBERLY A. THOMPSON
CPT, MS
Health Care Administrator

HSID-IM (HSMC/28 Janury 1994) (40-38a) 1st End
SUBJECT: Human Radiation Research

Commander, USA MEDDAC, ATTN: Information Management Division,
Fort Drum, New York 13602-5004 17 February 1994

FOR Chief, Clinical Investigation Regulatory Office,
ATTN: HSMC-GCI, 1608 Stanley Road, AMEDD Center & School
Fort Sam Houston, Texas 78234-6125

1. The MEDDAC at Fort Drum, New York has appointed Mrs. Carol Flannery as the responsible project officer. She is Chief, of the Information Management Division within the Medical Treatment Facility (MTF), and can be reached at voice DSN 341-6232 (315-772-6232) and FAX DSN 341-7450 (315-772-7450).

2. An announcement was made at the MTF staff meeting on Tuesday, 8 Februry 1994 concerning the effort underway. Anyone having any information related to the subject was asked to inform the project officer, but no responses were given.

3. Mrs. Flannery contacted the Medical Librarian and the Plans, Training, Mobilization and Security Division within the MTF and the Directorate of Plans and Training on the Installation. Because of the reactivation of Fort Drum in 1986 any prior records were unavailable and no one had any knowledge of Human Radiation Research conducted at Fort Drum.

Brenda Channing-Mulick MAS, MS, ADCA
for JAMES C. KOHLER
LTC, MS
Deputy Commander for
Administration

DEPARTMENT OF THE ARMY
SENECA ARMY DEPOT
ROMULUS, NEW YORK 14541-5001

March 9, 1994

REPLY TO ATTENTION OF

Occupational Health Clinic

MEMORANDUM FOR Chief, Clinical Investigation Regulatory Office,
ATTN: HSMC-GCI,, 1608 Stanley Road, AMEDD Center & School
Ft. Sam Houston, TX 78234-6125

SUBJECT: Human Radiation Research

1. There is no historical data at the Seneca Army Depot Activity Occupational Health Clinic related to human research involving ionizing radiation.

2. Seneca's Radiation Protection Officer, Michael Lewis, has no knowledge of any such research at Seneca Army Depot Activity nor does he find any data relating to this matter.

Faye M. Jensen, RN
FAYE M. JENSEN, RN
Occupational Health Nurse

HSID-WV 15 February 1994

MEMORANDUM FOR HSMC-GCI

SUBJECT: Chief Clinical Investigation Regulatory Office

1. Reference: Memorandum dated 28 January 1994.

2. Watervliet Arsenal has no record of any research involving radiation exposure of human subjects between 1944 and 1974, or any other time period.

3. Point of contact is Stephanie P. Wolfe, Chief Occupational Health Nurse or Jim Mack, Safety Specialist, Ionizing Radiation Control Officer at DSN 974-4195 or 974-5635

James Mack
Safety Specialist
Safety Office

Stephanie P. Wolfe, R.N.
Chief Nurse
WVA Health Clinic

HSUA-HQ (HSMC-GCI/3 March 1994) 40-38a 1st End CPT R. Miller/DSN 866-2265

Reynolds Army Community Hospital, CDRUSAMEDDAC, ATTN: HSUA-IM, Fort Sill, OK 73503-6300

FOR Commander, U.S. Army Medical Department Center and School, ATTN: HSMC-GCI (MAJ John D. Grabenstein)

SUBJECT: Search for Records of Human Radiation Research

1. Reference paragraph 5 of the the basic memorandum. We have researched the areas listed below:

a. Department of Radiology, MSG Armstrong (NCOIC), negative response. Reynolds is not a research facility.

b. Records Transmittal and Receipt, SF Form 135, dating back to 1966 were reviewed for Human Radiation Research, negative response.

c. Quality Improvement/Risk Management. Debbie Gatlin, negative response.

d. Radiation Protection Officer - SGT Jefferies, negative response.

2. Point of Contact (POC) is Mrs. Cynthia A. Jones, DSN 866-2265 or fax DSN 866-2329.

JOSEPH T. ANDRONACO
COL, MC
Commanding

DEPARTMENT OF THE ARMY
DUNHAM U.S. ARMY HEALTH CLINIC, FGGM MEDDAC
CARLISLE BARRACKS, PENNSYLVANIA 17013-5003

REPLY TO
ATTENTION OF:

HSXR-CBK-CS

10 March 1994

MEMORANDUM THRU Commander, Dunham U.S. Army Health Clinic, Carlisle Barracks, PA 17013

FOR Clinical Investigation Regulatory Office, U.S. Army Medical Department Center and School, Fort Sam Houston, TX 78234-6100

SUBJECT: Human Radiation Research

1. This memorandum is confirming a negative response from Dunham U.S. Army Health Clinic.

2. During the course of the investigation the following areas were searched for possible information:
   a. The Military History Institute
   b. Medical Logistics/Medical Maintenance Section
   c. Personnel assigned within the past 20 years
   d. Medical Records
   e. Radiology Section

3. Historically, Carlisle Barracks was supported by General Hospital 31, a 900 patient hospital with a staff of 500 officers and enlisted men including quartermaster activities support from December 1918 - July 1920. This facility supported soldiers returning from World War I with training in trade skills as well as medical, surgical, nursing and rehabilitation services. The major complaints from the patients at that time were poor food preparation and disciplinary actions taken against the soldiers who were absent without leave.

4. The Medical Field Service School was established in July of 1920. The hospital became a station hospital remaining to support the facilities and activities on post. The Medical Field Service School emphasized preventive medicine and field sanitation. There were no written accounts or academic requirements regarding any radiation experimentation during this time period.

5. A new facility was constructed on 6 December 1961 which became Dunham U.S. Army Hospital. The hospital was named in honor of Major General George Clark Dunham, Medical Corps, 27 July 1887 - 4 October 1954, who, during his exceptional military career, served at Carlisle Barracks. Investigating the capabilities of Dunham U.S. Army Hospital proved difficult

because most of the records were retired. The medical logistics and medical maintenance records are kept for 5 years and there are no indications of any experimental testing. A member of our nursing staff, Ms. Annie Raudabaugh was assigned to the hospital in 1964. After discussing the investigation with her, she confirmed that the radiology capability of the facility at that time was purely clinical radiology procedures. The facility was not equipped for research and she had no knowledge of any experimentation projects during her employment. She also stated that any difficult or traumatic cases were sent to Valley Forge Hospital or Walter Reed Army Medical Center because the hospital had only limited capabilities.

6. In July 1975 the operating rooms and the ward were closed; the ward space was converted to outpatient clinic space; and Dunham U.S. Army Hospital was converted to Dunham U.S. Army Health Clinic. Currently, we can perform clinical radiology procedures and mammography. A radiologist from Ft. Meade or a contract Radiology group must read the films.

7. The information available is sketchy, however the conclusion appears to be that the capability to perform any experimentation or research was not available at this facility.

8. The point of contact is CPT Teresa L. DePew, Chief, Clinical Support at Comm (717) 245-4572 or DSN 242-4572.

Teresa L. DePew

TERESA L. DEPEW
CPT, MS
C, Clinical Support

MAR 11 '94 04:57PM DUNHAM USAHC CDRS FH P.3/3

DEPARTMENT OF THE ARMY
US ARMY HEALTH CLINIC, FGGM MEDDAC
FORT INDIANTOWN GAP
ANNVILLE, PENNSYLVANIA 17003

ARM1.941221.013zl

HSXR-FIG

28 FEBRUARY 94

MEMORANDUM FOR RECORD for MAJ John D. Grabenstein, Regulatory Affairs Pharmacist

SUBJECT: Human Radiation Research

1. We looked for records relating to Human Radiation Research and found no records or annual historical reports at Fort Indiantown Gap.

2. We asked personnel who have historical knowledge of Fort Indiantown Gap, to include a Civilian Personnel Office employee who has been here since 1971, and there is no recollection of any information concerning human radiation research.

3. We looked at General Administrative files and found no evidence of any documentation of human radiation research.

4. There was previously a hospital at Fort Indiantown Gap, but no records or dates of its operation are available to personnel at this clinic.

5. Point of contact is the undersigned at COM 717-861-2091, or DSN 491-2091.

EILEEN M. ARNOLD, D.O.
DAC, Director

DEPARTMENT OF THE ARMY
TOBYHANNA army depot
11 MIDWAY ROAD
TOBYHANNA, PENNSYLVANIA
US Army Health Clinic

REPLY TO ATTENTION OF

HSXR-TH (40-38a) 10 March 1994

MEMORANDUM FOR COL Shannon M. Harrison, MC, Chief, Clinical Investigation Regulatory Office, U.S. Army Medical Department Center and School, Ft. Sam Houston, Texas 78234-6100

SUBJECT: Search for Records of Human Radiation Research

1. Reference: Memorandum, AMEDD Center and School, HSMC-GCI, 4 March 1994, subject: Human Radiation Research Investigation.

2. Negative response.

3. This facility, historically, only has the capability of diagnostic radiology, not ionizing radiation, and therefore is not, and never has been, able to conduct human radiation research.

4. Point of Contact is the undersigned at DSN 923-8776/8179, or commercial (301) 77-8776/8179.

NEY M. GORE, III
LTC, MC
Director of Health Services

ARM1.941221.013zn

DEPARTMENT OF THE ARMY
HEADQUARTERS UNITED STATES ARMY MEDICAL DEPARTMENT ACTIVITY
FORT JACKSON, SOUTH CAROLINA 29207-5720

REPLY TO ATTENTION OF

HSXL-MR (40-38a) 25 February 1994

MEMORANDUM THRU Chief Department of Information Management, ATTN: ATZJ-IM Fort Jackson, South Carolina 29207-5720

For Chief, Clinical Investigation Regulatory Office, ATTN: HSMC-GCI, 1608 Stanley Road, AMEDD Center & School, Fort Sam Houston, TX 78234-6125

SUBJECT: Human Radiation Research

1. Reference Memorandum dated 28 January 1994.

2. Several efforts were made to research records and resources relating to the subject. First of all, the Nuclear Regulatory License to use byproduct radioactive materials on humans at Moncrief Army Community Hospital was established in 1972. Prior to that, there are no records available to demonstrate research on humans with radiation.

3. Secondly, research was done by the medical records custodian, looking specifically at records which were identified with (PRI) Personnel Reliability Indicators. All retired records were sent to the National Record Center in St. Louis, MO. A statement from the medical records custodian is enclosed.

4. Thirdly, research was conducted at the Fort Jackson's Museum on 16 and 24 February. A ledger was donated which listed different types of operations performed during the late 1940's. However, there was not listed in the ledger a description of either how the surgery was performed or with what devices, only the patient's name and type of surgery. No other archives showed evidence of research performed on humans with the use of radiation. A statement for the Museum Representative is enclosed. Also, a statement from the Adjutant General is enclosed.

5. Finally, on 25 February 1994, Dr. Kent M. Plowman, COL MC, Chief of Clinical Investigations at Dwight David Eisenhower, Fort Gordon, Georgia was contacted. He stated that clinical investigational work from Fort Jackson, would have been reviewed by this service. The first clinical investigation documented was in the late 70's. It was an intraocular lens study, which did not involve radiation.

HSXL-MR (40-38a)
SUBJECT: Human Research Radiation

6. In conclusion, the research of records for this installation, Fort Jackson, S.C., does not show evidence of radiation research on humans.

7. For more information contact the Project Officer, CPT Cummings, at DSN 734-5104/4552.

FOR THE COMMANDER:

3 Encls

ALAN D. MEASE
COL, MC
Deputy Commander, Clinical Services

CF:
Deputy Cdr, Administration
C, IMO
C, PAD
RPO file

Cpt Cummings
Prev. med.

VIEW THE NOTE E01

Fr AG --JAC1 Date and time 02/15/94 14:21:30
(--MEDDAC --JAC1

FROM: ADJUTANT GENERAL
Subject: Reply to Request by CPT Cummings, Prev Med

The Adjutant General's Division has no records regarding radiation testing.

Pamela Garbarino

****
FORT JACKSON - THE ARMY'S COMMUNITY OF EXCELLENCE
****
E N D O F N O T E

PF1 Alternate PFs PF2 File NOTE PF3 Keep PF4 Erase PF5 Forward Note
PF6 Reply PF7 Resend PF8 Print PF9 Help PF10 Next PF11 Previous PF12 Return

DEPARTMENT OF THE ARMY
HEADQUARTERS UNITED STATES ARMY MEDICAL DEPARTMENT ACTIVITY
FORT JACKSON, SOUTH CAROLINA 29207-5720

REPLY TO
ATTENTION OF

HSXL-AD

1 March 1994

MEMORANDUM FOR Chief, Preventive Medicine Service

SUBJECT: Records Search for Personnel Radiation Testing

1. The purpose of this memorandum is to report that the Patient Administration Division (PAD) has conducted an extensive search for nuclear surety records as well as any other medical records identifying those who may have been involved with personnel radiation testing.

2. Approximately 90,000 medical records were reviewed for special markings or other indicators; none were found to contain information regarding subject request.

MARK K. BYNUM
MAJ, MS
Chief, Patient Administration
Division

ATZJ-PTM-P 17 February 1994

MEMORANDUM FOR Preventive Medicine Service

SUBJECT: Research Medical Files

1. The Fort Jackson Museum do not have any medical files in our reference collection. However, we do have old post newspaper, and a ledger listing patients and their treatment. Entries in this ledger are from 1940 - 1951.

2. The reference information we have was available to CPT Cummings when she came in on 15 February 1994.

Bessie Williams

BESSIE M. WILLIAMS
Museum Aide
Fort Jackson Museum

HSMC-GHI (40-38a) 28 February 1994

MEMORANDUM THRU Secretary of the General Staff, AMEDD Center & School

FOR COL Shannon M. Harrison, Chief, Clinical Investigative Regulatory Office (HSMC-GCI), AMEDD Center & School

SUBJECT: Response to "Human Radiation Research" Query, 27 January 1994.

1. The tasking cited above has been received and acted upon in accordance with your request.

2. This office holds no copies of the Medical Field Service School/Academy of Health Sciences annual historical reports for the period of 1944-74.

3. Original copies of these documents were probably forwarded to the historical staff component of the OTSG at the time of preparation. They have undoubtedly been long since "retired" to the National Archives and Records Administration (NARA) holdings.

4. A query and request for review of these documents by the NARA staff for material dealing with the subject of interest could be submitted to the NARA, but a definitive answer would probably require a wait of several months.

5. Please advise if this office can be of any additional assistance in pursuing this issue. POC is Dr. Austerman, 1-8914/8883.

Wayne R. Austerman

WAYNE R. AUSTERMAN, Ph.D.
Historian, AMEDDC&S

ARM1.941221.013zp

DEPARTMENT OF THE ARMY
UNITED STATES ARMY MEDICAL DEPARTMENT ACTIVITY
FORT HOOD, TEXAS 76544-5063

REPLY TO ATTENTION OF
HSXI-PMS-RP

22 FEBRUARY 1994

MEMORANDUM FOR Commander, U.S. Army Medical Department Center and School, ATTN: HSMC-GCI, Fort Sam Houston, Texas 78234-6100

SUBJECT: Human Radiation Research at DACH, FT Hood, Texas

1. Reference memorandum, AMEDD Center & School, HSMC-GCI, 15 Feb 94, subject as above.

2. Research inquires into Human Radiation Research at Fort Hood Darnall Army Community Hospital from 1953 to the present has yielded no findings. Research included inquiries to the Public Affairs Office at Ft Hood, Division of Clinical Investigations at Fort Sam Houston, and DACH Command Records at Ft Hood for periods 1953 to the present. DACH was built in 1965. DACH Command Records predating 1953 are achieved in the National Achieves and require knowledge of reference numbers in order to request those records from the National Achieves in Washington, D.C.

3. Darnall Army Community Hospital began utilizing radioisotopes for human use in 1979. No human radiation research has ever been performed here since this hospital was built in 1965 and we are confident that no human radiation research has ever been performed on this installation since its inception in 1942.

4. Project Officer for this memorandum is 1LT Charles Blue, Chief, Radiation Safety Office, phone number (817) 288-8248, DSN 738-8248.

FOR THE COMMANDER:

Paul C Mize

PAUL C. MIZE
Chief, Administrative Services

ARM1.941221.013zq

HSXI-IMD-AS (25) 28 February1994

MEMORANDUM FOR Radiation Safety Officer

SUBJECT: Radiation Testing

A search of the historical reports on USA MEDDAC and Darnall Army Community Hospital, Fort Hood, Texas, concerning Human Radiation Experiments revealed a no records finding. To my knowledge as the Records Management Officer for USA MEDDAC, Fort Hood, Texas, we do not, nor have we had any records concerning experiments conducted on humans involving radiation testing.

Judy K. Tyler

JUDY K. TYLER
Records Management Officer

DEPARTMENT OF THE ARMY
UNITED STATES ARMY HEALTH CLINIC
TOOELE ARMY DEPOT
TOOELE, UTAH 84074-5014

REPLY TO ATTENTION OF

ARM1.941221.013zr

HSHG-PCT (40)

7 March 1994

MEMORANDUM THRU Director of Health Services, USAHC, TEAD

FOR Chief, Clinical Investigation Regulatory Office, Attn: COL Shannon M. Harrison, MC, Fort Sam Houston, Texas

SUBJECT: Search for Records of Human Radiation Research

1. Negative reply, no records on this subject at U. S. Army Health Clinic, Tooele, Utah.

2. Point of contact, COL Richard J. Williams, MC, DSN 790-2575.

LESLIE L. CARSON
Administrative Officer

CF:
C, DPCCM

DEPARTMENT OF THE ARMY
HEADQUARTERS, U.S. ARMY MEDICAL DEPARTMENT ACTIVITY
9501 FARRELL ROAD, SUITE G-C11
FORT BELVOIR, VIRGINIA 22060-5901

REPLY TO ATTENTION OF

ARM1.941221.013zs

HXSA-PVM

MEMORANDUM FOR Commander, U.S. Army Medical Department Center and School, ATTN: COL Harrison, Chief, Clinical Investigation Regulatory Office, Fort Sam Houston, TX 78234-6100

SUBJECT: Human Radiation Research

1. In response to your request dated 15 February 1994 reference the use of humans for radiation research, the following is provided.

2. An exhaustive search of hospital historical records and conversations with personnel from Information Management Division (to include the records manager), Plans Training Mobilization and Security Office and Department of Radiology was conducted.

3. No records exist that would indicate that radiation testings of any kind have been conducted at DeWitt Army Community Hospital (DACH). In addition, DACH is a treatment facility which is not designed for this type of research or testing.

4. POC for the above information is CPT Wade B. McConnell, Environmental Science Officer, Radiation Protection Officer at 805-0936/0942.

James E. Brown

for WARREN A. TODD, JR.
COL, MC
Commanding

ARM1.941221.013zt

DEPARTMENT OF THE ARMY
MEDICAL DEPARTMENT ACTIVITY
FORT LEE, VIRGINIA 23801-5260

REPLY TO
ATTENTION OF

HSXO-PVM (40-38a) 28 February 1994

MEMORANDUM FOR Commander, U.S. Army Medical Department Center and School, ATTN: Chief, Clinical Investigation Regulatory Office (COL Shannon M. Harrison), Fort Sam Houston, Texas 78234-6100

SUBJECT: Human Radiation Research

1. Per your memorandum dated 15 February 1994, Subject: Human Radiation Research, the following information is submitted for Fort Lee, Virginia, Fort Pickett, Blackstone, Virginia, Defense General Supply Center, Richmond, Virginia and the Foreign Science and Technology Center, Charlottesville, Virginia:

a. No research involving human exposure to ionizing radiation has been conducted from 1944 to present.

b. Project Officer:

NAME: Clarence D. Thomas
Title: Environmental Science Officer
Unit: USAMEDDAC, Fort Lee, VA 23801-5260
Address: Commander
USAMEDDAC
ATTN: HSXO-PVM (ESO)
Fort Lee, VA 23801-5260
Phone No: Commercial: (804)765-2250; DSN: 359-2250
Phone No: Fax - Commercial (804)734-9645; DSN: 687-9645

2. Point of contact for further information/questions, is CPT Thomas, Preventive Medicine Service at DSN: 359-2250.

FOR THE COMMANDER:

Rita Lynn Gilman
RITA LYNN GILMAN
2LT, MS
Chief, Executive Services

DEPARTMENT OF THE ARMY
ANDREW RADER US ARMY HEALTH CLINIC
WALTER REED ARMY MEDICAL CENTER
FORT MYER, VIRGINIA 22211-5050

REPLY TO
ATTENTION OF:

HSHL-HQ

8 March 1994

MEMORANDUM FOR COL Shannon M. Harrison, MC, Chief, Clinical Investigation Regulatory Office Consultant to The Surgeon General for Clinical Investigation

SUBJECT: Search for Records of Human Radiation Research

1. We are unable to find administrative or centralized clinical records for the period of 1944 to the present indicating involvement of this medical treatment facility with human radiation research.

2. COL Albert Ettore, MC, the clinic commander from 1979 through 1990 was contacted by me. He has no knowledge of this clinic being involved with human radiation research. MAJ James McGee, MC, the clinic commander from 1990 through 1992, similarly has no knowledge of this clinic being involved with human radiation research.

3. The medical treatment facility at Ft. Myer, VA, has not been involved with inpatient services since 1948. There was a 120 bed hospital here prior to 1948. There was a "prisoner" ward here from 1944 - 1945. Records covering clinic activities for the inpatient facility are not available. This clinic has had a singular focus of outpatient primary care medicine. The civilian and military physicians attached to this facility have generally been generalists. All patient records at this facility are retired 36 months after the last clinic visit. We have not discovered any sequestered research patient records at this facility. Our regional affiliation has been the Walter Reed Army Medical Center in Washington, D.C. All human use research during these past four decades would have been channeled and monitored through the human use committee at Walter Reed.

4. Further information and assistance may be obtained by contacting LTC Gilbert Turner, the DCA DSN 226-3441 or commercial (703)696-3447.

Norman J. Martin, MD

NORMAN J. MARTIN
COL, MC
Commander, ARUSAHC

ARM1.941221.013zv

HSHL-WP (HSHL-WP/21 Mar 94) (340-1c) 1st End CPT Roth/lkl/
AV 225-1031
SUBJECT: Search for Records of Human Radiation Research

1. A negative response is submitted for this activity.

2. Contact was made with CPT Ronald Marchessault, Administrator, Dept of Radiology, Walter Reed Army Medical Center, who indicated no records exist there indicating any research conducted at this activity. This clinic has always been strictly outpatient services, and is a clinic within the Department of Primary Care and Community Medicine, Walter Reed Army Medical Center.

3. POC is CPT Roth, DSN 225-3427 or COMM (703) 695-3427.

for Steven D Roth, CPT, MS
ARTIE L. SHELTON, M.D.
COL, MC
Commanding

ARM1.941221.013zw

COMMANDER
USA MEDDAC PANAMA
UNIT 7139 (HSXU-PM-RP)
APO AA 34004

DEPARTMENT OF THE ARMY
ERS, U.S. ARMY MEDICAL DEPARTMENT ACTIVITY PANAMA
APO AA 34004-5000

1m Harrison Col MC 23Feb94

11 Feb 94

MEMORANDUM FOR Chief, Clinical Investigation Regulatory Office,
ATTN: HSMC-GCI, 1608 Stanley Road, AMEDD Center
& School, Fort Sam Houston, TX 78234-6125

SUBJECT: Human Radiation Research

1. No records found to indicate human radiation research was conducted at USA MEDDAC Panama.

2. A records review was conducted in the Department of Radiology and the Radiation Protection Office. Interviews were conducted with technicians in Nuclear Medicine and Radiology with over 18 years employment with USA MEDDAC Panama.

JOHN P. CUELLAR
CPT, MS
RPO

ARM1.941221.014aa

DEPARTMENT OF THE ARMY

U.S. ARMY MEDICAL DEPARTMENT CENTER AND SCHOOL
FORT SAM HOUSTON, TEXAS 78234-6100

REPLY TO ATTENTION OF

HSMC-GCI (40-38a)

S: 1 March 1994
26 January 1994

MEMORANDUM THRU Commander, Walter Reed Army Medical Center, Washington, DC 20307-5001

FOR Chief, Department of Clinical Investigation (HSHL-CI), Walter Reed Army Medical Center, Washington, DC 20307-5001

SUBJECT: Human Radiation Research

1. At the direction of the Secretary of Defense and The Surgeon General of the Army (Enclosure 1), all pertinent Army medical units will report on research involving radiation exposure of human subjects between 1944 and 1974. Responsibility for regulating reports of clinical investigation for U.S. Army Health Services Command (HSC) rests with the Clinical Investigation Regulatory Office (CIRO) of the U.S. Army Medical Department Center & School (AMEDD C&S).

2. All officers of the federal government are required to take immediate steps to ensure that any documents or records related to human research involving ionizing radiation are retained and not destroyed. This includes all letters, memoranda, reports, logs, handwritten notes, written procedures, and all other writings and other media, such as photographs, maps, and electronic media. Advise all persons responsible for routine document disposal to preserve these records.

3. The records sought are, by definition, at least 20 years old. To secure the confidence of the American people that the Department of Defense has undertaken all reasonable efforts to locate records that still exist, a standardized and thorough effort is required at each pertinent Army medical facility. To document this thorough inquiry, plan to accomplish each of the points of the attached procedure (Enclosure 2).

4. The first step is the designation of a responsible project officer. The project officer will assemble an inventory of existing research records, plus statements from records custodians to indicate the thoroughness of the search for records. Until specific instructions are given for the transfer of records, individual documents will not be removed from their present file series. No records will be destroyed or administratively retired.

5. Common and routine clinical practices (both established diagnostic and therapeutic interventions) involving ionizing radiation are excluded from the present inquiry. But all projects involving the systematic collection of data (i.e., clinical investigations) will be reported and their records secured, since they implicitly question established procedures. Our intent is for you to compile a complete list of titles of all research involving radiation and submit a considerably more limited collection of detailed information regarding exceptional studies (Enclosure 3).

6. Based on your earlier informal responses on this subject, we expect that most of the records you will discover will represent appropriate, ethical medical research. Some of this research will likely have supported the subsequent determination by the Food & Drug Administration that certain radiopharmaceuticals are safe and effective for diagnosis or therapy. Nonetheless, you will disclose all research and clinical investigations from this era involving ionizing radiation.

HSMC-GCI (40-38a)
SUBJECT: Human Radiation Research

7. A Human Radiation Interagency Working Group is coordinating the efforts of all federal departments. Similarly, a DOD working group is also being formed. COL David E. Suttle, MD, GS, is coordinating Army efforts. We will pass on additional or revised requirements from these groups to you as they are issued.

8. Additional information and assistance with preparation of documents may be obtained by contacting MAJ John D. Grabenstein, Regulatory Affairs Pharmacist, at DSN 471-2511 or commercial 210-221-2511.

John Harrison CLMC

SHANNON M. HARRISON
COL, MC
Consultant to The Surgeon General
for Clinical Investigation
Chief, Clinical Investigation
Regulatory Office

Enclosures

THE SECRETARY OF DEFENSE
WASHINGTON, DC 20301-1000

ARM1.941221.014ab

07 JAN 1994

MEMORANDUM FOR SECRETARIES OF THE MILITARY DEPARTMENTS
CHAIRMAN OF THE JOINT CHIEFS OF STAFF
UNDER SECRETARIES OF DEFENSE
DIRECTOR, DEFENSE RESEARCH AND ENGINEERING
ASSISTANT SECRETARIES OF DEFENSE
COMPTROLLER
GENERAL COUNSEL
DIRECTOR, OPERATIONAL TEST AND EVALUATION
ASSISTANTS TO THE SECRETARY OF DEFENSE
DIRECTOR OF ADMINISTRATION AND MANAGEMENT
DIRECTORS OF THE DEFENSE AGENCIES

SUBJECT: DoD Human Radiation Research Review

I have appointed Dr. Harold P. Smith, Assistant to the Secretary of Defense (Atomic Energy), as the DoD-wide focal point for the compilation and review of all Defense Department data or information related to ionizing radiation research with human subjects. He will work with the Interagency Working Group on this issue and coordinate our efforts with those of the other relevant agencies. I want to move quickly and thoroughly on this matter -- it should be given high priority.

The ATSD(AE) will chair a DoD working group to structure the process for data collection and analysis and development of a DoD overall plan of action. He will also be responsible for determining the outside organizations with which the Department has worked that might have such records, and the best way to preserve those records and obtain them for review. This ATSD(AE) led effort will be under the overall guidance of John Deutch, who is the senior department official responsible for this matter.

I request you take immediate steps to ensure that any documents or records in your office related to human ionizing radiation research are retained and not destroyed. This includes all letters, memoranda, reports, logs, handwritten notes, written procedures, and all other writings, as well as photographs, maps, and machine-readable materials. Your search should include all file indices of records retired to the Federal Records Center at Suitland, MD, or a search of those files at Suitland as appropriate. Please advise all persons responsible for routine document disposal procedures of the need to preserve these records.

Encl 1-1

Veterans who participated in atmospheric nuclear testing and the occupation of Hiroshima and Nagasaki are already included in the national Nuclear Test Personnel Review (NTPR) program and are not part of this effort.

Inquiries regarding this matter should be directed to Dr. Gordon K. Soper, Principal Deputy, ATSD(AE), (703) 697-5161.

Les Aspin.

Encl 1-2

HSMC-GCI (40-38a) 26 January 1994

MINIMUM PROCEDURES FOR IDENTIFYING HUMAN EXPERIMENTS INVOLVING EXPOSURE TO IONIZING RADIATION, 1944 TO 1974

1. The medical treatment facility (MTF) will appoint a responsible project officer to assemble an inventory of existing research records and statements from records custodians. This officer will hold the rank of Captain or GS-11 or higher and be aided by personnel from the Department of Clinical Investigation at the regional Army Medical Center. The project officer will furnish his or her name, title, unit, and voice and facsimile telephone numbers to the Clinical Investigation Regulatory Office at the AMEDD Center & School (DSN 471-2511) promptly after appointment.

2. The project officer will:

a. Task the MTF historian, public-affairs officer, adjutant, or similar officer to review all available annual historical reports for the period 1944 to 1974 for discussion of research involving human exposure to ionizing radiation. Photocopies of pages of such discussions, citing the year and page number, will be included in the summary report. The historian, adjutant, or other officer will type and sign a memorandum describing their findings, which will be included in the summary report.

b. Task the senior nuclear-medicine physician, radiologist, nuclear pharmacist, radiation oncologist, and other appropriate officers assigned to the MTF with reviewing all available administrative and centralized clinical records (excluding individual medical records) for the period 1944 to 1974 for discussion of research involving human exposure to ionizing radiation. The nuclear-medicine physician, senior radiologist, senior nuclear pharmacist, radiation oncologist, and other officers will each type and sign memoranda describing their findings, which will be included in the summary report.

c. Announce at staff meetings of the administrative, clinical, and other appropriate staffs of the MTF that an effort is underway to collect information about research involving human exposure to ionizing radiation. Request that personnel aware of such research inform the project officer of that information. Describe the steps taken in the summary report.

d. Take all other prudent steps needed to identify, secure, and inventory documentation of pertinent radiation research projects. Describe these steps in the summary report.

e. Based on all the preceding tasks, compile a typed list for the summary report of the titles of all research projects involving exposure of humans to ionizing radiation.

(1) On this list, precede the titles of those projects involving radiopharmaceuticals licensed by the FDA at the time of study or investigational radiopharmaceuticals subsequently licensed as safe and effective with the symbol (SE). Seek the expert guidance of the senior nuclear-medicine physician, senior radiologist, and senior nuclear pharmacist at the MTF in applying the SE designation.

(2) Precede the titles of those projects involving oncology groups (e.g., CALGB, GOG, POG, SWOG) with the symbol (OG). Follow the titles with the acronym of the oncology group and the oncology group protocol number (e.g., SWOG 123).

(3) Precede the titles of those projects involving external-source radiation therapy (e.g., for cancer or thyroid disease) used at a presumably safe and effective dose with the symbol (RT). Seek the expert guidance of the senior radiologist, radiation oncologist, or other specialist at the MTF in applying the WE designation. This senior specialist will type and sign a memorandum describing the appropriateness of the presumptive findings of well-established safety and efficacy.

f. For each research project that is not marked with one or more of the symbols cited above, provide on a separate sheet of paper as much of the information listed at Enclosure B as possible. Provide photocopies in the summary report of any one-page summaries discovered for studies not marked with a symbol.

3. Each Army Medical Center (MEDCEN) in CONUS has received this tasking, as well as certain other Army/Community Hospitals (MEDDACs) and Army Health Clinics. Project officers will report on all findings physically discovered at their MTF, whether it pertains to their own or some other federal MTF or research activity. Project officers at MEDCENS will promptly alert CIRO of findings at subordinate MTFs, prior to submitting their summary report.

4. The project officer will submit, through the chief of clinical investigation or other senior officer of the MTF, a summary report transmitting the items specified above and other pertinent information.

a. The report will specify all efforts taken that yielded no records.

b. Mail the summary report to Chief, Clinical Investigation Regulatory Office, ATTN: HSMC-GCI, 1608 Stanley Road, AMEDD Center & School, Fort Sam Houston, TX 78234-6125. Reports will be post-marked by 1 March 1994.

HSMC-GCI (40-38a) 26 January 1994

DETAILED INFORMATION NEEDED FOR CERTAIN STUDIES INVOLVING HUMAN EXPOSURE TO IONIZING RADIATION, 1944 TO 1974

1. For each experiment or project, provide:

a. Program or project title

b. Period and location of study. When was the first subject entered into the study? When was the last subject entered? When was the study concluded?

c. Persons who performed the study. Indicate principal and associate investigators, their academic titles and organizational affiliations (e.g., service, department).

d. DOD sponsoring organization (i.e., who funded the study?) (e.g., US Army Medical Research & Development Command, OTSG, other)

e. Number of subjects entered into the study

f. Purpose and description of the study. Specify, as known, the dose of radiation delivered (e.g., Roentgens, REMs, rads, Curies, Becquerels, Grays)

g. Effects of the study on participants. List as much information as is known regarding intended and unintended effects of the study.

h. Was there any medical or research follow-up after the study concluded?

i. (1) Was the study approved by any semblance of a scientific review board, a peer-review panel, an ethics committee, an institutional review board, or a human use committee? (2) Was informed consent obtained from the subjects? If yes, was verbal or written consent obtained?

2. Describe the types and nature of existing records (e.g., letters, memoranda, reports, logs, handwritten notes, written procedures, or any other writings or other media, such as photographs, maps, or electronic media) (itemize each type).

3. Extent of records:

a. Approximate number of pages of each type

b. Total volume required for all types (number of cubic meters)

c. Approximate number of classified records

DEPARTMENT OF THE ARMY
U.S. ARMY MEDICAL DEPARTMENT CENTER AND SCHOOL
FORT SAM HOUSTON, TEXAS 78234-6100

ARM1.941221.014ba

REPLY TO
ATTENTION OF

S: 1 March 1994
28 January 1994

HSMC-GCI (40-38a)

MEMORANDUM FOR Commander, All HSC MEDDACS and Health Clinics

SUBJECT: Human Radiation Research

1. At the direction of the Secretary of Defense and The Surgeon General of the Army (Enclosure 1), all Army medical units will report on research involving radiation exposure of human subjects between 1944 and 1974. AR 40-38 places responsibility for coordinating human research in U.S. Army Health Services Command (HSC) with the Clinical Investigation Regulatory Office (CIRO) of the U.S. Army Medical Department Center & School (AMEDD C&S).

2. All officers of the federal government are required to take immediate steps to ensure that any documents or records related to human research involving ionizing radiation are retained and not destroyed. This includes all letters, memoranda, reports, logs, handwritten notes, written procedures, and all other writings and other media, such as photographs, maps, and electronic media. Advise all persons responsible for routine document disposal to preserve these records.

3. The records sought are, by definition, at least 20 years old. To secure the confidence of the American people that the Department of Defense has undertaken all reasonable efforts to locate records that still exist, a standardized and thorough effort is required at each Army medical facility. To document this thorough inquiry, plan to accomplish each of the points of the attached procedure (Enclosure 2).

4. The first step is the designation of a responsible project officer. The project officer will assemble an inventory of existing research records, plus statements from records custodians to indicate the thoroughness of the search for records. Until specific instructions are given for the transfer of records, individual documents will not be removed from their present file series. No records will be destroyed or administratively retired.

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6. Based on earlier informal responses on this subject, we expect that most of the records you will discover will represent appropriate, ethical medical research. Some of this research will likely have supported the subsequent determination by the Food & Drug Administration that certain radiopharmaceuticals are safe and effective for diagnosis or therapy. Nonetheless, you will disclose all research and clinical investigations from this era involving ionizing radiation.

HSMC-GCI (40-38a)
SUBJECT: Human Radiation Research

7. A Human Radiation Interagency Working Group is coordinating the efforts of all federal departments. Similarly, a DOD working group is also being formed. COL David E. Suttle, MD, GS, is coordinating Army efforts. We will pass on additional or revised requirements from these groups to you as they are issued.

8. Additional information and assistance with preparation of documents may be obtained by contacting MAJ John D. Grabenstein, Regulatory Affairs Pharmacist, at DSN 471-2511 or commercial 210-221-2511.

John Harrison CLMC

SHANNON M. HARRISON
COL, MC
Consultant to The Surgeon General
for Clinical Investigation
Chief, Clinical Investigation
Regulatory Office

Enclosures

DEPARTMENT OF THE ARMY
U.S. ARMY MEDICAL DEPARTMENT CENTER AND SCHOOL
FORT SAM HOUSTON, TEXAS 78234-6100

REPLY TO ATTENTION OF

ARM1.941221.014c

S: 1 March 1994
15 February 1994

HSMC-GCI (40-38a)

MEMORANDUM FOR Commanders, All HSC Hospitals and Health Clinics

SUBJECT: Human Radiation Research

1. Reference memorandum, AMEDD Center & School, HSMC-GCI, 28 Jan 94, subject: Human Radiation Research.

2. The Assistant to the Secretary of Defense for Atomic Energy coordinates DOD's inquiry into human radiation research. He recently directed that the DOD inquiry cover the period from the 1944 to the present, not the 1944 to 1974 interval we requested in our original memorandum, referenced above.

3. Please relay this change to the responsible project officer for your medical treatment facility (MTF). While the change in period of inquiry greatly expands the number of pertinent clinical investigations involving ionizing radiation, projects considered by human-use committees from 1980 to the present are recorded in an electronic database to which we have access.

4. Your new mission is to report all research involving human exposure to ionizing radiation between 1944 and 1979, plus any research from 1980 to the present not considered by a human-use committee convened under AR 40-38. Report sufficient detail that the American public is satisfied with the thoroughness of your search at your facility.

5. To date, we know the identity of only nine project officers, out of 62 facilities addressed. Please assure that your project officer has identified himself or herself to us. Respond with name, title, unit, mailing address, and voice and fax telephone numbers to DSN 471-2511, commercial 210-221-2511, voice mail 471- or 210-221-9212, or fax 210-554-4756.

6. If your list of project titles exceeds 1 page in length, submit a labeled word-processing diskette, preferably in Word-Perfect 5.1 or 6.0 format. Advance copies may be sent by telefacsimile, if desired. Note that the fourth line of the first paragraph of enclosure 2-2 of the referenced memorandum should read "RT designation," not "WE designation."

7. Congressional interest in this subject continues to be strong. In the event your MTF finds so many records that it cannot complete its inquiry by 1 March 1994, provide an interim report by the suspense date, with a full report as soon as possible. Negative responses are required if you find no records.

8. Information and assistance may be obtained by contacting MAJ John D. Grabenstein, Regulatory Affairs Pharmacist, at DSN 471-2511, commercial 210-221-2511, voice mail 471- or 210-221-9212, or fax 210-554-4756.

SHANNON M. HARRISON
COL, MC
Chief, Clinical Investigation
Regulatory Office
Consultant to The Surgeon General
for Clinical Investigation

CF: COL Fedders, HSC

DEPARTMENT OF THE ARMY
U.S. ARMY MEDICAL DEPARTMENT CENTER AND SCHOOL
FORT SAM HOUSTON, TEXAS 78234-6100

ARM1.941221.015

REPLY TO ATTENTION OF

HSMC-GCI (40-38a)

15 March 1994

MEMORANDUM FOR RECORD

SUBJECT: Successes of Human Radiation Experimentation

1. The following accomplishments of military medicine can be cited in discussing the Army's role in exposure of human subjects to ionizing radiation. These accomplishments emphasize the hospitals of U.S. Army Health Services Command (HSC), but refer to other Army Medical Department (AMEDD) activities as well.

a. NUCLEAR MEDICINE & NUCLEAR PHARMACY:

(1) Over the last 40 years, Army hospitals participated in some 270 studies of the value of novel radio-pharmaceuticals. Research in Army hospitals contributed to the recognition of the safety and effectiveness of Gallium-67, Strontium-89, Technetium-99m, Indium-111, Iodine-131, Xenon-133, and other radioactive medications to diagnose or treat a variety of diseases, especially cancer. Each of these studies were conducted under the stringent requirements of the Food & Drug Administration (FDA) and the Nuclear Regulatory Commission (NRC), according to nationally recognized standards of informed consent and scientific peer review.

(2) Army scientists in medicine and pharmacy at Brooke Army Medical Center in San Antonio and Letterman Army Medical Center in San Francisco were among the first in the nation to attach radioactive Indium-111 to white blood cells and platelets and return them to a patient's blood stream. This intricate technique, now widely performed, aids the location of infections that might not otherwise be detected. Similar work involved labeling white cells with 99m-Technetium-Exametazine to evaluate localized infections and labeling red blood cells with 99m-Technetium to identify the location of gastric bleeding.

(3) Strontium-89 is now commonly accepted as a means of reducing the pain of certain bone cancers, recognized as safe and effective by FDA. This recognition would not have been possible without the cooperation of cancer patients at Army hospitals with Army investigators.

(4) Army hospitals were among the few sites that established the value of a compound called NP-59 as a method for obtaining images of the adrenal glands of the kidney. NP-59 includes Iodine-131, a well-studied isotope, as its source of radiation.

(5) In the late 1970s and early 1980s, Army researchers demonstrated the ability of radioactive Xenon-133 gas to detect disease in the lungs of burned patients. Performed at the U.S. Army Institute of Surgical Research (the famed "Army burn unit"), this research established that radioactive Xenon images detect changes in the lungs before conventional X-rays would have detected them. Other Xenon studies improved scientists' ability to study the right ventricle of the heart.

(6) Studies of the muscle function of the esophagus were improved by Army studies. Technetium-99m was linked to a chemical called sulfur colloid and mixed with scrambled eggs for these esophageal motility imaging projects.

(7) The Army Medical Department conducted the first Nuclear Pharmacy Residency Program in North America. For more than 10 years, it was the only program of its kind. The program is accredited by the American Society of Hospital Pharmacists (ASHP) and graduates one or two nuclear pharmacists per year.

(8) A variety of Army scientists are periodically selected by their civilian colleagues to serve in leadership roles of national professional associations, including the American College of Nuclear Physicians, the American Board of Pharmaceutical Specialties, and others.

(9) Researchers at Fitzsimons Army Medical Center, near Denver, are currently working on adopting a radioactive drug called 99m-Technetium-Sestamibi for a new use. The drug is currently used for measuring the amount of blood that flows through the heart, but is being investigated for value in detecting breast cancer.

(10) Current topics of interest to Army researchers include the use of monoclonal antibodies and other new technologies to better diagnose and treat cancers and many other diseases. For example, monoclonal antibodies can be selected that seek out the unique features of breast tumors or prostate tumors. These antibodies can then be attached to specific radioisotopes. Relatively weak radioisotopes are useful for detecting cancers with special cameras. High-energy radioisotopes attached to antibodies may eventually prove to be useful for attacking the tumor itself, and hopefully curing or reducing the severity of the disease.

b. RADIATION ONCOLOGY

(1) In the last 40 years, Army hospitals participated in more than 400 cooperative multisite oncology studies that evaluated the value and effects of radiation therapy. These cooperative studies involved Army physician investigators collaborating with their civilian colleagues from university and private teaching hospitals, in the search for the best means of diagnosing and treating a wide variety of cancers that afflict Army patients. About 15% of all cooperative oncology studies conducted at Army hospitals evaluate radiation therapy in the treat the disease (437 of 2,869 oncology group studies). More than half of all oncology patients receive radiation therapy to improve the quality of their life or to improve the cure rate of disease.

(2) A variety of Army scientists have been selected by their civilian colleagues to serve in leadership roles of national professional associations, including the American College of Radiation Oncology.

2. Sources for these comments include the following:

a. Citations in the Clinical Investigation Research System (CIRS) database maintained at Fort Detrick, accessed by the Clinical Investigation Regulatory Office (CIRO) at Fort Sam Houston and the Human Use Review & Regulatory Affairs Division (HURRAD) at Fort Detrick.

b. Telephone conversation with COL John Bauman, MC, Chief of Nuclear Medicine at Madigan Army Medical Center, Nuclear Medicine Consultant to The Surgeon General, DSN 782-1645.

HSMC-GCI (40-38a)
SUBJECT: Successes of Human Radiation Experimentation

c. Telephone conversation with LTC Richard Stotler, MS Pharm, BCNP, MS, Senior Nuclear Pharmacist at Fitzsimons Army Medical Center, director of the Nuclear Pharmacy Residency Program, DSN 943-3662.

d. Telephone conversation with LTC (Retired) Al Landry, BCNP, MS, widely recognized nuclear pharmacist at the University of Texas Health Science Center at San Antonio, 210-885-7726.

e. Telephone conversation with LTC Rahul M. Dewan, MC, Chief of Radiation Oncology at Madigan Army Medical Center, Radiation Oncology Consultant to The Surgeon General, DSN 782-2095.

3. Additional information may be obtained from our office by contacting MAJ John D. Grabenstein, Regulatory Affairs Pharmacist, at DSN 471-2511, commercial 210-221-2511, voice mail 471- or 210-221-9212, or fax 210-554-4756.

for SHANNON M. HARRISON
COL, MC
Consultant to The Army Surgeon General
for Clinical Investigation
Chief, Clinical Investigation
Regulatory Office

Army Regulation 40–7

ARM1.941221.016

Medical Services

Use of Investigational Drugs and Devices in Humans and the Use of Schedule I Controlled Drug Substances

Headquarters
Department of the Army
Washington, DC
4 January 1991

SUMMARY of CHANGE

AR 40-7
Use of Investigational Drugs and Devices in Humans and the Use of Schedule I Controlled Drug Substances

This revision includes new guidance on--

- The postmarketing surveillance of Food and Drug Administration approved New Drug Applications that are sponsored by The Surgeon General (para 2-6).
- The redesignation of the Army Investigational Drug Review Board as the Human Subjects Research Review Board (para 2-6).
- The procedures for processing of non-DA-sponsored Investigational New Drug (IND) applications and Investigational Device Exemptions (IDEs) (para 3-3).
- The procedures for processing investigator-sponsored IND applications and IDEs (para 3-4).
- The use of investigational devices (chaps 3 and 4, apps B and D).
- The application for use of Schedule I controlled substances in the clinical and the non-clinical setting (paras 4-5 and 4-6).
- The use of Group C cancer chemotherapy investigational agents (para 4-8).
- The use of cancer cooperative group protocols (para 4-8).
- The storage and accountability of investigational drugs and devices (para 4-10).
- The use of approved drugs for unapproved indications (para 4-12).
- Emergency procurement of drugs and vaccines from foreign suppliers (paras 4-13 and 4-14).

Headquarters
Department of the Army
Washington, DC
4 January 1991

*Army Regulation 40–7

Effective 4 February 1991

Medical Services

Use of Investigational Drugs and Devices in Humans and the Use of Schedule I Controlled Drug Substances

By Order of the Secretary of the Army:

CARL E. VUONO
General, United States Army
Chief of Staff

Official:

MILTON H. HAMILTON
Administrative Assistant to the Secretary of the Army

History. This UPDATE printing publishes a revision of this publication. Because the publication has been extensively revised, the changed portions have not been highlighted.

Summary. This revision incorporates the provisions of the March 1987 rewrite of the Federal Regulations governing Investigational New Drug applications and Investigational Device Exemptions (published as title 21, parts 312 and 812, respectively, Code of Federal Regulations (21 CFR 312, 812)). This revision discusses Department of the Army-sponsored, non-Department of the Army-sponsored, and investigator-sponsored categories for Investigational New Drug applications and Investigational Device Exemptions. It distinguishes between the process of Investigational New Drug and Investigational Device Exemption approval and the approval of research protocols under an Investigational New Drug or Investigational Device Exemption.

Applicability. This regulation applies to research, development, test, and evaluation programs and clinical investigation programs conducted by the Army.

Internal control systems. This regulation is subject to the requirements of AR 11–2. It contains internal control provisions but does not contain checklists for conducting internal control reviews. A checklist will be published at a later date.

Supplementation. Supplementation of this regulation and establishment of command and local forms are prohibited without the prior approval of HQDA (DASG–RDZ), 5109 Leesburg Pike, Falls Church, VA 22041-3258.

Interim changes. Interim changes to this regulation are not official unless they are authenticated by the Administrative Assistant to the Secretary of the Army. Users will destroy interim changes on their expiration dates unless sooner superseded or rescinded.

Suggested improvements. The proponent agency of this regulation is the Office of The Surgeon General. Users are invited to send comments and suggested improvements on DA Form 2028 (Recommended Changes to Publications and Blank Forms) directly to the Assistant Surgeon General for Research and Development, c/o Headquarters, U.S. Army Medical Research and Development Command, ATTN: SGRD–HR, Fort Detrick, Frederick, MD 21702-5012.

Distribution. Distribution of this publication is made in accordance with the requirements on DA Form 12–09–E, block number 3421, intended for command level D for the Active Army and U.S. Army Reserve. This publication is not distributed to the Army National Guard.

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*This regulation supersedes AR 40–7, 4 April 1975.

Chapter 1
Introduction

1–1. Purpose
This regulation prescribes Department of the Army (DA) policies and procedures applicable to the use of investigational drugs and devices and approved drugs for unapproved indications in humans and to the use of Schedule I controlled drug substances.

1–2. References
Required and related publications and referenced forms are listed in appendix A.

1–3. Explanation of abbreviations and terms
Abbreviations and special terms used in this regulation are explained in the glossary.

1–4. Overall principles and guidance
a. Research with investigational drugs and devices is of importance to the DA because—

(1) The research, development, test, and evaluation (RDTE) of new drugs and devices designed to treat or prevent diseases that threaten the fighting strength of the soldier are of strategic importance.

(2) Clinical investigations of new drugs and devices within Army medical treatment facilities (MTFs) and dental treatment facilities (DTFs) foster the development of new treatment modalities for the benefit of all Defense Enrollment Eligibility Reporting System eligible beneficiaries. Such clinical investigations are also an integral part of graduate medical education programs conducted at Army medical centers.

b. Procedures to be followed to ensure protection of the rights and welfare of human subjects who participate in investigational drug or device research will be those described in AR 70–25, for RDTE organizations, or AR 40–38, for clinical investigation services, as appropriate. Procedures to be followed to ensure humane use of animals in drug and device research will be those described in AR 70–18/SECNAVINST 3900.38B/AFR 169–2/DARPAINST 18/DNAINST 3216.1B/USUHSINST 3203.

c. Acceptable methods of obtaining funding for clinical investigation of investigational drugs and devices through grants and gifts are described in AR 40–38.

d. Nothing in this regulation is intended to supersede health hazard or safety reviews required by other Army regulations.

e. The guidance in this regulation pertains to the following:

(1) Use of investigational drugs and devices in humans to include Schedule I controlled substances in Army MTF, DTF, and RDTE organizations.

(2) Nonclinical use (that is, animal use or *in vitro* testing) of Schedule I controlled substances.

(3) Use of approved drugs for unapproved indications in humans.

Chapter 2
Responsibilities

2–1. The Surgeon General (TSG)
TSG will—

a. Prepare policies and regulations for research using investigational drugs, devices, or Schedule I substances.

b. Establish and maintain the Human Use Review and Regulatory Affairs Office attached to the U.S. Army Medical Research and Development Command and reporting to the Assistant Surgeon General for Research and Development.

c. Be the approving authority for all research protocols involving the use of DA-sponsored investigational drugs or devices.

d. Be the approving authority for all human use research protocols involving the use of Schedule I controlled substances regardless of the agency sponsoring the protocol or Investigational New Drug (IND) application.

2–2. Commander, U.S. Army Health Services Command (HSC)
The Commander, HSC, will—

a. Be the approving authority for all protocols involving non-DA-sponsored or investigator-sponsored investigational drugs or devices used within HSC except those involving Schedule I controlled substances.

b. Establish and maintain, within the U.S. Army Health Care Studies and Clinical Investigation Activity, the Clinical Investigation Program Division to coordinate and monitor clinical investigations that involve non-DA-sponsored and investigator-sponsored investigational drugs or devices.

c. Ensure that all requirements of this regulation, AR 70–25, and AR 40–38 are satisfied prior to the approval of clinical investigations involving non-DA-sponsored or investigator-sponsored investigational drugs or devices.

d. Be the approving authority for emergency procurement and use of investigational drugs in facilities that are organizationally a part of HSC.

2–3. Commanders, 7th Medical Command (7th MEDCOM) and 18th Medical Command (18th MEDCOM)
When a clinical investigation involving an investigational drug or device is proposed, the 7th and 18th MEDCOM Commanders will—

a. Be the approving authority for all protocols involving non-DA-sponsored or investigator-sponsored investigational drugs or devices used within their commands except those involving Schedule I controlled substances.

b. Ensure that all requirements of this regulation, AR 70–25, and AR 40–38 are satisfied prior to the approval of clinical investigations involving non-DA-sponsored or investigator-sponsored investigational drugs or devices.

c. Be the approving authority for emergency procurement and use of investigational drugs in facilities that are organizationally a part of their command.

2–4. Commander, U.S. Army Medical Department Activity—Japan (U.S. Army MEDDAC—Japan)
The Commander, U.S. Army MEDDAC—Japan, will—

a. Be the approving authority for emergency procurement and use of investigational drugs used at the U.S. Army MEDDAC—Japan.

b. Coordinate directly with the Human Use Review and Regulatory Affairs Office, c/o Commander, U.S. Army Medical Research and Development Command, ATTN: SGRD–HR, Fort Detrick, Frederick, MD 21702-5012, for review and approval of all protocols involving investigational drugs or devices.

2–5. Commanders of RDTE organizations
When research involving an investigational drug or device is proposed, commanders of RDTE organizations will ensure that all requirements of this regulation and AR 70–25 are satisfied.

2–6. Other responsible parties
a. The Chief, Human Use Review and Regulatory Affairs Office (HURRAO), will—

(1) Submit DA-sponsored IND applications and Investigational Device Exemptions (IDEs) directly to the Food and Drug Administration (FDA).

(2) Prepare and maintain records of all correspondence with the FDA concerning DA-sponsored IND applications and IDEs.

(3) Submit DA-sponsored New Drug Applications (NDAs) directly to the FDA.

(4) Conduct adverse drug reaction reporting and postmarketing surveillance programs for DA-sponsored, approved NDAs.

(5) Provide administrative support for the Human Subjects Research Review Board (HSRRB).

(6) Coordinate review and approval of all protocols involving investigational drugs or devices at U.S. Army MEDDAC—Japan.

b. HSRRB members will—

(1) Review and recommend to TSG the approval, deferral, or disapproval of research protocols involving investigational drugs or devices for which DA is the IND or IDE sponsor.

(2) Review and recommend to TSG the approval, deferral, or disapproval of research protocols involving investigational drugs or devices conducted under RDTE programs regardless of the individual or agency sponsoring the IND or IDE.

(3) Review and recommend to TSG the approval, deferral, or disapproval of all human use protocols involving the use of Schedule I controlled substances in Army conducted or sponsored research programs.

c. The sponsor of an IND or IDE will—

(1) Prepare and submit the IND or IDE to the FDA.

(2) Maintain records of all correspondence with the FDA concerning IND or IDE applications.

(3) Notify the FDA, all investigators, and approving human use committees of any significant adverse events, as defined in 21 CFR 312.32, resulting from the use of the investigational drug or device.

(4) Perform all other duties of the sponsor of an IND or IDE as detailed in 21 CFR 312 or 812.

d. The investigator will—

(1) Prepare a protocol in accordance with the policies and procedures of AR 40–38 for clinical investigations or AR 70–25 for RDTE funded research.

(2) Provide for protection of the rights and welfare of research volunteers in accordance with the policies and procedures of AR 40–38 for clinical investigations or AR 70–25 for RDTE funded research.

(3) Maintain adequate records of the receipt, storage, use, and disposition of all investigational drugs, devices, or Schedule I controlled substances.

(4) Prepare progress reports, including annual reports, required by the approving human use committee (HUC) or institutional review board (IRB), regulatory agencies, and the sponsor of the IND or IDE (see app B).

(5) Report serious and/or unexpected adverse experiences involving the use of an investigational device or drug to the sponsor and the HUC or IRB.

(6) Ensure that investigational drugs or devices are administered to subjects only under his or her personal supervision or the personal supervision of a previously approved associate investigator.

e. The investigator-sponsor will comply with paragraphs *c* and *d* above.

Chapter 3
Submission of Investigational new Drug Applications and Investigational Device Exemptions

3–1. General guidance

a. An approved IND or IDE is required in order to use investigational drugs or devices in clinical investigation or human research protocols. The approving authority for an IND or IDE is the FDA. The sponsor of the IND or IDE is responsible for filing the IND or IDE with the FDA and for all subsequent correspondence and recordkeeping associated with the IND or IDE. Records of IND or IDE maintained by DA agencies will be maintained in accordance with AR 25–400–2.

b. The format for an IND submission is outlined at appendix C. The format for an IDE submission is outlined at appendix D. A detailed description of IND requirements is published at 21 CFR 312. A detailed description of IDE requirements is published at 21 CFR 812.

c. The clinical investigation or research protocol that describes how an investigational drug or device is to be investigated is a portion of the IND or IDE. Procedures for submission and approval of these protocols are addressed in chapter 4 of this regulation.

3–2. Department of Army-sponsored IND or IDE

a. Submission and management of a DA-sponsored IND or IDE is the responsibility of the Assistant Surgeon General for Research and Development.

b. A DA-sponsored IND or IDE is prepared for submission by the U.S. Army Medical Materiel Development Activity, Fort Detrick, Frederick, MD 21702-5009. The IND or IDE is then forwarded to the Human Use Review and Regulatory Affairs Office, c/o Commander, U.S. Army Medical Research and Development Command, ATTN: SGRD–HR, Fort Detrick, Frederick, MD 21702-5012. The HURRAO submits the IND or IDE to the appropriate office of the FDA and is responsible for preparing and maintaining records of all communications with the FDA concerning a DA-sponsored IND or IDE.

3–3. Non-DA-sponsored IND or IDE

For a non-DA-sponsored IND or IDE the sponsor is usually a commercial pharmaceutical or device manufacturer. The IND or IDE sponsor will submit the IND or IDE to the FDA and is responsible for all correspondence with the FDA concerning the IND or IDE.

3–4. Investigator-sponsored IND or IDE

a. An individual investigator may sponsor an IND or IDE. In this circumstance the investigator will apply directly to the FDA to obtain FDA approval to use the investigational drug or device. The investigator-sponsor will prepare and maintain records of all correspondence with the FDA.

b. If the investigator-sponsor is an active duty member or civilian employee of the U.S. Army in the HSC, an information copy of the IND or IDE submission and any subsequent correspondence with the FDA will be sent to Commander, U.S. Army Health Services Command, ATTN: HSHN–I, Fort Sam Houston, TX 78234-6000. Investigator-sponsors in 7th or 18th MEDCOM will send a copy of the IND or IDE submission, and any subsequent correspondence with the FDA, to their respective MEDCOM commander or designee. After appropriate review, these headquarters will forward copies to the Human Use Review and Regulatory Affairs Office, c/o Commander, U.S. Army Medical Research and Development Command, ATTN: SGRD–HR, Fort Detrick, Frederick, MD 21702-5012.

Chapter 4
Procedures for Use of Investigational Drugs and Devices in U.S. Army Medical Treatment Facilities, Dental Treatment Facilities, and Research Facilities

4–1. General guidance

Acceptance by the FDA of an IND or IDE submission does not constitute approval to conduct research or clinical investigations with investigational drugs or devices in Army facilities. Research or clinical investigation protocols that employ investigational drugs or devices will be prepared in accordance with AR 40–38 or AR 70–25. Approval to conduct the research or clinical investigation must be obtained as described below depending on the sponsorship of the IND or IDE and the funding source for the research or clinical investigation.

4–2. Approval of protocols conducted with a DA-sponsored investigational drug or device

a. For research funded under RDTE appropriated funds the protocol will be—

(1) Reviewed by the human use and scientific review committees of the facility conducting the research.

(2) Reviewed and approved by the commander of the facility where the research will be conducted.

(3) Forwarded to the Human Use Review and Regulatory Affairs Office, c/o Commander, U.S. Army Medical Research and Development Command, ATTN: SGRD–HR, Fort Detrick, Frederick, MD 21702-5012.

(4) Reviewed by TSG's HSRRB prior to the start of research.

(5) Forwarded to TSG for action, as appropriate.

b. For clinical investigations funded by other than RDTE appropriated funds the protocol will be—

(1) Reviewed by the HUC and clinical investigation committee of the MTF or DTF where the investigation will be conducted. If the MTF or DTF at which the research is to be conducted does not have a clinical investigation committee and/or HUC, these reviews may be accomplished at the regional medical center with which the MTF or DTF is affiliated.

(2) Reviewed and approved by the commander of the MTF or DTF where the investigation will be conducted.

(3) Reviewed and approved by the HSC, 7th MEDCOM, or 18th MEDCOM commander, as appropriate.

(4) Forwarded to the Human Use Review and Regulatory Affairs Office, c/o Commander, U.S. Army Medical Research and Development Command, ATTN: SGRD–HR, Fort Detrick, Frederick, MD 21702–5012.

(5) Reviewed by TSG's HSRRB prior to the start of the clinical investigation.

(6) Forwarded to TSG for action, as appropriate.

4–3. Approval of protocols conducted with a non-DA-sponsored investigational drug or device

a. If the research is funded under RDTE appropriated funds, the protocol will be reviewed and approved as described in paragraph 4–2*a*.

b. If the clinical investigation is funded by other than RDTE appropriated funds the protocol will be—

(1) Reviewed by the HUC and clinical investigation committee of the MTF or DTF where the research will be conducted. If the MTF or DTF at which the research is to be conducted does not have a clinical investigation committee and/or HUC, these reviews may be accomplished at the regional medical center with which the MTF or DTF is affiliated.

(2) Reviewed and approved by the commander of the MTF or DTF where the research will be conducted.

(3) Reviewed and approved by the HSC, 7th MEDCOM, or 18th MEDCOM commander, as appropriate, prior to the start of the clinical investigation.

4–4. Approval of protocols conducted with investigator-sponsored investigational drugs or devices

a. If the research is funded under RDTE appropriated funds the protocol will be reviewed and approved as described in paragraph 4–2*a*.

b. If the clinical investigation is funded under other than RDTE appropriated funds the protocol will be reviewed and approved as described in paragraph 4–3*b*.

4–5. Clinical use of Schedule I controlled substances

a. For approval to use a Schedule I drug in human subjects, a protocol will be submitted as described in paragraph 4–2. A statement of the security, audit, and control provisions for the Schedule I substance will accompany the protocol and IND submissions.

b. The sponsor of the IND will provide the investigator with the following statement:

I hereby certify that on *(date)*, pursuant to 21 USC 355(i) and 21 CFR 312.1, I, *(Name and address of IND sponsor)* submitted an Investigational New Drug (IND) application to the Food and Drug Administration for:
(Name of investigational drug).
(Date)
(Signature of applicant)

For a DA-sponsored IND the statement will be provided by the HURRAO. The statement will be forwarded in triplicate by the investigator along with a Drug Enforcement Administration Certificate of Registration (DEA Form 225) to Drug Enforcement Administration, Department of Justice, P.O. Box 28083, Central Station, Washington, DC 20005.

4–6. Nonclinical use of Schedule I controlled substances

a. In order to conduct nonclinical research (that is, studies not involving human subjects) with Schedule I controlled substances, the researcher will submit DEA Form 225 along with three copies of the research protocol to Drug Enforcement Administration, Department of Justice, P.O. Box 28083, Central Station, Washington, DC 20005. The research protocol should provide the following information:

(1) Investigator's name, address, and current DEA registration number, if any.

(2) Institutional affiliation of the researcher.

(3) Qualifications of the researcher, including curriculum vitae and an appropriate list of publications.

(4) Title of the research project.

(5) Statement of the purpose of the research.

(6) Name and amount of controlled substance(s) involved.

(7) Description of the research to include number of species of research animals, dosage to be administered, route and method of administration, and duration of the project.

(8) Location where the research will be conducted.

(9) Statement of security provisions for storing the controlled substance(s) in order to prevent diversion.

(10) Proof of institutional approval to conduct the research.

(11) Indication of an approved, funded grant, if any.

b. The researcher will also comply with the provisions of AR 70–18/SECNAVINST 3900.38B/AFR 169–2/DARPAINST 18/DNAINST 3216.1B/USUHSINST 3203.

4–7. Investigational use of radiopharmaceuticals

For approval to use an investigational radiopharmaceutical, the protocol must first be reviewed and approved by a radiation control committee. In addition, the review and approval process described in paragraphs 4–2, 4–3, or 4–4 will also be observed.

4–8. National Cancer Institute (NCI) cooperative group protocols and Group C cancer chemotherapy investigational agents

A physician requesting approval to conduct an investigation under an NCI cooperative group protocol or to use a Group C drug for treatment of individual patients will initiate the investigation or treatment in accordance with directives published by HSC, 7th MEDCOM, or 18th MEDCOM commander, as appropriate.

4–9. Medical emergencies

a. A physician seeking approval for one-time use of an investigational drug for a patient in an emergency situation must contact the agency or individual sponsoring the IND for the drug. If the sponsor agrees to release the drug for emergency use, it is the sponsor's responsibility to obtain permission from the FDA to supply the drug to the requesting physician.

b. Before the drug may be used in an Army MTF the physician must, through his or her MTF commander, obtain the approval of the HSC, 7th MEDCOM, or 18th MEDCOM commander or designee. Within HSC, requests for emergency use of investigational drugs should be directed to the Commander, U.S. Army Health Care Studies and Clinical Investigation Activity, Fort Sam Houston, TX 78234–6060, AUTOVON 471–4541/2511. Commander of U.S. Army MEDDAC—Japan may approve emergency use of investigational drugs at that MEDDAC. Requests must include the patient's name; diagnosis; name, quantity, and source of the drug; medical officer responsible for the patient; and nature of the emergency. In cases where approval is granted, the HSC, MEDCOM commander, or Commander, U.S. Army MEDDAC—Japan will forward this information to the Medical Consultant at The Office of The Surgeon General, HQDA (SGPS–CP–M), 5109 Leesburg Pike, Falls Church, VA 22041-3258, AUTOVON 289–0148; and the Human Use Review and Regulatory Affairs Office, U.S. Army Medical Research and Development Command, ATTN: SGRD–HR, Fort Detrick, Frederick, MD 21702–5012.

c. It is the responsibility of the treating physician to notify appropriate clinical investigation committee and HUCs of the use of the investigational drug.

d. In cases where emergency use is approved, the treating physician will send a report summarizing the case to The Assistant Surgeon General for Research and Development, c/o Commander, U.S. Army Medical Research and Development Command, ATTN:

SGRD–HR, Fort Detrick, Frederick, MD 21702–5012, and to HSC, 7th MEDCOM, or 18th MEDCOM commander, as appropriate. For HSC facilities the report will be sent to U.S. Army Health Care Studies and Clinical Investigation Activity, ATTN: HSHN–I, Fort Sam Houston, TX 78234–6060. In addition to describing the circumstances and outcome of the use of the investigational drug the physician will include copies of any forms or reports furnished to a commercial manufacturer, other non-DA agency, or an individual in connection therewith.

4–10. Investigational drug and device use control

a. Procurement and storage. Investigational drugs and devices are the property of the sponsor throughout the study. The pharmacy is the appropriate storage area for all investigational drugs in MTFs. The pharmacy is responsible for the proper recording, labeling, storage, and dispensing of investigational drugs in accordance with the investigator's written orders. The dispensing of investigational drugs should be integrated with the rest of the inpatient or outpatient drug distribution system with respect to packaging, labeling, order receiving, profile maintenance, and delivery. The storage of these drugs, however, should be separate from the regularly stocked drugs in the pharmacy. An exception to the above storage procedure would be radiopharmaceutical dosage forms, which should be stored in the nuclear medicine service's area if appropriate security is provided. The preferred area for storing radiopharmaceuticals is a nuclear pharmacy co-located with the nuclear medicine service. The nuclear medicine service would be responsible for proper recordkeeping, labeling, storage, and handling of the radiopharmaceuticals subject to appropriate regulations. Otherwise, a complete record of each investigational drug will be maintained by the pharmacy and will contain the following information:

(1) Name of drug, dosage form, and strength.
(2) Title of protocol under which drug is used.
(3) Name(s) of investigator(s).
(4) Manufacturer or other source of drug.
(5) Amount of drug and date received.
(6) Perpetual inventory record of on-hand stocks of drug.
(7) Expiration date.
(8) Lot or control number.
(9) Name(s) of subject(s) using drug.
(10) Date(s) on which subject(s) receive drug and quantity dispensed.

Investigational device storage, security, and recordkeeping is determined based on the nature and use of the device. A knowledgeable user of the device will act as custodian of the device. The chief, clinical support division will maintain a listing of investigational devices in use in the hospital and the custodians for each device. The commander or director of research facilities (such as laboratories) that do not have a pharmacy will appoint a specific and knowledgeable custodian to maintain accountability for all investigational drugs or devices as noted above. If the research facility is located near an MTF with a pharmacy, it is recommended that the research facility commander or director pursue a cooperative agreement with the MTF commander to use the MTF pharmacy as custodian of investigational drugs. Security requirements for investigational drugs will be the same as those recognized for security of prescription drugs or drugs under DEA control, if applicable. Discrepancies in inventory record balances and on-hand balances will be resolved by the custodian of the investigational drug record. Discrepancies unable to be resolved by the custodian will be reported to the principal investigator and, if necessary, to the sponsor and FDA.

b. Dispensing. The pharmacy service or other designated investigational drug custodian will dispense investigational drugs on DD Form 1289 (DOD Prescription) or DA Form 4256 (Doctor's Orders) signed by the principal investigator or a co-investigator. In addition to labeling requirements specified in AR 40–2 for dispensed medications, the label of an investigational drug will indicate the investigational nature of the drug (that is, "For Investigational Use Only," or "Investigational Drug").

c. Administration. Nurses and other healthcare professionals called upon to administer investigational drugs will be provided the necessary information about basic pharmacology, storage, adverse effects, precautions, authorized prescribers, patient monitoring guidelines, and overall study objectives and procedures. For investigational devices, users will be trained in the use of the device and must have adequate knowledge of necessary calibration, application, and general use procedures for the device.

d. Records. Records for DA-sponsored investigational drugs and devices will be maintained as follows: For Phases I, II, and III, the investigator will ensure that, in addition to clinical records, a separate record is maintained. The record will include, as a minimum: A copy of the protocol and consent form (to include a Privacy Act Statement as prescribed by AR 340–21) used in the study; a list of subjects receiving the drug or device; the name, lot number, date and quantity of the drug or device; and, as appropriate, tests and laboratory procedures. For non-DA-sponsored investigational drugs or devices the investigator will also comply with any recordkeeping requirements imposed by the sponsor of the investigation.

e. Drug information. The commander of the facility in which the research is being conducted will establish a central unit where basic essential information on investigational drugs is maintained and can be made available to all authorized personnel. In MTFs, the pharmacy is the appropriate location for such a drug information center and the pharmacy and therapeutics committee (P and T committee), or therapeutic agents board (TAB), should act as the monitor of such activities. At a minimum, information on dosage, indications, expected effects, potential untoward effects, contraindications, storage requirements, preparation and administration instructions, and names and telephone numbers of principal and authorized associate investigators should be made available to personnel called upon to administer investigational drugs. Arrangements must be made to have required information available 24 hours a day.

f. Device information. The custodian of an investigational device will establish an information file for the device. This file will, as appropriate, contain the kind and quality of information described in paragraph *e* above for drugs.

g. Retention period. All records required by this paragraph will be kept for a minimum of 2 years after the date a marketing application is approved for the drug for the indication for which it is being investigated; or, if no application is to be filed or if the application is not approved for such indication, for a minimum of 2 years after the investigation is discontinued and FDA is notified. See also AR 25–400–2 (file no. 40–38a or 70–25a) for additional recordkeeping requirements.

4–11. Reporting of adverse experiences with investigational drugs or devices

a. An investigator who observes a serious and unexpected adverse reaction to an investigational drug or device will immediately notify the sponsor of the IND or IDE. For a DA-sponsored IND or IDE this notification will be made to the Human Use Review and Regulatory Affairs Office, c/o Commander, U.S. Army Medical Research and Development Command, ATTN: SGRD–HR, Fort Detrick, Frederick, MD 21702-5012 (AUTOVON 343–2165, Commercial (301) 663-2165). The investigator will also notify all HUCs that reviewed and approved the research protocol. Such reports must be rendered within 10 working days of the event.

b. Serious adverse experiences include any that are fatal, life threatening, permanently disabling, require inpatient hospitalization, or result in congenital anomalies, cancer, or overdose.

c. An unexpected adverse experience is any adverse experience not identified in nature, severity, or frequency in the investigator brochure supplied by the sponsor of the IND.

4–12. Use of an approved drug for an unapproved indication

Any marketed drug is an investigational new drug if a labeling change made after 9 October 1962 recommends or suggests new conditions of use under which the drug is not generally recognized as safe and effective by qualified experts. The preceding stipulation is not intended to limit the therapeutic options that a physician may

Glossary

Section I
Abbreviations

CFR
Code of Federal Regulations

DA
Department of the Army

DEA
Drug Enforcement Administration

DOD
Department of Defense

DTF
dental treatment facility

FDA
Food and Drug Administration

HSC
U.S. Army Health Services Command

HSRRB
Human Subjects Research Review Board

HUC
human use committee

HURRAO
Human Use Review and Regulatory Affairs Office

IDE
Investigational Device Exemption

IND
Investigational New Drug (application)

IRB
institutional review board

MEDCOM
medical command

MEDDAC
(U.S. Army) Medical Department activity

MTF
medical treatment facility

NCI
National Cancer Institute

NDA
New Drug Application

P and T committee
pharmacy and therapeutics committee

RDTE
research, development, test, and evaluation

TAB
therapeutic agents board

TSG
The Surgeon General

Section II
Terms

Adverse experiences
a. Serious. Any that are fatal, life threatening, permanently disabling, require inpatient hospitalization, or result in congenital anomalies, cancer, or overdose.

b. Unexpected. Any adverse experience not identified in nature, severity, or frequency in the investigator brochure supplied by the sponsor of the IND.

Approving authority
A military or civilian member of an organizational element of a DA component who has been delegated authority to approve the use of human subjects in research.

Associate investigator
A person who may be involved in the execution of research but does not have overall primary responsibility. The FDA refers to such an individual as a subinvestigator.

Clinical investigation
An organized inquiry into health problems for all conditions that are of concern in providing healthcare to beneficiaries of the military healthcare system, including active duty personnel, dependents, and retired personnel. The clinical investigation program is described in AR 40–38.

Co-investigator
A person who may be involved in the execution of research but does not have overall primary responsibility. The FDA refers to such an individual as a subinvestigator.

DA-sponsored IND
An IND application that identifies TSG or his or her designee as sponsor of the application.

Group C cancer chemotherapy investigational agents
Drugs that demonstrate efficacy within a tumor type in more than one study, alter the pattern of care of the disease in question, and are safely administered by properly trained physicians without requiring special supportive care facilities. The classification of an investigational drug into Group C and its distribution is administered by the NCI.

Human subject
a. A living individual about whom an investigator conducting research obtained data through interaction with the individual, including both physical procedures and manipulations of the subject or the subject's environment. The term does not include military or civilian personnel who are qualified to test by assignment to duties that call specifically for such qualifications, such as test pilots and test engineers.

b. A minor (child) is a person who has not attained the legal age for consent to treatments or procedures involved in research under the applicable laws of the jurisdiction in which the research will be conducted.

c. Human subjects may be thought of as direct objects when the research is to determine the effects of a new system on humans (for example, the effects of a weapon's blast on hearing) or as indirect objects when a test is conducted to determine how humans affect the ultimate performance of a system (doctrine concepts; training programs).

Human Subjects Research Review Board
The principal body of the Office of The Surgeon General for review of clinical investigation and research activities utilizing human subjects.

Human use committee
A committee or board established to provide initial and continuing review of research involving the use of human subjects. A HUC is fundamentally similar to an IRB (42 CFR 46) but has somewhat different authority as compared to an IRB. Within DOD, authority to approve the use of human subjects in research is vested in commanders. Commanders act on the recommendation of validly constituted HUCs. Outside DOD, IRBs tend to be vested with this authority.

Investigational device
a. A device that is not generally used in the diagnosis, cure, mitigation, treatment, or prevention of disease in humans and is not generally recognized as safe and effective.

b. Research is usually, but not necessarily, initiated to determine if the device is safe or effective.

Investigational drug
A drug may be considered investigational when the composition is such that its proposed use is not recognized for the use under the conditions prescribed, or its proposed use is not recommended or suggested in its approved labeling. Experts qualified by scientific training and experience evaluate the safety and effectiveness of drugs to make this determination.

Investigator
An individual who actually conducts a clinical investigation; that is, under whose immediate direction the test article is administered or dispensed to a subject.

Investigator-sponsored IND
An IND application for which the principal investigator of the drug is also identified as the sponsor of the application.

NCI cooperative group
A cooperative group of investigators in the field of cancer therapy who are registered with and sponsored by the NCI, National Institutes of Health, Bethesda, Maryland, which provides financial support to the group.

Non-DA-sponsored IND
An IND application sponsored by an agency or an individual not affiliated with the DA.

Phases of an investigation for investigational drugs
a. Phase I starts after adequate animal and *in vitro* data have been obtained and covers the first administration to humans of an investigational drug or device. It includes, as appropriate, studies to determine human safety, metabolism, immunogenicity, absorption, elimination, and other pharmacological action, preferred route of administration, and dosage. Phase I studies generally include 20 to 80 subjects.

b. Phase II covers use of an investigational drug or device in a limited number of patients for specific disease control or prophylaxis. The purpose of phase II is to determine potential usefulness, determine dosage range, and gather additional pharmacologic and pharmacokinetic data, and collect additional toxicity data. Phase II studies generally include no more than several hundred subjects.

c. Phase III provides for assessment of the safety, effectiveness, and optimum dosage schedules of the investigational drug or device in a larger sample of patients. Phase III studies generally include several hundred to several thousand subjects and are designed to compare investigational therapy to standard therapy in controlled clinical trials.

Postmarketing surveillance
Postmarketing surveillance is performed on FDA approved drugs. Postmarketing surveillance is designed to determine patterns of drug utilization and gather additional efficacy, adverse reaction, and toxicity data under general marketing conditions. For approved NDA for which TSG of the Army is the sponsor, the conduct of postmarketing surveillance will be the responsibility of the HURRAO.

Protocol
The written, detailed plan by which research is to be conducted. The plan contains, as a minimum—

a. The objectives of the project.
b. The information to be collected.
c. The means by which information will be collected and evaluated.
d. An assessment of potential risk and benefits to subjects.
e. Safety measures and other means to be used to reduce any risk to subjects.

Radiation control committee
A committee appointed by the commander to ensure that individual users of radioactive materials within the medical facility and each radionuclide used will be approved and controlled. The approval and control must be in accordance with the requirements specified in the conditions of the Nuclear Regulatory Commission license, the DA radioactive material authorization, and appropriate Federal directives.

Research
A systematic investigation that is designed to develop or contribute to generalizable knowledge. The term does not include individual or group training of military personnel such as combat readiness, effectiveness, proficiency, or fitness exercises (DOD Directive 3216.2.)

Research, development, test, and evaluation
The categories of research and development included in Program 6, Research and Development, and operational systems development contained in the Five-Year Defense Program.

Schedule I controlled drug substance
Any drug or substance by whatever official name, common or usual name, chemical name, or brand name listed in 21 CFR 1308.11; for example, heroin.

Sponsor
A person who initiates a clinical investigation but does not actually conduct the investigation; that is, the test article is administered to or dispensed to or used by a subject under the immediate direction of another individual. When an entity other than an individual (for example, a corporation or agency) initiates and conducts clinical investigation using one or more of its own employees, the corporation or agency is considered to be the sponsor and the employees are considered to be investigators.

Supplier (of a drug, vaccine, or biological product)
An activity that serves as a provider of drugs, vaccines, and biologicals used in an Army MTF. These providers include commercial pharmaceutical distributors, as well as elements of the military medical logistics system, such as installation medical supply accounts, U.S. Army medical materiel centers, Defense Personnel Support Center, and medical depots.

Treatment IND
An IND in which one of the protocols under the IND is a treatment protocol allowing the use of a promising investigational drug in patient care by physicians who agree to follow the protocol. Designation of treatment IND or treatment protocol status is made by the FDA.

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exercise in the course of practice when treating individual patients. However, in situations where data on drug effects from one or more patients are being systematically recorded by a physician for the purpose of substantiating or refuting a claim of therapeutic efficacy in an unlabelled indication for an approved drug, the physician is conducting a clinical investigation, and must adhere to the requirements of AR 40–38 (for clinical investigations) or AR 70–25 (for RDTE funded research) in conducting the investigation. Such a clinical investigation of a drug product that is lawfully marketed in the United States must be done under an IND, unless *ALL* of the following apply:

a. The investigation is not intended to be reported to FDA as a well-controlled study in support of a new indication for use, nor intended to be used for any other significant change in the labeling for the drug.

b. If the drug that is undergoing investigation is lawfully marketed as a prescription drug product, and the investigation is not intended to support any other significant change in the advertising for the product.

c. The investigation does not involve a route of administration or dosage level or use in a patient population or other factor that significantly increases the risks (or decreases the acceptability of the risks) associated with the use of the drug product.

d. The investigation is conducted in compliance with the requirements for human use review and informed consent set forth in AR 40–38.

e. The drug is not represented in a promotional context as being safe or effective for the purposes for which it is being investigated.

4–13. Emergency procurement of drugs from foreign suppliers

a. It is the policy of TSG that drugs used in an Army MTF will be those approved by the FDA and procured from suppliers in the United States. However, it is recognized that situations may arise when a drug cannot be procured in a timely manner from a supplier in the United States, especially in an MTF located outside of the continental United States. If an FDA approved drug is unavailable from a U.S. supplier, drugs distributed by foreign suppliers may be procured, provided one of the following circumstances exists:

(1) The drug is needed to save life, limb, or eyesight and the time required to procure the drug from a U.S. supplier would endanger the patient's well being.

(2) The drug is needed to continue life sustaining chronic therapy, and the time required to procure the drug from a U.S. supplier would cause an interruption of such therapy as to endanger the patient's well being.

b. Drugs purchased from foreign suppliers must contain the same active ingredient(s) and be formulated in the same dosage form as the like product procured from a U.S. supplier. If the active ingredient or dosage form of a product procured from a foreign supplier is not available in the United States, the drug will be considered investigational and the procedures described above for use of an investigational drug apply.

c. The procedures for emergency procurement of drugs from foreign suppliers are as follows:

(1) The chief of pharmacy services will initiate the request for purchase of a drug from a foreign supplier when in his or her professional judgment such a purchase is necessary.

(2) All purchase requests for drugs from a foreign supplier will be signed by the MTF commander or his or her designee.

(3) The chief of pharmacy services will maintain a record of the use of drugs procured from a foreign supplier. A copy of this record will be forwarded to the HSC, 7th MEDCOM, or 18th MEDCOM commander, as appropriate, or designee within 5 working days after the drug procured from the foreign supplier is no longer in use. A copy of the record will also be presented to the P and T committee or TAB at the MTF at the next regularly scheduled meeting. This record will consist of—

(*a*) The trade name, generic name, manufacturer, lot number, expiration date, amount, and source of the drug.

(*b*) A brief justification of why procurement of the drug from a foreign supplier was necessary.

(*c*) The name(s) and social security number(s) of patient(s) who received the drug procured from a foreign supplier.

4–14. Emergency procurement of vaccines and biological products from foreign suppliers

Vaccines and other biological products may not be procured from foreign suppliers if the same vaccine or biological product is available from a U.S. supplier. If there is a need to procure a vaccine or biological product that is not available from a supplier in the United States, the vaccine or biological product will be considered investigational and the procedures described above for use of an investigational drug apply.

Appendix A
References

Section I
Required Publications

AR 25–400–2
The Modern Army Recordkeeping System (MARKS). (Cited in paras 3–1*a* and 4–10*g*.)

AR 40–2
Army Medical Treatment Facilities General Administration. (Cited in para 4–10*b*.)

AR 40–38
Clinical Investigation Program. (Cited in paras 1–4*b* and *c*, 2–2*c*, 2–3*b*, 2–6*d*(1) and (2), 4–1, and 4–12 and in the glossary.)

AR 70–18/SECNAVINST 3900.38B/AFR 169–2/DARPAINST 18/DNAINST 3216.1B/USUHSINST 3203
The Use of Animals in DOD Programs. (Cited in paras 1–4*b* and 4–6*b*.)

AR 70–25
Use of Volunteers as Subjects of Research. (Cited in paras 1–4*b*, 2–2*c*, 2–3*b*, 2–5, 2–6*d*(1) and (2), 4–1, and 4–12.)

AR 340–21
The Army Privacy Program. (Cited in para 4–10*d*.)

DOD Directive 3216.2
Protection of Human Subjects in DOD-Supported Research. (Cited in the glossary.)

21 CFR 312
Investigational New Drug Application. (Cited in the summary paragraph and paras 2–6*c*(3) and (4), 3–1*b*, and 4–5*b*.)

21 CFR 812
Investigational Device Exemptions. (Cited in the summary paragraph and paras 2–6*c*(4) and 3–1*b*.)

21 USC 355
Federal Food, Drug, and Cosmetic Act. (Cited in para 4–5*b*.)

Section II
Related

A related publication is merely a source of additional information. The user does not have to read it to understand this regulation.

TB MED 525
Control of Hazards to Health from Ionizing Radiation Used by the Army Medical Department

21 CFR 314
Applications for FDA Approval to Market a New Drug or Antibiotic Drug

21 CFR 361.1
Radioactive Drugs for Certain Research Uses

21 CFR 1301
Registration of Manufacturers, Distributors, and Dispensers of Controlled Substances

21 CFR 1308.11
Schedules of Controlled Substances, Schedule I

45 CFR 46
Institutional Review Boards

Section III
Referenced Forms

DA Form 4256
Doctor's Orders

DD Form 1289
DOD Prescription

DEA Form 225
Drug Enforcement Administration Certificate of Registration. (This form may be obtained from Registration Unit, Drug Enforcement Administration, Department of Justice, Post Office Box 28083, Central Station, Washington, DC 20005.)

FDA Form 1571
Investigational New Drug Application (IND) Cover Sheet. (This form may be obtained from Reports Clearance Officer, PHS, Hubert H. Humphrey Building, Room 721–H, 200 Independence Ave., S.W., Washington, DC 20201, ATTN: PRA.)

Appendix B
Progress Reports for Investigational Drugs and Devices

B–1. Reports
The investigator will provide the sponsor of the IND or IDE with a periodic report (at least annually) of the progress of investigations conducted under the IND or IDE. It is the responsibility of the sponsor to consolidate these reports and forward the information to the FDA. For a DA-sponsored IND or IDE, the information will be submitted to Commander, U.S. Army Medical Materiel Development Activity, Fort Detrick, Frederick, MD 21702-5012.

B–2. Progress reports for investigational drugs
Periodic reports on an investigational drug will address the following:

a. A brief summary of the status of the study in progress and each study completed during the previous year to include the—

(1) Title of the study, its purpose, a brief statement identifying the patient population, and a statement as to whether the study is completed.

(2) Total number of subjects initially planned for inclusion in the study, number entered to date, number whose participation was completed as planned, number who withdrew from participation and the reason for their withdrawal.

b. A summary of information obtained during the previous year's investigation to include a—

(1) Narrative or tabular summary showing the most frequent and most serious adverse experiences by body system.

(2) Summary of all IND safety reports submitted during the previous year.

(3) List of subjects who died during participation in the investigation and cause of death for each.

(4) List of subjects who dropped out of the investigation in association with any adverse experience regardless of whether or not the adverse experience is thought to be drug related.

(5) Brief description of what information, if any, was obtained pertinent to an understanding of the drug's actions, including, for example, dose response and bioavailability information.

(6) List of preclinical studies completed or in progress during the past year and a summary of the major preclinical findings.

(7) Summary of any significant manufacturing or microbiological changes made during the past year.

c. A description of the general investigational plan for the coming year.

d. A description of any revisions in the investigator brochure and a copy of the new brochure.

e. A description of any significant Phase I protocol modifications made during the previous year, not previously reported as a protocol amendment to the IND.

f. A brief summary of significant foreign marketing developments.

g. If desired, a log of any outstanding business with respect to the IND requiring a response from the FDA.

B–3. Progress reports for investigational devices
For investigational devices the investigator will submit progress reports on the investigation to the sponsor, the monitor, and the reviewing

HUC at regular intervals, but in no event less often than yearly. The investigator will also report—

a. Any unanticipated adverse device effect occurring during an investigation. These reports are made to the sponsor and the reviewing HUC as soon as possible, but not later than 10 working days after the investigator learns of the event.

b. Withdrawal of approval by the reviewing HUC to the sponsor within 5 working days.

c. Any deviations from the investigational plan to the sponsor and the reviewing HUC. If the deviation is to protect the life or physical well being of a subject, the investigator will notify the reviewing HUC and the sponsor as soon as possible, but in no event later than 5 working days after the emergency occurred. Except in such emergency, prior approval from the sponsor is required for changes in or deviations from a plan and, if these changes or deviations may affect the scientific soundness of the plan or the rights, safety, or welfare of human subjects, approval from the FDA and the reviewing HUC is also required.

d. The use by the investigator of a device without obtaining informed consent. The investigator will report such use to the sponsor and the reviewing HUC within 5 working days after the use occurs.

e. To the sponsor and the reviewing HUC within 3 months after the termination or completion of an investigation. This report is a final report by the investigator.

f. Upon request by a reviewing HUC or the FDA, accurate, complete, and current information about any aspect of the investigation.

Appendix C
Investigational New Drug Application Format

C–1. Front matter
Include identifying information, a cover sheet (FDA Form 1571 (Investigational New Drug Application (IND) Cover Sheet)), and a table of contents.

C–2. Introductory statement and general investigation plan
a. Introductory statement giving—

(1) The name of the drug.

(2) All active ingredients.

(3) The pharmacological class of the drug.

(4) The structural formula of drug (if known).

(5) The formulation of the dosage form to be used.

(6) The route of administration to be used.

(7) The broad objectives and planned duration of the proposed clinical investigation.

b. A brief summary of previous human experience with the drug that may be relevant to the safety of the proposed clinical investigations.

c. The identification of any countries where the drug may have been removed from use for any reason relating to safety and effectiveness and the reasons for removal from use.

d. A brief description of the overall plan for investigating the drug product for the following year to include—

(1) The rationale for the study.

(2) Indications to be studied.

(3) The general approach to be followed in studying the drug.

(4) The kinds of clinical trials to be conducted.

(5) The estimated number of patients to be given the drug.

(6) Any particularly severe risks to human subjects that are anticipated.

C–3. Investigator brochure
Provide a copy of the investigator brochure prepared by the IND sponsor.

C–4. Protocol for each planned study
The protocol includes—

a. A statement of the objective and purpose of the study.

b. The name, address, and qualifications of each investigator.

c. The name and address of the research facility and each reviewing HUC or institutional review board.

d. Inclusion and exclusion criteria for the study and an estimate of the number of patients to be studied.

e. A description of the design and methods of the study.

f. The method for determining doses to be given, planned maximum dose, and duration of patient exposure to the drug.

g. A description of observations and measurements to be made.

h. A description of procedures and laboratory tests to be used to monitor drug effects and minimize risks.

C–5. Product formulation information
Provide chemistry, manufacturing, and control information for drugs and placebos used.

C–6. Adequate information about pharmacological and toxicological studies
These are studies of the drug involving laboratory animals or *in vitro* studies that have led the sponsor to conclude that the drug is safe to test in humans. This information should include—

a. Pharmacological effects.

b. Absorption, metabolism, distribution, and excretion data.

c. The mechanism of action.

d. Results of acute, subacute, and chronic toxicity tests in animals.

C–7. Previous human experience with the drug
This information may come from previous investigations in the United States or elsewhere or use of the drug in a foreign country.

C–8. Summary of additional information (if appropriate)
This information is to aid in the evaluation of the IND such as drug dependence, abuse potential, and radiation absorbed dose.

C–9. Requested relevant information
If requested by the FDA, the applicant must also include any other relevant information needed for review of the application.

Appendix D
Investigational Device Exemption Application Format

D–1. Sponsor information
Include the name and address of the sponsor.

D–2. History
Include a complete report of prior investigations of the device.

D–3. Investigational plan
If no HUC has reviewed the investigational plan, a complete plan must be submitted to the FDA. If a HUC has reviewed the investigational plan, a summary of the plan may be submitted. The investigational plan will include—

a. The name and intended use of the device and the objectives and duration of the investigation.

b. A written protocol describing the methodology to be used and an analysis of the protocol demonstrating that the investigation is scientifically sound.

c. A description and analysis of all increased risks to which subjects will be exposed by the investigation, methods by which risks will be minimized, a justification for the investigation, and a description of the patient population to include number of subjects, age, sex, and condition.

d. A description of each important component, ingredient, property, and principle of operation of the device and of each anticipated change in the device during the course of the investigation.

e. A description of the procedures to be used to monitor the investigation and the name and address of any monitor.

f. Copies of all labeling for the device.

g. Copies of all consent forms and information materials to be given to subjects or users of the apparatus.

h. A list of names, locations, and chairpersons of all HUCs that have been or will be asked to review the investigation and a certification of action taken by reviewing committees.

i. The name and address of each institution at which a part of the investigation may be conducted.

j. A description of records and reports that will be maintained on the investigation in addition to those required by the FDA.

D–4. Agreements and investigators list
An example of the agreements to be entered into by all investigators of the device to comply with investigator's obligations and a list of names and addresses of all investigators who have signed such agreements.

D–5. Certification
A certification that the list of investigators includes all the investigators participating in the investigation and that no investigator will be added until he or she has signed the investigator's agreement.

D–6. Selling a device
If the device is to be sold, the selling price must be stated along with an explanation as to why the sale does not constitute commercialization.

D–7. Environmental analysis report
If requested by the FDA, an environmental analysis report must be provided.

D–8. Other information
Any other relevant information that the FDA requests.

ARM1.941221.017

Army Regulation 40–38

Medical Services

Clinical Investigation Program

Headquarters
Department of the Army
Washington, DC
1 September 1989

SUMMARY of CHANGE

AR 40-38
Clinical Investigation Program

This revision adds--

- Authorization for major Army commanders to establish clinical investigation programs (chap 2).
- Funding accountability in clinical investigation programs (chap 3).
- An updated DA Form 5303-R, Volunteer Agreement Affidavit.

Headquarters
Department of the Army
Washington, DC
1 September 1989

*Army Regulation 40–38

Effective 2 October 1989

Medical Services

Clinical Investigation Program

This UPDATE printing publishes a revision of this publication. Because the publication has been extensively revised, the changed portions have not been highlighted.

By Order of the Secretary of the Army:

CARL E. VUONO
General, United States Army
Chief of Staff

Official:

MILTON H. HAMILTON
Administrative Assistant to the Secretary of the Army

Summary. This regulation implements Department of Defense Directive (DODD) 3216.2 and DODD 6000.8. It reflects the present legal requirements pertaining to the use of human subjects participating in clinical investigations (CIs) and provides guidance for the administration and funding of clinical investigation programs (CIPs). Excluding situations where approval authority is limited, the authority to approve CIs using human subjects can be delegated within the military chain of command to the lowest level operating a human subjects review process. This revision also prescribes the unchanged annual progress report (Clinical Investigation Program, RCS MED–300(R1)).

Applicability. This regulation applies to all Active Army medical treatment facilities (MTFs) and dental treatment facilities (DTFs) except those funded under research, development, test, and evaluation (RDTE) appropriations. (See AR 70–25 for guidance on RDTE funded activities.) This regulation does not apply to the U.S. Army Reserve (USAR) and the Army National Guard (ARNG) unless Active Army personnel are involved.

Internal Control Systems. This regulation is subject to the requirements of AR 11–2. It contains internal control provisions but does not contain a checklist for conducting internal review. Checklists are being developed and will be published at a later date.

Supplementation. Supplementation of this regulation and establishment of command and local forms are prohibited unless prior approval is obtained from HQDA (DASG–RDZ), 5109 Leesburg Pike, Falls Church, VA 22041–3258.

Interim changes. Interim changes to this regulation are not official unless they are authenticated by the Administrative Assistant to the Secretary of the Army. Users will destroy interim changes on their expiration date unless sooner superseded or rescinded.

Suggested Improvements. The proponent agency of this regulation is the Office of the Surgeon General. Users are invited to send comments and suggested improvements on DA Form 2028 (Recommended Changes to Publications and Blank Forms) directly to Commander, U.S. Army Medical Research and Development Command, ATTN: SGRD–HR, Fort Detrick, Frederick, MD 21701–5012. Users within the U.S. Army Health Services Command (HSC) will forward DA Form 2028 through Commander, U.S. Army Health Services Command, ATTN: HSHN–I, Fort Sam Houston, TX 78234–6060.

Distribution. Distribution of this publication is made in accordance with the requirements on DA Form 12–09–E, block number 3442, intended for command level D for Active Army. This publication is not distributed to ARNG and USAR.

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*This regulation supersedes AR 40–38, 15 April 1984.

a. Comply with paragraph 2–6.

b. Establish and maintain within the U.S. Army Health Care Studies and Clinical Investigation Activity, the Clinical Investigation Program Division to coordinate and monitor CIP activity and serve as the point of contact for policies and regulations on animal use, human use, and funding and administration of the CIP.

c. Ensure that commanders of Army medical centers (MEDCENs) within HSC—

(1) Are responsible for all CIs conducted within the MEDCEN.

(2) Organize a clinical investigation support system within a separate hospital organizational structure to implement the CIP.

(3) Appoint a clinical investigation committee, a HUC, and an animal use committee (AUC).

d. Be the approval authority for—

(1) Investigational drug studies except those involving Schedule I substances in humans.

(2) Investigational medical devices studies involving humans.

(3) CIs involving non-DA sponsored Notice of Claimed Investigational Exemption for a New Drug (IND) or Investigational Device Exemption (IDE).

2–8. Commanders of other major medical commands (overseas)

When a CI is proposed, the commander will comply with the applicable portions of paragraphs 2–6 and 2–7.

2–9. Commanders of medical and dental treatment facilities other than medical centers

a. Commanders of MTFs and DTFs assigned to the HSC should use their regional MEDCEN for CI support or seek approval from headquarters, HSC, to—

(1) Organize, within their authorized and available resources, support for CIs.

(2) Establish committees and the review process prescribed by this regulation, or refer proposals for committee review to the department of clinical investigation (DCI) at their regional supporting MEDCEN.

b. Commanders of MTFs and DTFs assigned to major medical commands (overseas) may, with MACOM approval—

(1) Organize within their authorized and available resources, support for CIs.

(2) Establish committees and the review process prescribed by this regulation or, for protocols proposing to use human subjects, refer the protocol to TSG's HSRRB.

2–10. HSRRB, HURRAO, and investigators

a. HSRRB members will—

(1) Evaluate methods by which DA involves human subjects in CIs.

(2) Recommend policy to TSG on the treatment of volunteers consistent with current moral, ethical, and legal standards.

(3) Evaluate protocols submitted to TSG for approval.

(4) Maintain documentation of approved protocols, to include continuing review for CIs conducted by MACOMs without an established internal review process.

b. The Chief, HURRAO will—

(1) Provide, for TSG, administrative support for the HSRRB.

(2) Conduct a compliance review of all protocols submitted to TSG for approval.

(3) Submit DA-sponsored INDs and IDEs directly to the FDA.

(4) Submit DA-sponsored New Drug Applications (NDAs) directly to the FDA.

(5) Maintain DA record files for IND, IDE, and NDA submissions to the FDA.

(6) Conduct postmarketing surveillance for NDAs sponsored by DA.

(7) Serve as the DA point of contact for policies and regulations on human use in CIPs.

(8) Advise and assist MACOMs and DA staff agencies that conduct CIs using human volunteers.

c. Investigators will—

(1) Prepare a protocol following the policies and procedures in this regulation.

(2) Prepare and maintain adequate records on—

(a) Receipt, storage, use, and disposition of all investigational drugs issued to the investigator by the pharmacy and investigational devices issued to the investigator by the activity responsible for storing them.

(b) Case histories that record all observations and other data important to the study.

(c) Volunteer informed consent documents (app C).

(3) Prepare progress reports, including annual reports (Clinical Investigation Program, RCS MED–300(R1)), as determined by the approving authority and regulatory agencies. (See app D for the annual report format.)

(4) Prepare and file an investigator sponsored IND or IDE as appropriate.

(5) Promptly notify the approving official through the medical monitor and the HUC of adverse effects caused by the CI.

(6) Report serious and unexpected adverse experiences involving the use of investigational drugs or devices to the sponsor or the FDA in accordance with AR 40–7.

(7) Ensure that the CI has been approved by the proper review committee(s) before starting, changing, or extending the investigation (see paras 3–5*b*(1) through (6)).

(8) Ensure that all subjects or their representatives, including subjects used as controls, are fully informed of the nature of the investigation to include potential risks to the subject.

(9) Ensure that investigational drugs or devices are administered only to subjects under the investigator's personal supervision or that of a previously approved associate investigator.

(10) Ensure that a new principal investigator (PI) is appointed if the PI cannot complete the CI for reasons such as permanent change of station (PCS) or retirement.

(11) Apprise the HUC of any investigator's noncompliance with the CI protocol.

(12) Seek HUC approval for other investigators to participate in the CI.

(13) Ensure that studies involving attitude or opinion surveys are approved in accordance with AR 600–46. (See para 3–5*b*(6).)

d. The medical monitor will be responsible for serving as an advocate for the medical safety of the volunteers. The monitor will have other responsibilities as determined by the approving official and will have the authority to terminate an individual volunteer's participation in the study or suspend the study for review by the HUC.

Chapter 3
Clinical Investigation or Research

3–1. CI principles

a. CI is an essential component of medical care and teaching that is intended to achieve the following:

(1) Improve the quality of patient care.

(2) Generate an atmosphere of inquiry responsive to the dynamic nature of health sciences.

(3) Promote high professional standing and accreditation of health and graduate medical education programs.

b. Military contingency requirements take precedence over the requirements of the CIP.

c. User testing, as defined in AR 15–38 or AR 71–3, will not be conducted under a CI protocol when the CI is greater than minimal risk.

3–2. Use of animals in CIs

CI proposals involving animals will be conducted in accordance with AR 70–18/SECNAVINST 3900.38/AFR 169–2/DARPAINST 18/DAINST 3216.1/USUHSINST 3203.

3–3. Use of humans in CIs

a. Only persons who are fully informed and volunteer in advance to take part may be used as subjects in CIs except when the measures used are intended to be beneficial to the subject, and informed consent is obtained in advance from a legal representative on the subject's behalf. (See app E.)

b. Any human tissue or bodily fluid obtained by autopsy that is used in a CI will be donated by the next of kin or legal representative of the person from whom the tissue or fluid is removed. Donation is made by written consent and the donor relinquishes ownership and rights to the tissue or fluid. Consent to donate does not rule out payment for such donation.

c. Any human tissue or bodily fluid linked by identifiers to a particular person obtained by surgical or diagnostic procedures and intended for use in CIs will be donated by the person from whom the tissue or fluid is removed or, in the event of death or legal disability of that person, the next of kin or legal representative of such person. Donation is made by written consent and the donor relinquishes ownership and rights to the tissue or fluid. Consent to donate does not rule out payment for such donation.

d. The determination of the level of risk in a CI protocol is made by a HUC established in accordance with this regulation.

e. Moral, ethical, and legal concepts on the use of human subjects will be followed as outlined in this regulation. Voluntary consent of the human subject is essential. Military personnel are not subject to punishment under the Uniform Code of Military Justice (UCMJ) for choosing not to take part as human subjects (Manual For Courts-Martial (MCM 1984)). Further, no administrative sanctions will be taken against military or civilian personnel for choosing not to participate as human subjects.

f. CIs using human subjects are conducted in such a manner that risks to the subjects are minimized and are reasonable in relation to anticipated benefits.

g. The proposed number of subjects will be the minimum needed to ensure a statistically valid conclusion.

h. The CI is conducted so as to avoid unnecessary physical and mental suffering. Preparations will be made and adequate facilities provided to protect the subject and investigators against all foreseeable injuries, disabilities, or death. Such research is not conducted if there is reason to believe that death or injury will result.

i. Volunteers must be given adequate time to review and understand all information before agreeing to take part in a study.

j. Volunteers are authorized all necessary medical care for injury or disease that is a proximate result of their participation in clinical research. (See app E.)

(1) Medical care for DEERS-eligible civilian employees who volunteer and who perform duty as volunteers during their regularly scheduled tours of duty will be provided care in accordance with AR 40–3.

(2) Medical care costs and subsistence charges for all other categories of personnel who are routinely authorized care in a military MTF under AR 40–3 will be waived while the volunteer is in the hospital if the volunteer would not normally enter the hospital for treatment but is requested to do so to facilitate the CI. This also applies to the volunteer's extension of time in a hospital for a CI when the volunteer is already in the hospital. The costs for subsistence charges do not apply for CI or research volunteers in accordance with AR 40–3, paragraph 4–60. For those facilities on the Automatic Quality of Care Evaluation Support System (AQCESS), the patients will be coded as patient category X–75.

k. Information obtained by the DOD during or as a result of an epidemiologic-assessment interview with a human immunodeficiency virus (HIV) seropositive soldier may not be used to support adverse personnel action against the soldier (see chap 6, AR 600–110).

l. The use of prisoners of war and detainees as human research subjects is prohibited.

m. Minors may be enrolled as experimental subjects in clinical studies when the following conditions are met:

(1) The risk is justified by the intended benefit to the minor.

(2) The intended benefits are at least as favorable to the minor as those presented by available alternatives.

(3) A legally authorized representative has authorized, in advance, for the minor to participate in the clinical study.

(4) The minor, if capable, has assented in writing. In determining whether the minor is capable of assenting, the HUC will consider the minor's age, maturity, and psychological state, as well as any applicable State and local law concerning the minor's legal capacity to assent. The HUC may waive assent for some or all minors involved in the study if it determines that the capability of some or all of the minors is so limited that they cannot be reasonably consulted or the procedure involved in the study holds out a prospect for direct benefit that is important to the health or well-being of the minor and is available only in the context of the study.

n. Only persons judged qualified by the appropriate approving official will conduct research involving human subjects.

o. A medical monitor who is not involved as an investigator in the protocol will be appointed if the HUC or approving official determines that the risk is more than minimal. A medical monitor may be appointed to minimal risk studies if so determined by the HUC or approving authority.

p. Safeguards or special conditions imposed on a protocol by a HUC may not be reduced or waived by the approving official upon approval of the protocol. The approving official may require additional safeguards, disapprove the protocol, or refer it to a higher review and approving authority.

q. Clinical studies on medical devices will be conducted in accordance with part 812, title 21, Code of Federal Regulations (21 CFR 812). (See the FDA entry in app A.)

r. Drugs, placebos, biologicals, and vaccines not commercially available (that is, investigational drugs) will be received, stored, and controlled by the pharmacy and will not be dispensed without an approved protocol.

s. All investigational medical devices and medical devices not commercially available are received, stored, and controlled in a manner as determined by the MTF or DTF commander and are not issued without an approved protocol.

3–4. Conducting CIPs

MACOM commanders conducting a CIP will—

a. Publish directives and regulations for—

(1) Establishing an internal review process to include a clinical investigation committee; a HUC, if applicable; and an AUC, if applicable.

(2) Protocol preparation.

(3) The use of animals in CIs.

(4) The use of human subjects in CIs.

(5) Funding and administration of the CIP.

b. Establish a system that will permit the identification of volunteers who have participated in clinical studies involving investigational drugs or devices. Such a system will be established in accordance with AR 340–21 (see para 3–5*h* for a discussion of "duty to warn").

c. Forward one copy of the regulations and directives and subsequent changes to these publications through the MACOM commander to the Assistant Surgeon General for Research and Development, c/o Commander, U.S. Army Medical Research and Development Command, ATTN: SGRD–HR, Fort Detrick, Frederick, MD 21701–5012, within 60 days of publication.

3–5. Conducting CIPs involving humans

a. Establishing a HUC. As noted in paragraphs 2–6*c* and 2–9*a* and *b*, commanders of MTFs and DTFs will either implement their own HUC or use their regional MEDCEN DCI or TSG's HSRRB.

(1) HUCs will be established for CIs in accordance with appendix F.

(2) MTFs and DTFs assigned to HSC that are seeking initial approval of an internal review process will forward the items listed in (*a*) and (*b*) through command channels to Commander, U.S. Army Health Services Command, Health Care Studies and Clinical Investigation Activity, ATTN: HSHN–I, Fort Sam Houston, TX 78234–6000.

(a) One copy of implementing directives and regulations describing protocol preparation and policies for CIs involving human subjects.

(b) A listing of the membership of the HUC and the curriculum vitae for each member.

(3) MEDCENs, MTFs, and DTFs assigned to major medical commands (overseas) that are seeking initial approval of an internal review process will forward the items listed in (2)(*a*) and (*b*) above through command channels to the Assistant Surgeon General for Research and Development, c/o Commander, U.S. Army Medical Research and Development Command, ATTN: SGRD–HR, Fort Detrick, Frederick, MD 21701–5012.

(4) CIs involving human subjects may not commence until the implementing directives and HUC membership have been approved by HQ, HSC, for all units assigned to that Command or TSG for all other units.

b. Protocol and/or plan review before submission to a HUC.

(1) If a study calls for the use of volunteers (either as the direct or indirect object of the study), a protocol is prepared. Certain studies may be exempt (see app B). The format at appendix G should be followed but may be modified to meet local requirements. Informed consent will be documented using DA Form 5303–R (Volunteer Agreement Affidavit) in accordance with appendix C (see 3–5*c*). DA Form 5303–R will be reproduced locally on 8½- by 11-inch paper. A copy for reproduction is located at the back of this regulation.

(2) If a study calls for the use of tissue or fluids obtained from a human, and is not an exempt study as defined by paragraph B–6, a protocol is prepared. (The informed consent document used in these cases may be the DA Form 5303–R or an overprinted consent for surgery or autopsy.) The following must be considered in determining whether an informed consent is required:

(a) Fluid or tissue obtained at autopsy—informed consent is required.

(b) Fluid or tissue obtained at surgery or as the result of a diagnostic procedure and linked by identifiers directly or indirectly to a particular person intended for CI—informed consent is required.

(c) Fluid or tissue obtained at surgery or as the result of a diagnostic procedure not intended for a CI and not linked by identifiers directly or indirectly to a particular person—no informed consent is required.

(d) Fluid or tissue obtained from a tissue or blood bank that is linked to a personal identifier and the research data are recorded in such a manner as to identify the donor—informed consent is required.

(e) Fluid or tissue obtained from a tissue or blood bank that is linked to a personal identifier, but the research data are recorded in such a manner that the donor's identity is unknown—no informed consent is required.

(f) Fluid or tissue obtained from a tissue or blood bank that is not linked to a personal identifier—no informed consent required.

(3) The protocol will be submitted to the clinical investigation committee composed of individuals qualified by training and experience and appointed by the commander of the unit to evaluate the validity of the protocol. The purpose of this peer review is to assure that the protocol design will yield scientifically useful data that meet the objective(s) of the study. The committee recommendations and actions taken by the investigator in response to the recommendations will be submitted with the protocol to the HUC.

(4) When applicable, the protocol is submitted to the radiation control committee (RCC), or equivalent, established in accordance with TB MED 525. Exposure of human research subjects to ionizing radiation not intended for diagnosis or treatment but as a direct result of their participation in a CI requires that the local institutional review board (IRB) determine the risk to benefit to ensure that potential subjects can be appropriately informed before deciding to participate. Radiation exposure as the result of diagnosis or treatment must be documented as such in the protocol, and RCC review is not required. All other CI protocols that indicate exposure of human subjects to ionizing radiation will contain RCC risk assessments prior to IRB review. All protocols (human or animal) involving the use of medical ... should be forwarded to the local Radiation Protection Offic... determine if further RCC review is required.

(5) The radioactive drug research committee, in accorda... with 21 CFR 361 (see the FDA entry in app A), may recomm... approval of certain radioactive drugs for use in human rese... subjects that otherwise might require an IND or an appro... NDA. The radioactive drug may be used to obtain basic infor... tion regarding human physiology, pathophysiology, or biochem... try but may not be used for immediate therapeutic, diagnostic... similar purposes or to determine the safety and effectiveness of... drug in humans. The investigator will also obtain RCC review...

(6) If the study calls for the use of an attitude or opinion... vey, as defined in AR 600–46, it may not be considered a C... such studies are planned, the SSC—NCR must be contacted... the investigator to determine whether the survey requires... clearance of that center. This information should accompany... proposal when it is submitted to the DCI for review. Surveys... cross over command lines or are sent to other services req... SSC—NCR clearance, but surveys within a unit conducted... that unit do not. For example, surveys conducted on inpatie... soldiers assigned to the unit, and family members of soldiers... signed to the MTF or DTF do not require clearance. Survey... outpatients that can be accomplished in the clinic and do not... quire the patients to take them home do not require clearance... quiries should be directed to Commander, Soldier Supp... Center—National Capital Region, Attitude and Opinion Su... Division, ATTN: ATNC–MOA, 200 Stovall Street, Alexand... VA 22332–0400 (AUTOVON 221–9680). The Center serves ... reference facility on the preparation of surveys. Investiga... should coordinate with the SSC—NCR to determine if sim... surveys have been conducted. When required, the clearance of... SSC—NCR will accompany protocols when they are submi... for IRB review.

c. Informed consent documentation.

(1) Informed consent generally pertains to the agreemen... participate in the protocol before such participation begins... formed consent also applies, however, after the study begins w... informed consent for further participation is required becaus... formation that might have affected the volunteer's willingnes... have originally agreed to participate in the study or to continu... participate in the study comes to the attention of the investig... or HUC.

(2) A written informed consent documents the act of cons... The purpose of an informed consent document is to provide... volunteer with sufficient information to make a reasonable d... sion regarding whether to participate in the study and to pro... evidence that consent was obtained. Whether the informatio... provided orally or in writing, the information pertinent to the... cision to participate in the study must be in writing. If informa... material to the volunteer's decision to participate in the stud... discovered after the volunteer consents to participate in the st... the volunteer must be informed of the new information and a... informed consent, with appropriate written documentation, m... be obtained from the volunteer. Consent procedures must conf... to Federal, State, and local law.

(3) The volunteer's agreement to participate in the protocol... be documented using DA Form 5303–R in accordance with... pendix C. The volunteer agreement will be written in langu... that is easily understandable by the subject. Exculpatory langu... should not be used in informed consent documents. An *Eng*... translation of the form will be provided to the HUC if the for... completed in a language other than English. Where necessary... addendum to the DA Form 5303–R may be used when, in the... termination of the PI and the HUC, additional space is neede... fully explain aspects of the research.

d. HUC actions on protocol review after submission to a H... HUC. The HUC will—

(1) Determine the level of risk associated with the proto... minimal risk or more than minimal risk.

(2) Make the following recommendations to the approving...

higher authority, disapproved, or exempt from further human use review.

(3) Determine the adequacy of the proposed consent process, as well as the information to be presented to the subject. The HUC should evaluate all elements of informed consent in accordance with the applicable portions of appendix C. The committee may require that information, in addition to that specifically mentioned in appendix C, be given to the subject when the HUC determines that the information would meaningfully add to the protection of the rights and welfare of the subject. The committee may waive the requirement for a signed informed consent for some or all of the subjects if it finds that either—

(a) The only record linking the subject and the protocol would be the consent document, and the principal risk is potential harm from breach of confidentiality. Each subject will be asked whether the subject wants documentation linking the subject with the protocol, and the subject's wishes will govern.

(b) The CI presents no more than minimal risk of harm to subjects and does not involve procedures for which written consent is normally required outside of the research context. In cases where the documentation requirement is waived, the HUC may require the investigator to provide subjects with a written statement regarding the protocol. Waiver of the requirement for a signed consent form does not waive the requirement for informed consent consistent with 10 USC 980 and DODD 3216.2.

(4) Review protocols involving minors as experimental subjects. The committee will determine if assent is required. If required, DA Form 5303–R will be used for documentation of assent. The HUC may waive the requirement for assent for minors consistent with the standards required by 45 CFR 46.408. (See the DHHS entry in app A.) However, a determination that the assent requirement may be waived does not affect the requirement to obtain the consent of the minor's legal representative.

(5) Conduct a continuing review of the protocols approved by the HUC at intervals appropriate to the level of risk, but at least annually. The format for the review (for example, progress report from the investigator) will be determined by the HUC.

(6) Review protocols involving medical devices. HUCs reviewing CIs of medical devices may also have to determine whether the device presents a significant or nonsignificant risk. The determination that a device presents a nonsignificant or significant risk is initially made by the sponsor. The HUC may ask for and obtain certain information prior to determining the risk status of the device. A risk assessment determination and the rationale of the sponsor's decision should be provided by the sponsor. The HUC may ask the sponsor whether other HUCs have reviewed the proposed study and what determination was made. The sponsor should notify the HUC of the FDA's assessment of the device's risk if such an assessment has been made. The HUC may also consult the FDA for its opinion. In deciding if a device presents significant or nonsignificant risks, the HUC should consider the device's total risks, not those as compared with the risks of alternative devices or procedures. If the device is used in conjunction with a procedure involving risk, the HUC should consider the risks of the procedure in conjunction with the risks of the device. The HUC may choose to agree or disagree with the sponsor's initial determination of degree of risk. Sponsors must notify FDA when a HUC determines that a device, judged by the sponsor *not* to present a significant risk, should be categorized as a significant risk device. On rare occasions, FDA may come to a different conclusion than that reached by the HUC, and FDA may overrule a HUC's decision that a device presents a nonsignificant risk. Once a decision on the degree of risk is reached, the HUC should consider whether the study should be approved or not. Some studies involving nonsignificant risk devices may also be considered minimal risk studies and thus may be reviewed through the expedited review procedure established by the HUC. The FDA considers studies of all significant risk devices to present more than minimal risk; thus, full HUC review for all studies involving significant risk devices is necessary. In considering whether a study should be approved, the HUC should use the same criteria it would use in considering approval of any research involving an FDA regulated product. In considering the risks of the device as they pertain to HUC approval (as opposed to whether or not FDA should approve the IDE), the HUC should not simply judge the increase in risk over standard treatment but rather the risk of the procedure as a whole. The risks and benefits of a medical device compared to the risks and benefits of alternative devices or procedures should be considered by the HUC in deciding the approvability of a study involving a medical device. CIs of intraocular lenses also require review and approval of a HUC established in conformance with this regulation.

Note. Certain categories of research may be reviewed by the HUC using the expedited review procedures 3–5g below. Exempt categories of research are listed in appendix B.

e. Actions of approving official on protocol review. The approving official—

(1) May accept or reject the recommendations of the HUC.

(2) Will not approve a CI that is disapproved by the HUC.

(3) Will appoint a medical monitor (see glossary) to studies that are greater than minimal risk and, if deemed appropriate, for those studies that are minimal risk.

(4) May require additional safeguards, may disapprove the protocol, or may refer it to a higher review committee and approving authority; however, safeguards or special restrictions imposed on a protocol by a HUC may not be reduced or waived by the approving official upon approval of the protocol.

(5) Will obtain a health hazard assessment prior to approving a research protocol involving human subjects in the operation of military materiel (see AR 40–10).

(6) Will notify the investigator of the decision to approve or disapprove the CI proposal or of modifications required to secure approval.

(7) Will ensure the continued evaluation of CI programs to assure that the policies and procedures established by this regulation are being followed.

(8) Will, when higher approval authority is required, send two copies of the protocol, informed consent documentation (DA Form 5303–R), all minutes of committees reviewing the protocol, and the commander's recommendations through command channels to the appropriate headquarters. CIs requiring TSG or higher level approval will be forwarded to the Assistant Surgeon General for Research and Development, c/o Commander, U.S. Army Medical Research and Development Command, ATTN: SGRD–HR, Fort Detrick, Frederick, MD 21701–5012.

f. Actions of organizations without a local HUC.

(1) The investigator will accomplish the actions noted in 3–5*b* and *c* above.

(2) The commander will accomplish the actions noted in 3–5*e*(5) through (7) above and forward the protocol with his or her recommendations through the chain of command to the next level of command having an approved HUC.

g. Expedited review procedures. These procedures will be as follows:

(1) CIs involving no more than minimal risk and in which the only involvement of human subjects will be in one or more of the categories listed in appendix H may be reviewed by the HUC through the expedited review procedure.

(2) The HUC may also use the expedited review procedure to review minor changes in previously approved protocols during the period for which approval is authorized. Under an expedited review procedure, the HUC chairman or one or more HUC reviewers designated by the chairman may carry out the review. The reviewers may exercise all of the authorities of the HUC except disapproval. Protocols may be disapproved only after review according to the nonexpedited procedure in 3–5*d* above.

(3) Each HUC using an expedited review procedure will adopt a method for keeping all members and the commander advised of approved proposals.

(4) The approving official may restrict, suspend, or end a HUC's use of the expedited review procedure when necessary to protect the rights or welfare of subjects.

h. Duty to warn. Commanders must ensure that volunteers are adequately informed concerning the risks involved with their participation in the study and provide volunteers with newly acquired information that may affect their well-being. The "duty to warn" exists even after a volunteer has completed participation in the study. To accomplish this, the MTF or DTF conducting the study will follow the procedures established by the MACOM to permit the identification of volunteers who have participated in clinical studies conducted by that command. The "duty to warn" also extends to others whose health may be affected by a volunteer's participation. (See para 3–4*b*.)

i. Determining responsibility for review of protocols when more than one DOD or DA component is involved. When more than one DOD or DA component is involved in a study, the commander will determine primary responsibility based upon consideration of whether the subjects are inpatients or outpatients of a DOD MTF, whether the study is conducted in-house or by contract, or whether the prospective human subjects are members of a DOD component.

(1) When the study, regardless of in-house or contract status, involves use of patients in a DOD MTF, the component to which the MTF belongs organizationally has primary responsibility except as provided in (3) below.

(2) For CIs not involving the use of inpatients at a DOD MTF, primary responsibility rests as follows:

(a) If the study is done on grant or contract, primary responsibility rests with the component providing funds.

(b) If the study is conducted in-house, primary responsibility rests with the component to which the PI is assigned.

(c) If the study is not funded by a DOD or DA component and there is no DOD or DA PI, primary responsibility rests with the component to which the prospective human subject is assigned.

(3) Studies funded by the Uniformed Services University of the Health Sciences (USUHS) or the Director, Defense Nuclear Agency, will be reviewed and approved in accordance with policies established by the funding agency and DODD 3216.2.

j. Records. The department or service that has the responsibility for providing CI support in activities conducting CIs involving volunteers will maintain records in accordance with AR 25–400–2. These records are pertinent to each CI conducted and will include, at a minimum—

(1) Documentation of approval to conduct the study.

(2) A copy of the approved protocol.

(3) The volunteer's signed informed consent (DA Form 5303–R).

(4) Case report forms for drug or device studies.

(5) A summary of the results of the CI, to include any untoward reactions or occurrences.

k. Technical reports and publications.

(1) Technical reports are required for studies funded by the RDTE Major Defense Program 6 Fund (see AR 37–100–FY), will be prepared in accordance with AR 70–31, and follow the format established in ANSI–STD–Z39.18–1987 or its revisions.

(2) Publications regarding the results of CIs will be released by the approving official in accordance with the provisions of AR 360–5 and AR 70–14 and will contain this statement: "The investigators have adhered to the policies for protection of human subjects as prescribed in 45 CFR 46." (See the DHHS entry in app A.)

(3) Publications regarding the results of CIs conducted by contract or grant will note adherence with 45 CFR 46, as amended. (See the DHHS entry in app A.)

3–6. Funding and administration of CIPs

a. Funding.

(1) CIPs will be funded with procurement funds and with operating funds from Major Defense Program 8 (see AR 37–100–FY; FY denotes the fiscal year contained in the publication number).

(2) CIs on health problems encountered in active duty military personnel may be funded from Major Defense Program 6 operating funds (see AR 37–100–FY). The decision to fund such investigations will be made on a case-by-case basis by the Commander, USAMRDC. Such investigations must be related to—

(a) USAMRDC's designated research areas.

(b) One or more line items comprising USAMRDC's available RDTE appropriation.

(3) CIs may be conducted with funds obtained by grant from another Federal agency.

(4) CIs may be conducted with funds obtained by grant from corporations, foundations, funds, or educational institutions operated primarily for scientific, literary, or educational purposes that are tax-exempt under the provisions of 26 USC 501.

(5) Gifts may be used to provide funds for CIs under AR 1–100.

(6) Army health care personnel are prohibited from accepting any compensation in addition to their normal pay and allowances for performing duties within the scope of the CIP.

(7) In conducting CIs, there may be no competition with available commercial facilities in providing services to entities outside the Federal Government.

(8) CIs will not be conducted with funds or other resources provided by business groups operating for profit, foreign governments, and political organizations; however, investigational drugs, devices, biologics, vaccines, or placebos may be used in approved CI protocols where an audit trail and proper accounting have been established as determined by the MTF or DTF commander.

b. Administration of CIs and grants.

(1) Monetary grants or gifts received for CIP will be administered by an officer, normally the comptroller, designated by the MTF or DTF commander. Nonmonetary grants or gifts received for CIP will be administered by an officer designated by the MTF or DTF commander. This officer must be someone other than the PI or anyone directly involved in the conduct of the study. Disbursements to the MTF or DTF from cooperative grants held by non-DOD institutions must be administered by a designated officer not directly involved with the conduct of the study.

(2) Investigation objectives should allow for the conclusion of a study within the tour of duty of the investigator. If this is not possible, plans should be made by the investigator to permit continuation of the study when that investigator leaves.

(3) The initiation of a protocol request by the investigator to support a clinical study is the means of obtaining funds. For intramurally funded studies, the format and mechanism will be established by the MACOM. For extramurally funded studies, the format and mechanism will be established by the MACOM in consonance with the procedures required by the funding institution. In addition to Major Defense Program 8 funds (see AR 37–100–FY) appropriated to conduct clinical studies, the following sources may be used:

(a) USAMRDC. The USAMRDC may provide Major Defense Program 6 funds (see AR 37–100–FY) to MTFs and DTFs to support clinical studies related to USAMRDC's designated research areas and one or more line items comprising USAMRDC's available RDTE appropriation. The Broad Agency Announcement (BAA), published by the USAMRDC, addresses areas of research interest in that Command and the format to be followed when submitting a proposal. Funds may be provided to facilities on a noncompetitive basis (that is, not in competition with the private sector). Proposals should be submitted through the MACOM to Commander, U.S. Army Medical Research and Development Command, ATTN: SGRD–ACQ, Fort Detrick, Frederick, MD 21701–5012. Copies of the BAA can be obtained from the Commander, USAMRDC.

(b) USUHS. Individuals who possess faculty appointments to the USUHS may apply for grant funding. The proposal should be submitted through the MACOM and subsequently through the USUHS department head (for example, an adjunct professor of ophthalmology would submit the proposal through the Chairman, Department of Surgery) to the Director, Grants Management, USUHS, 4301 Jones Bridge Road, Bethesda, MD 20814–4799.

These grants are limited and are awarded on a very competitive basis. For additional information, contact the Director, Grants Management, USUHS.

(c) Henry M. Jackson Foundation for the Advancement of Military Medicine. Individuals who possess faculty appointments to the USUHS as adjunct assistant professor and higher may apply for grant funding. The proposal should be submitted through the MACOM and subsequently through the USUHS department head to the Director, Grants Management, USUHS, who will forward the proposal to the Foundation. These grants are managed by the Foundation, not USUHS. For additional information, contact the Director, Grants Management, USUHS.

(d) National Institutes of Health (NIH). Any PI may apply for grant funds from the NIH. It is NIH policy that any grant to another Federal agency must first be approved by the Service Secretary. Proposals are submitted through command channels to OTSG, ATTN: SGPS–RMB, 5109 Leesburg Pike, Falls Church, VA 22041–3258.

(e) Corporations, foundations, funds, or educational institutions organized and operated primarily for scientific, literary, or educational purposes. AR 621–7 authorizes investigators to apply for grants from nongovernment activities. Applications will follow the procedures outlined in AR 621–7.

(f) Cooperative oncology groups. These groups receive grant moneys from the National Cancer Institute (NCI), NIH, to support studies of investigational oncologic agents. Funds are provided based on the number of patients enrolled in a study. DA clinical investigators who conduct cooperative studies with an oncology group(s) may draw the funds allocated to the group by NCI for patients being treated and studies by the Army investigator in an MTF or DTF. In this case, the oncology group is functioning as an agent of the Federal Government—that is, NCI—in granting these funds to the CIP.

(g) Gifts provided for CI study. The donation of a gift for CI is accounted for in accordance with the guidelines established in AR 1–100. Drugs, placebos, biologics, vaccines, and medical devices that are not commercially available (see 21 CFR 312) under subchapter D of the FDA entry in appendix A and equipment loaned for use in the performance of an approved CI protocol with an audit trail and appropriate control mechanisms are not considered gifts. They will be receipted and accounted for as determined by the MTF or DTF commander.

(4) Any gift or grant funds used to support travel will not be disbursed in excess of Government per diem rates.

(5) Any gift funds not expended will be reprogrammed.

(6) Any grant funds not expended in the CI study will be refunded to the grantor by the facility or reprogrammed at the direction of the grantor.

(7) For grants, a document is signed by the commander of the MTF or DTF and a representative of the grantor specifying the nature of the grant including monetary value, requests of the grantor, and the conditions under which the facility accepts the grant, as well as a statement that the investigation is subject to delay or termination if required in the interest of the military mission.

(8) For gifts, a document is signed by the commander of the MTF or DTF and forwarded to the donor, specifying the nature of the gift including monetary value, requests of the donor, and the conditions under which the facility accepts the gift, as well as a statement that the study is subject to delay or termination if required in the interest of the military mission.

(9) Active duty military personnel may participate in clinical investigations as human subjects but will not be compensated for participation except when blood is furnished for—

(a) Transfusion into the veins of a person entitled to and undergoing treatment at Government expense, whether in a Federal hospital or institution or in a civilian hospital or institution.

(b) Blood banks or for other scientific and research purposes in connection with care of any person entitled to treatment at Government expense. The volunteer will be entitled such reasonable sum, not to exceed $50, for each blood withdrawal as determined by the approving official. This fee may be paid provided that no payment is made to any person for blood withdrawal for the benefit of the person from whom it is withdrawn (24 USC 30).

(10) Retired military personnel may participate as human subjects in CIs. Such personnel may be compensated on a fee basis pursuant to a contract; however, if studies exceed 30 days their retired pay is subject to recomputation.

(11) Dependents and others entitled to medical care in MTFs or DTFs may participate as human subjects in CIs. These persons may be compensated on a fee basis pursuant to a contract.

(12) It is Government policy not to accept voluntary services from private citizens when the services may provide a basis for a future claim against the Government for their value. Therefore, such services will be accompanied by a statement signifying that the individual acknowledges that he or she will not be entitled to any compensation or future claim for these services. Private citizens may enter into an independent contractor relationship and participate for a fee in accordance with the procedure endorsed by the Comptroller General. (Volume 45, Decision of the Comptroller General, 1966, p. 649 (45 DCG 649 (1966)).)

(13) If a soldier, dependent, or other individual entitled to medical care and enrolled as a human subject loses his or her eligibility for care (for example, a sponsor separates from service prior to retirement), take the following action—

(a) Determine if the subject's continued participation is essential to his or her well-being (for example, participation in an oncology group protocol).

(b) Attempt to transfer the subject to a nonmilitary sponsored study in the community.

(c) Apply for Secretary of the Army designee status for the subject if transfer to a community based program cannot be accomplished prior to loss of eligibility. The termination of a subject's participation in a study that affects the subject's well-being without providing appropriate alternative care is not the policy of the DA.

(14) When DOD civilian employees volunteer to provide service within the scope of their employment, any duty performed during the employees regularly scheduled duty day will be considered constructive duty for which straight-time rates apply. Employees must have the approval of their immediate supervisor to participate during duty time. Participation outside the employee's scheduled duty, as during leave, is considered voluntary overtime for which payment or compensatory time must be granted as mandated by the Fair Labor Standards Act. These limitations on the provision of volunteer services by civilian employees are documented and signed by the employee and his or her supervisor prior to participating in the CI study. Accordingly, if an employee desires to participate as a volunteer in a study and the employee's supervisor concurs, the employee's participation is considered within the scope of employment. However, the employee will be compensated for participation as noted above and will not receive compensation from other sources.

(15) Individuals who enter the hospital or have their hospitalization extended due to participation in a CI will be coded as AQCESS patient category X–75.

(16) Active duty soldiers participating in studies whose purpose is to evaluate rations are not charged for the investigational or test item and do not forfeit their basic allowance for subsistence.

(17) Reprints of articles based on approved CI projects are official material as defined in AR 70–14. Purchase of such reprints will be made from Operations and Maintenance, Army funds.

(18) Commanders will ensure that all individuals participating in CI studies are apprised of their responsibilities and obligations regarding the legal and ethical aspects of such studies.

(19) DA Form 5303–R will be used to document informed consent. The investigator retains the original signed copy. A copy is provided to the volunteer. The investigator provides a copy of the signed form to the medical records custodian for inclusion in the volunteer's medical treatment record, if the volunteer agrees to its inclusion in the record.

(20) It is the "norm" in the community to use "leftover or excess" blood drawn for diagnostic procedures or expired blood

donated to blood banks for CIs. This practice is based on the contention that the blood has been abandoned by the donor; however, the investigator must take into account that the patient or donor has an absolute property right to the blood. Paragraph 3–3*b* specifically prohibits the use of tissue or fluid obtained at autopsy from being used for clinical studies without the consent of the donor or next of kin. Paragraph 3–3*c* specifically prohibits the use of tissue and fluid linked by an identifier and obtained by surgery or diagnostic procedure from being used for clinical studies without consent of the donor or next of kin, if the sample was obtained expressly for the purpose of doing a CI. Studies of tissue may be exempt from review by a HUC and informed consent to use such specimens may be waived by a HUC (see para 3–5*b*(2)).

(21) Requests for exception to policy as stated in this regulation will be submitted to the Assistant Surgeon General for Research and Development, c/o Commander, U.S. Army Medical Research and Development Command, ATTN: SGRD–HR, Fort Detrick, Frederick, MD 21701–5012. Requests will then be submitted to TSG's HSRRB for evaluation and recommendations to TSG and TSG's recommendation to the USD(A) or ASD(HA), as appropriate.

Appendix A
References

Section I
Required Publications

ANSI–STD–Z39–18–1987
Scientific and Technical Reports: Organization, Preparation and Production. (Cited in para 3–5*k*(1).) (This publication may be obtained from the Naval Publications and Forms Center, 5801 Tabor Avenue, Philadelphia, PA 19120–5099.)

AR 1–100
Gifts and Donations. (Cited in paras 3–6*a*(5) and 3–6*b*(3)(g)).

AR 15–38
Test Schedule and Review Committee. (Cited in para 3–1*c*.)

AR 25–400–2
The Modern Army Recordkeeping System (MARKS). (Cited in paras 3–5*j* and F–7*b*.)

AR 37–100–FY (vols 1 and 2)
The Army Management Structure (AMS). (Cited in paras 3–5*k*(1), 3–6*a*(1) and (2), 3–6*b*(3) and (3)(a), E–3, E–5, and the glossary.)

AR 40–3
Medical, Dental, and Veterinary Care. (Cited in para 3–3*j*(1) and (2).)

AR 40–7
Use of Investigational Drugs in Humans and the Use of Schedule I Controlled Drug Substances. (Cited in paras 1–4*b* and 2–10*c*(6) and the glossary.)

AR 40–10
Health Hazard Assessment Program in Support of the Army Materiel Acquisition Decision Process. (Cited in para 3–5*e*(5).)

AR 70–14
Publication and Reprints of Articles in Professional Journals. (Cited in para 3–5*k*(2) and 3–6*b*(17).)

AR 70–18/SECNAVINST 3900.38/AFR 169–2/DARPAINST 18/DNAINST 3216.1/USUHSINST 3203
The Use of Animals in DOD Programs. (Cited in para 3–2.)

AR 70–25
Use of Volunteers as Subjects of Research. (Cited in paras E–3 and E–5.)

AR 70–31
Standards for Technical Reporting. (Cited in para 3–5*k*(1).)

AR 71–3
User Testing. (Cited in para 3–1*c*.)

AR 335–15
Management Information Control System. (Cited in app G.)

AR 340–21
The Army Privacy Program. (Cited in para 3–4*b*.)

AR 360–5
Army Public Affairs, Public Information. (Cited in para 3–5*k*(2).)

AR 600–46
Attitude and Opinion Survey Program. (Cited in paras 2–5, 2–10*c*(13), and 3–5*b*(6).)

AR 600–110
Identification, Surveillance, and Administration of Personnel Infected with Human Immunodeficiency Virus (HIV). (Cited in para 3–3*k*.)

AR 621–7
Acceptance of Fellowships, Scholarships, or Grants. (Cited in para 3–6*b*(3)*(e)*.)

DHHS Regulation
Protection of Human Subjects (45 CFR 46). (Cited in paras 1–4*e*, 2–2, and 3–5*d*(4) and *k*(2) and (3).) (This publication may be obtained from the Department of Health and Human Services, Public Health Service, 200 C Street, Washington, DC 20204.)

FDA Regulation
Food and Drugs (21 CFR subchaps A, D, H). (Cited in paras 2–2, 3–3*q*, 3–5*b*(5), and the glossary.) (This publication may be obtained from the Department of Health and Human Services, Public Health Service, Food and Drug Administration, 200 C Street, Washington, DC 20204.)

TB MED 525
Control of Hazards to Health From Ionizing Radiation Used by the Army Medical Department. (Cited in para 3–5*b*(4).)

Section II
Related Publications

A related publication is merely a source of additional information. The user does not have to read it to understand this regulation.

AR 11–2
Internal Control Systems.

AR 40–66
Medical Record and Quality Assurance Administration.

AR 70–10
Test and Evaluation During Development and Acquisition of Materiel.

AR 600–50
Standards of Conduct for Department of the Army Personnel.

AR 611–3
Army Occupational Survey Program (AOSP).

DODD 3216.1
The Use of Animals in DOD Programs. (This publication may be obtained from the Naval Publications and Forms Center, Code 3015, 5108 Tabor Avenue, Philadelphia, PA 19120–5099.)

DODD 6465.2
Organ Disposition After Autopsy. (To obtain this directive, see the DODD 3216.1 entry above.)

MCM–1984
Manual for Courts-Martial, United States, 1984.

Note: The following United States Code (USC) statutes and Decisions of the Comptroller General (DCG) are available for reference at local installation staff judge advocate offices.

5 USC 3109
Employment of Experts and Consultants.

5 USC 5536
Extra Pay for Extra Services Prohibited.

5 USC 8100
Compensation for Work Injuries.

10 USC 980
Limitation on Use of Humans as Experimental Subjects.

10 USC 3013
Under Secretary of the Army; Assistant Secretaries of the Army.

10 USC 4503
Research and Development Programs.

10 USC 4540
Architectural and Engineering Services.

24 DCG 648.

24 USC 30
Payment to Donors of Blood for Persons Undergoing Treatment at Government Expense.

26 USC 501
Exemption from Tax on Corporations, Certain Trusts, etc.

45 DCG 649.

50 USC APP 2160
Employment of Personnel.

Section III
Prescribed Form

DA Form 5303–R
Volunteer Agreement Affidavit. (Prescribed in para 3–5*b*.)

Section IV
Referenced Forms

DA Form 2028
Recommended Changes to Publications and Blank Forms.

FDA Form 1571
Notice of Claimed Investigational Exemption for a New Drug. (This blank form may be obtained from the National Center for Drugs and Biologics, Food and Drug Administration, 5600 Fishers Lane, Rockville, MD 20857.)

FDA Form 1572
Statement of Investigator (Clinical Pharmacology). (To obtain this blank form, see the FDA Form 1571 entry.)

SF 1034
Public Voucher for Purchases and Services Other Than Personal.

Appendix B
Exempted Research Categories

B–1. General
Research in which human subjects are involved in one or more of the categories listed in this appendix are exempt from this regulation.

B–2. Health care delivery and epidemiology
Health care delivery studies or routine epidemiological surveys that involve tests or procedures of no more than minimal risk. (See the glossary for the definition of an epidemiological survey.)

B–3. Educational methods
Research in educational settings that involves normal educational practices such as—

a. Regular and special education strategies.

b. The effectiveness of, or the comparison among, techniques of instruction and curricula or classroom management methods.

B–4. Educational tests
Research that involves the use of educational tests when the data are recorded in such a way that subjects cannot be identified directly or indirectly.

B–5. Public behavior
Research that involves survey, interview procedures, or the observation of public behavior (including observation by participants) except where all the following exist:

a. Responses or observations are recorded in such a way that subjects can be identified directly or through identifiers linked to the subject.

b. The subject's responses or recorded observations, if they become known outside the research, could reasonably place the subject at risk of criminal or civil liability or would damage the subject's financial standing or employability.

c. The research deals with sensitive aspects of the subject's behavior, such as illegal conduct, drug use, sexual behavior, or the use of alcohol.

B–6. Existing records and specimens
Research involving the collection or study of existing data, documents, records, and pathological or diagnostic specimens if these sources are publicly available or if the information is recorded in such a way that subjects cannot be identified directly or through identifiers linked to the subject.

B–7. Training
Research involving individual or group training of military personnel such as combat readiness, effectiveness, proficiency, or fitness exercises (for example, Army Training and Evaluation Program (ARTEP) and skill qualification test (SQT)). Evaluations of the training's effect on the individual participants may or may not be exempt depending on how the evaluation is made (for example, drawing of blood is not exempt).

B–8. Personnel qualified to test by duty assignment
Job related tasks of military or civilian personnel who are qualified to test by duty assignments that call specifically for such qualifications.

B–9. Other
Other research that is exempted by future changes to DHHS regulations.

Appendix C
Instructions for the Completion of the Volunteer Agreement Affidavit

C–1. General
The PI will fill in the information listed in this appendix on DA Form 5303–R in part B and inform the subject of all information entered.

C–2. Title and location
Provide the title of the study and place where it is to be conducted.

C–3. Principal investigator
Provide the name of the PI conducting the study.

C–4. Description of the study
Include a statement that the study involves research. Also provide an explanation of the purpose of the study and the expected duration of the subject's participation; a description of the procedures to be followed; an identification of any experimental procedures; and a statement giving information about prior, similar, or related studies that provide the rationale for this study.

C–5. Risks
Include a description of any reasonably foreseeable risks or discomforts to the subject.

C–6. Benefits
Include a description of the benefits, if any, to the subject or to others that may reasonably be expected from the study. If there is no benefit to the subject, it should be so stated.

C–7. Alternative treatment
When applicable, include a disclosure of proper alternative procedures or courses of treatment, if any, that might be advantageous to the subject.

C–8. Confidentiality
Include a statement describing the extent, if any, to which confidentiality of records identifying the subject will be maintained. Also, in the case of an investigational drug or medical device protocol, include a statement noting that the FDA may inspect the records, or if the study is being performed by a contractor, a statement noting that representatives of the DOD may inspect the records.

C–9. Points of contact
Provide information on whom to contact for answers to pertinent questions about the study and the study subject's rights and whom to contact in the event of a study-related injury to the subject. This should include a name or office and the commercial and AUTOVON telephone numbers.

C–10. Subjects' rights
Include a statement that—

a. Participation is voluntary.

b. Refusal to participate will involve no penalty or loss of benefits to which the subject is otherwise entitled.

C–11. Compensation
For a study involving more than minimal risk, include an explanation as to whether compensation and medical treatment are available if injury occurs and, if so, what they consist of or where further information may be obtained.

C–12. Cautions
When appropriate, one or more of the elements of information below will also be given to each subject.

a. A statement that a certain treatment or procedure may involve risks to the subject (or to the embryo or fetus if the subject is or may become pregnant) that are currently unforeseeable.

b. The anticipated circumstances under which the subject's participation may be terminated by the investigator without regard the subject's consent.

c. Additional costs to the subject that may result from participation in the study. (Retired military personnel may have their tired pay recomputed if they are paid for their participation. paragraph 3–6*b*(10)).

d. The consequences of a subject's decision to withdraw fr the study and procedures for the orderly end of the subje participation.

e. A statement that new findings developed during the cours the study that could affect the subject's willingness to conti will be given to the subject.

f. The approximate number of subjects involved in the stud

g. The precautions to be observed by the subject before and ter the study.

h. If photographs are to be taken, the degree to which acti will be taken to protect the identity of the subject.

i. A statement as to whether the results of the study will made available to the subject and if made available, in what mat. In studies where subjects are in frequent contact with e other (for example, members of small units, office coworkers, e information released pertaining to the study results will not clude identifiers sufficiently individualized as to allow identif tion of other study subjects by the person receiving information.

C–13. Disposition of the informed consent
The PI will retain the original signed form. A copy will be pro ed to the volunteer. The investigator also provides a copy of signed DA Form 5303–R to the medical records custodian fo clusion in the volunteer's medical treatment record if the vo teer agrees to its inclusion in the record. (AR 40–66, para 6 authorizes the inclusion of the form in the medical record.)

Appendix D
Reporting Format for the Annual Progress Report (Clinical Investigation Program, RCS MED–300(R1))

D–1. Cover
Document the report as the "Clinical Investigation Program, RCS MED–300(R1)" to identify it as a recurring medical report.

D–2. Front matter
Include the following elements:

a. Title page.

b. Foreword.

c. Table of contents.

(1) List according to hospital departments (medicine, surgery, etc.).

(2) Indicate the year the project was initiated and its present disposition: Ongoing (O), terminated (T), completed (C), submitted for publication (SP), or published (P).

D–3. Table of publications and presentations for the current fiscal year
List according to hospital department with the following identification as appropriate: (SP) submitted for publication and (C) result of an approved CI protocol.

D–4. Unit summary sheet
Report the total activities of the CIs unit, providing the following information:

a. Objectives.

b. Technical approach.

(1) Manpower.

(2) Funding (preceding and current fiscal year).

c. Progress.

D–5. Detail sheets
Report specific information of individual protocols, providing the following information:

a. Objectives.

b. Technical approach.

(1) Summary of experimental design.

(2) Manpower.

(3) Funding (preceding and current fiscal year).

(4) Number of subjects enrolled to date.

(5) Number of subjects enrolled for reporting period.

(6) Nature and extent of significant adverse reactions.

(7) Latest date of periodic review and decision to continue or discontinue study.

c. Progress. Summary of prior and current progress and all publications and presentations.

D–6. Back matter
Include the following elements:

a. Index by subject and author.

b. Back cover.

Appendix E
Legal Implications

E–1. Authority

The Secretary of the Army is authorized to conduct CI programs (10 USC 4503). The Secretary has the authority to "assign, detail, and prescribe the duties" of both members of the Army and civilian personnel of the DA (10 USC 3013(g)).

E–2. Military personnel and Department of the Army civilian employees

Compensation for the disability or death of a civilian employee resulting from personal injury or disease proximately caused by employment is payable under the Federal Employees Compensation Act (5 USC 8100 et seq.), regardless of whether employment was of a hazardous nature. The amount and type of disability compensation or other benefits payable by reason of the death or disability of a member of the Army resulting from injury or disease incident to service depends upon the individual status of each member and is covered by various provisions of law. It may be stated generally that under present laws no additional rights against the Government will result from the death or disability of military and civilian personnel participating in experiments by reason of the hazardous nature of the operations.

E–3. Private citizens

Private citizens who are not enrolled in the DEERS may not be used in CIs conducted with Major Defense Program 8 funds (see AR 37–100–FY). See AR 70–25 for a discussion on the use of private citizens in research funded by any Major Defense Program 6 funds (see AR 37–100–FY).

E–4. Use of appropriated funds for the purchase of insurance

Since the payment of insurance premiums on the life of an officer or employee of the United States is a form of compensation that is not currently authorized, payment of those premiums is prohibited. (5 USC 5536; *Commissioner of Internal Revenue v. Bonwit,* 87 F. 2d 764 (2d Cir. 1937); *Canaday v. Guitteau,* 86 F. 2d 303 (6th Cir. 1936); 24 DCG 648 (1945).)

E–5. Contractor's employees

Contractor employees who are not enrolled in the DEERS may not be used in CIs conducted with Major Defense Program 8 funds (see AR 37–100–FY). See AR 70–25 for a discussion of the use of contractor employees in research funded by Major Defense Army Program 6 funds (see AR 37–100–FY).

E–6. Irregular or fee-basis employees

Intermittent services of such employees are authorized. (For experts and consultants, see 5 USC 3109(b); sec. 710, Defense Production Act of 1960 (64 Stat. 819; 50 USC App 2160); and for architects, engineers, and other technical and professional personnel on a fee-basis, see 10 USC 4540.) Whether these employees can be detailed or assigned to the proposed experiments will depend upon the statutory authority for employment and the provisions of individual employment agreements. A final determination for these irregular and fee-basis employees for any injury or disease resulting from their employment would be made by the Federal agency responsible for deciding claims. Subject to such restrictions and limitations as may appear in the statutory authority under which an individual is employed, the Government may be legally responsible for the expense of premiums upon the life of an irregular or fee-basis employee whose rate of compensation is not fixed by law or regulations. (In this regard, the Government may provide an additional allowance to the employee for financing such private insurance arrangements as that employee may wish to make rather than to undertake direct negotiations with insurance carriers for the desired coverage.)

Appendix F
Human Use Committees

F–1. General

Before a HUC may review CIs that propose to use human subjects, its policies, procedures, and composition must be approved by HQ, HSC, for units assigned to that command or by TSG for all other units.

F–2. Membership

a. Membership will include only full-time Federally employed persons.

b. Each HUC will have at least five members. Members will have diverse backgrounds to ensure thorough review of protocols involving human volunteers as research subjects. Members should be sufficiently qualified through experience and expertise. The racial and cultural backgrounds of members and their sensitivity to such issues as community attitudes should ensure respect for their advice and counsel in safeguarding the rights and welfare of human subjects.

c. Besides having the professional competency to review protocols, the HUC will be able to determine if the proposed protocol is acceptable. Acceptability will be in terms of Army Medical Department commitments and regulations, applicable law, and standards of conduct and practice. If a HUC routinely reviews protocols that involve vulnerable categories of human subjects (for example, individuals with acute or severe physical or mental illness or individuals who are economically or educationally disadvantaged), it will include one or more persons concerned primarily with the welfare of these subjects.

d. No HUC may consist entirely of men or women.

e. Each HUC will include at least one member whose primary concerns are scientific and at least one member whose primary concerns are nonscientific (for example, lawyers, ethicists, and members of the clergy). Should a given proposal involve more than minimal risk, a physician will be included as a member of the committee.

f. Each HUC will include at least one member who is not otherwise affiliated with the institution and who is not part of the immediate family of a person affiliated with the institution. This requirement may be met by appointing a member of an institution or organizational unit not subject to the immediate authority of the approving official.

g. Except to provide information requested by the HUC, no HUC member may take part in a review of any project in which the member serves as the PI or associate investigator.

h. A HUC may invite persons with special competence to assist in the review of complex issues that require expertise beyond that available on the HUC. These persons may not vote with the HUC.

i. The approving official may not be a member. The approving official may not approve protocols for which he or she is also a PI or associate investigator. A higher echelon of command must review and approve such protocols.

F–3. Functions and operations

Each HUC—

a. Will observe written procedures for the following:

(1) Conducting the initial and continuing review of the protocol. Included would be reporting findings and actions to the investigator and the approving official.

(2) Determining those projects that must be—

(a) Reviewed more often than yearly.

(b) Verified from sources other than the investigators that no material changes have occurred since the previous HUC review.

(3) Ensuring prompt reporting to the HUC of proposed changes in the protocol. Each HUC will ensure that changes in approved projects (during the period for which approval has already been given) are not initiated without HUC review except to eliminate immediate hazards to the subject.

(4) Ensuring prompt reporting to the HUC and approving official of unexpected problems involving risks to the subjects or others.

b. Will review proposed protocols at convened meetings except when an expedited review procedure is used—see para F–4) at which a majority of the members are present, including at least one member whose concerns are in nonscientific areas and at least one unaffiliated member. In order for the proposal to be approved, it must receive the approval of a majority of those members present at the meeting.

c. Will report to the approving official any serious or continuing noncompliance with HUC requirements and determinations found by investigators.

d. Will conduct continuing review of protocols at intervals proper to the degree of risk but not less than once per year.

e. Will have the authority to observe or have a third party observe the consent process and the investigation.

f. Will maintain a current list of HUC members. Members will be identified by name, earned degrees, and representative capacity and experience, such as board certifications and licenses. The information will be complete enough to describe each member's chief expected contributions to HUC reviews. Any employment or other relationship between members and the institution will be noted.

g. May recommend safeguards or special conditions to a protocol. If the HUC does so, the approving official may take the following action:

(1) Approve the protocol without reducing the safeguards or conditions.

(2) Require additional safeguards.

(3) Disapprove the protocol.

(4) Refer the protocol to a higher echelon approving authority and review committee.

F–4. Expedited review procedures

a. See appendix H for a list of categories of investigations that the HUC may review in an expedited review procedure.

b. See paragraph 3–5*g* for the expedited review procedure that the HUC will follow.

F–5. Criteria for HUC approval of clinical investigations

a. In evaluating risks and benefits for CIs, the HUC should consider only those that may result from the investigation.

b. To approve investigations covered by this regulation, the HUC will determine that all of the requirements below are met.

(1) Risks to subjects are minimized by using procedures that are—

(a) Consistent with sound investigation design and do not unnecessarily expose subjects to risk.

(b) Already being used on the subjects for diagnosis or treatment, when appropriate.

(2) Risks to subjects are reasonable in relation to anticipated benefits to subjects.

(3) In making an assessment for the selection of subjects, the HUC should take into account the—

(a) Purpose of the investigation.

(b) Setting in which the CI will be conducted.

(4) Informed consent will be sought from each prospective subject or the subject's legally authorized representative.

(5) Informed consent will be properly documented.

(6) The plan makes adequate provision for monitoring the data collected to ensure the safety of subjects when appropriate.

(7) Adequate provisions exist to protect the privacy of subjects and to maintain the confidentiality of data, when appropriate.

c. Some or all of the subjects may be vulnerable to coercion or undue influence. These may be persons with acute or severe physical or mental illness or those who are economically or educationally disadvantaged. If so, proper additional safeguards will be included in the study to protect the rights and welfare of these subjects.

F–6. Suspension or termination of approved clinical investigation

a. A HUC will have the authority to suspend or end an approved investigation that—

(1) Is not being conducted according to the HUC's requirements.

(2) Has been associated with unexpected serious harm to subjects.

b. Suspensions or terminations of investigations will include a statement of the reasons for the HUC's action. They will be reported promptly to the PI and approving official.

F–7. HUC records

a. A HUC will prepare and maintain adequate documents on HUC activities, including—

(1) Copies of all protocols approved, scientific evaluations that accompany the proposals, approved sample consent documents, progress reports submitted by investigators, and reports of injuries and adverse reactions.

(2) Minutes of HUC meetings documenting the date of protocol distribution to the members; the date of local approval; attendance; actions taken by the HUC; the vote on these actions, including the number of members voting for, against, and abstaining a decision; the basis for requiring changes or disapproving the investigation; and a written summary of the discussion of controversial issues and their resolution.

(3) Records of continuing review activities.

(4) Copies of all correspondence between the HUC and the investigators.

(5) A list of HUC members.

(6) Written procedures for the HUC.

(7) Statements of significant new findings.

b. The records required by this regulation will be retained permanently (see Ar 25–400–2). Such records will be reasonably accessible for inspection and copying by authorized DA personnel and representatives of the FDA.

F–8. Conflict of interest

a. It is essential that the members of the HUC continue to be perceived as and, in fact, are free from conflict of interest in their daily duties, especially with respect to the protocols that they review.

b. The issue of conflict of interest has been addressed by public law, DOD directive, and Army regulation. The situations discussed below are merely examples of *some* types of activities and relationships that may result in a conflict or the appearance of a conflict of interest.

(1) *The potential for personal or financial gain.* A committee member who is deliberating on a protocol that involves the interests of a commercial firm in which the committee member or a member of his or her immediate family is a corporate officer, stockholder, consultant, or employee has a conflict of interest and may not participate in the deliberations on that protocol.

(2) *The potential for personal reward.* A committee member who is affiliated with a protocol in the capacity of principal, associate, or coinvestigator has a conflict of interest and may not participate in deliberations of the committee on that protocol, other than to provide additional information as requested by other committee members. A committe member with such a conflict of interest must abstain from voting on the protocol.

(3) *Command influence.* It is imperative that the committee, through its members, continue to be recognized as a reasonable, deliberative body whose bias is the safety and welfare of the research subject. It is incumbent upon committee members to exercise independent, professional judgment that is free of influence from superior authority and to assure that their concerns regarding the moral, ethical, and legal issues of each protocol are answered to their satisfaction before voting on the protocol.

c. Commanders or organizational heads will establish a method to ensure that each committee member is familiar with the pertinent laws and regulatory guidance regarding conflict of interest.

F–9. Legal review

Prior to establishing a HUC, the commander or organizational head will obtain legal counsel from the staff judge advocate (SJA). All protocols should receive legal review, either by a legal representative to the HUC or, if the HUC membership does not include a legal representative, by the local SJA, to ensure that informed consent procedures conform to State and local law.

Appendix G
Guidelines for a Clinical Investigation Protocol (Exempt from report requirements per AR 335–15, para 5–2*b*.)

G–1. Project title
Enter the complete project title. If an amendment, the words "Amendment to" must precede the project title.

G–2. Investigators
List the—
a. PI.
b. Associate investigators.

G–3. Location of study
List the facilities to be used.

G–4. Time required to complete the study
Give the month and year of the expected start and anticipated completion dates.

G–5. Introduction
a. Synopsis. This should include the following:
(1) A one-page summary of the proposed study similar to the abstract of a scientific paper.
(2) Major safety concerns for human subjects briefly highlighted.
b. Medical application. Explain briefly the medical importance and possible usefulness of the project.
c. Objectives. State briefly, but specifically, the objectives of the project, to include, when applicable—
(1) Study design.
(2) Medications used.
(3) Type of subject population observed.
d. Status. State what has been accomplished or published in the proposed area of study. Describe the way in which the project will relate to, or differ from, that which has been accomplished.
e. Bibliography. List all references referred to in preparing the protocol.

G–6. Plan
Outline exactly what is to be accomplished in enough detail to show a clear course of action to include the technological validity of procedures and chronological steps to be taken. The plan should include the following information on the selection of subjects:
a. Number of subjects. The total number of subjects expected to complete the study.
b. Age range.
c. Sex.
d. Inclusion criteria. Specific and detailed reasons for inclusion should be presented.
e. Diagnostic criteria for entry.
f. Evaluations before entry. X ray, physical examination, medical history, hematology, chemistry, and urinalysis.
g. Exclusion criteria. A complete list detailing what subjects, diseases, and medications are excluded from the study.
h. Source of subjects. Describe briefly where subjects will be obtained.
i. Subject identification. Describe the code system used.
j. Subject assessment. Describe the method by which subjects are assigned study medications.
k. Risks and benefits analysis to subject; risks to those conducting the CI.
l. Precautions. List precautions to be taken to minimize or eliminate risks to subject.
m. Corrective action. State what corrective action is necessary if adverse reactions occur.
n. Special medical or nursing care or equipment. List care or equipment needed for subjects admitted to the project.

G–7. Project medications
Describe when applicable and include—
a. The complete name of all medications used to include control.
b. The source of all medications to include controls and lot numbers. If the medication is formulated within DA, list all components, when formulated, and manufacturing and quality control plans.
c. The place where study medications are to be stored during the study.
d. Dose range.
e. Dose schedule.
f. Radioactivity specifications.
g. Administration.
h. Pre-drug period.
i. Duration of drug treatment.
j. Accompanying medications (those allowed).
k. If needed, what antidotes must be available.
l. Labeling of study medications. (Include a copy of the label format.)

G–8. Evaluations made during and following the project
Include the evaluations listed below; it is very important to state in the protocol *who* is actually going to perform these evaluations. Evaluations may also be represented by using a project schematic.
a. Specimens to be collected.
(1) Schedule.
(2) Evaluations to be made on specimens.
(3) Storage. (Include location and if special conditions are required.)
(4) Labeling and disposition.
(5) Laboratories performing evaluations.
(6) Special precautions for subject and investigators.
b. Clinical assessments. (To include how adverse effects are to be recorded.)
c. Vital signs. When desired and frequency.
d. Followup procedures.
e. Disposition of data. (Location and duration of storage.)
f. Methods used for data collection. Critical measurements used as end points to characterize safety, efficacy, or equivalency.
g. Statistical measures in analyzing data.
h. Equipment. Describe equipment and supply requirements, costs, and resources.

G–9. Departure from protocol for individual patients
Include the following information:
a. When allowed. (Flexible but definite criteria.)
b. Who will be notified.

G–10. Adverse reactions
Include—
a. Definition of subject reactions.
b. Immediate reporting.
c. Routine reporting.

G–11. Modification of protocol
Describe the procedure to be followed if the protocol is to be modified, terminated, or extended.

G–12. Observation forms
Provide an example of all observation forms.

G–13. Disposition of unused project medications
Provide a statement pertaining to the disposition of unused medications, if applicable.

G–14. Use of information and publications arising from the study
Provide a statement of how information and publications resulting from the study are to be used.

G–15. Funding implications
Include the other department's or service's resources (time, personnel, equipment, etc.) and an indication of coordination with the affected department or service.

G–16. Medical monitor
Provide the name and telephone number of the medical monitor, when applicable.

G–17. Human use committee
Give a brief explanation of which HUC will provide initial, continuing, and annual review.

G–18. Signature
Include the signature of the appropriate approving official and the date.

G–19. Documentation
Include—

a. Completed DA Form 5303–R. (See app C.)
b. Institutional review of scientific and human use issues.
c. RCC, or equivalent, and review and approval, if applicable.
d. Radioactive drug research committee, review, and approval, if applicable.
e. Human use approval.
f. Animal use review and approval, if applicable.
g. Biographical sketch of principal and associate investigators.
h. Completed copies of the following FDA Forms, if applicable.
(1) FDA Form 1571 (Notice of Claimed Investigational Exemption for a New Drug).
(2) FDA Form 1572 (Statement of Investigator (Clinical Pharmacology)).

Appendix H
Expedited Review Categories

H–1. General

The nine categories of studies that may be reviewed using the expedited review procedures are described in this appendix.

H–2. Hair, nails, teeth

Collection of—

a. Hair and nail clippings in a nondisfiguring manner.

b. Deciduous teeth.

c. Permanent teeth if patient care indicates a need for extraction.

H–3. Excreta and secretions

Collection of excreta and external secretions including sweat, uncannulated saliva, placenta removed at delivery, and amniotic fluid at the time of rupture of the membrane prior to or during labor.

H–4. Physical data

Recording of data from subjects who are 18 years of age or older, using noninvasive procedures routinely employed in clinical practice. This category—

a. Includes the use of physical sensors that are applied either to the surface of the body or at a distance and do not involve input of matter or significant amounts of energy into the subject or an invasion of the subject's privacy.

b. Includes such procedures as—

(1) Weighing.

(2) Electrocardiography.

(3) Electroencephalography.

(4) Thermography.

(5) Detection of naturally occurring radioactivity.

(6) Diagnostic echography.

(7) Electroretinography.

c. Does not include exposure to electromagnetic radiation outside the visible range (for example, x rays or microwaves).

H–5. Blood

Collection of blood samples by venipuncture, in amounts not exceeding 450 milliliters in an 8-week period and no more often than two times per week. Subjects will be 18 years of age or older, in good health, and not pregnant.

H–6. Dental plaque and calculus

Collection of both supragingival and subgingival dental plaque and calculus. The procedure must not be more invasive than routine prophylactic scaling of the teeth. The process must be accomplished according to accepted prophylactic techniques.

H–7. Voice records

Voice recordings made for research purposes such as investigations of speech defects.

H–8. Exercise

Moderate exercise by healthy volunteers.

H–9. Existing data

Study of existing data, documents, records, pathological specimens, or diagnostic specimens.

H–10. Behavior

Research on individual or group behavior or characteristics of individuals, such as studies of perception, cognition, game theory, or test development, where the investigator does not manipulate the subject's behavior and research will not involve stress to subjects.

Glossary

Section I
Abbreviations

AQCESS
Automatic Quality of Care Evaluation Support System

ARNG
Army National Guard

ARTEP
Army Training and Evaluation Program

ASD(HA)
Assistant Secretary of Defense (Health Affairs)

AUC
animal use committee

BAA
Broad Agency Announcement

CFR
Code of Federal Regulations

CI
clinical investigation

CIP
clinical investigation program

DA
Department of the Army

DCI
department of clinical investigation

DCSPER
Deputy Chief of Staff for Personnel

DEERS
Defense Eligibility Enrollment System

DHHS
Department of Health and Human Services

DOD
Department of Defense

DODD
Department of Defense Directive

DTF
dental treatment facility

FDA
Food and Drug Administration

FY
fiscal year

HIV
human immunodeficiency virus

HSC

HSRRB
Human Subjects Research Review Board

HUC
human use committee

HURRAO
Human Use Review and Regulatory Affairs Office

IDE
Investigational Device Exemption

IND
Investigational Exemption for a New Drug

IRB
institutional review board

MACOM
major Army command

MCM
Manual for Courts-Martial

MEDCEN
medical center

MTF
medical treatment facility

NCI
National Cancer Institute

NDA
New Drug Application

NIH
National Institutes of Health

PCS
permanent change of station

PI
principal investigator

RCC
radiation control committee

RCS
Requirement Control Symbol

RDTE
research, development, test, and evaluation

SJA
staff judge advocate

SQT
skill qualification test

SSC—NCR
Soldier Support Center—National Capital Region

TSG
The Surgeon General

UCMJ

USAMRDC
U.S. Army Medical Research and Development Command

USAR
U.S. Army Reserve

USD(A)
Under Secretary of Defense for Acquisition

USUHS
Uniformed Services University of the Health Sciences

Section II
Terms

Adverse personnel action
For the purposes of the regulation this term includes—
a. A court-martial.
b. Nonjudicial punishment.
c. Involuntary separation (other than for medical reasons).
d. Administrative or punitive reduction in rank.
e. Denial of promotion.
f. An unfavorable entry in a personnel record.
g. A bar to reenlistment.
h. Any other action considered by the Secretary to be an adverse personnel action.

Approving official
A military commander or civilian director of an organizational element of a DA component who has been delegated authority to approve a CI protocol.

Assent
A child's affirmative agreement to participate in CIs. Mere failure to object should not, absent affirmative agreement, be construed as assent.

Associate investigator
A person who may be involved in the execution of research but does not have overall responsibility. The FDA refers to such individuals as subinvestigators.

Clinical investigation
An organized inquiry into clinical health problems for all conditions that are of concern in providing health care to the beneficiaries of the military health care system including active duty personnel, dependents and retired personnel.

Clinical investigation committee
A committee appointed by the commander to review, before HUC review, CI protocols for scientific adequacy to set priorities for support and to make recommendations. This committee may be consolidated with the HUC.

Clinical trial
The research process necessary to gain marketing approval of an investigational dru

Consent
See informed consent.

Donor
An individual, organization, or corporation that gives funds, services, or tangible or intangible property to the Government without any compensation or promise of compensation.

Epidemiologic-assessment interview
For the purposes of this regulation, the term means the questioning of a seropositive soldier for medical treatment or counseling or for epidemologic or statistical purposes.

Epidemiological surveys .
For the purpose of this regulation, the term means studies involving no more than minimal risk on the distribution and determinants of the frequency of disease in humans in which the study data are not linked to personal identifiers. Epidemiological surveys focus on the "ills" of a population rather than on persons.

Expedited review procedures
Those procedures used in certain kinds of investigations involving no more than minimal risk and those used for minor changes in approved investigations (see app H).

Experimental subject
See Human subject.

Gifts
Any donation of funds, services, or tangible or intangible property from a non-DOD source for which there is no compensation or promise of compensation on behalf of the donor.

Grant
An award of funds, services, or tangible or intangible property from a nonprofit organization or Federal agency in support of the CIP that is pursuant to a written agreement.

Grantor
Any corporation, foundation, trust, or institution that is operated for the purpose of higher learning or research, is not organized for profit, and does not provide any net earnings to shareholders or individuals.

Health and Human Services Certificate of Assurance
A document issued by the Office for Protection From Research Risk, DHHS, in which that office acknowledges that a research institution has established policies and procedures consistent with Federal regulations (app A). Research institutions must have this certificate in order to receive research funds from the NIH.

Health care delivery studies
Application of scientific methods to the study of the availability, organization, administration, and management of health services. The efficiency and effectiveness with which such services are delivered are included.

Health care personnel
Military personnel, civilian employees, or contract personnel (including military and civilian staff members assigned to, employed by, or appointed to the USUHS) who provide patient care or patient care support services in military MTFs and DTFs.

Human subject
a. A living individual about whom an investigator conducting CI or research obtains data through interaction with the individual, including both physical procedures and manipulations of the subject or the subject's environment. The term does not include military or civilian personnel who are qualified to test by assignment to duties that call specifically for such qualifications such as test pilots and test engineers.

b. Minor (child). A person who has not attained the legal age for consent to treatments or procedures involved in clinical research under the applicable laws and jurisdiction in which the CI will be conducted.

c. Human subjects may be thought of as direct objects when the research is to determine the effects of a new system on humans (for example, the effects of a weapon's blast on hearing) or as indirect objects when a test is conducted to determine how humans affect the ultimate performance of a system (doctrine, concepts, training programs).

Human Subjects Research Review Board
The principal body of the Office of The Surgeon General for review of CI and research activities.

Human use committee
A body set up to provide initial and continuing review of CIs involving the use of human subjects. A HUC is fundamentally similar to an IRB established under Federal regulations (app A) but has somewhat different authority as compared to an IRB. Within the DOD, authority to approve the use of human subjects in CI is vested in commanders. Commanders act on the recommendations of validly constituted HUCs. Outside DOD, IRBs tend to be vested with this authority. Appendix F describes the membership, functions, and operations of a HUC.

Informed consent
The legally effective agreement of the subject or the subject's legally authorized representative for the subject to participate in CIs covered by this regulation. Informed consent includes, when appropriate, those elements listed in appendix C of this regulation.

a. Permission. The agreement of parent(s) or guardian to the participation of their child or ward in CI.

b. Guardian. An individual who is authorized under applicable State or local law to consent on behalf of a minor (child) to general medical care.

c. Assent. A minor's (child's) affirmative agreement to participate in CI. Mere failure to object should not, absent affirmative agreement, be construed as assent.

Institution
Any public or private entity or agency (including Federal, State, or other agencies).

Investigational drug
A drug may be considered investigational when the composition is such that—

a. Its proposed use is not recognized for the use under the conditions prescribed, or its proposed use is not recommended or suggested in its approved labeling. Experts qualified by scientific training and experience evaluate the safety and effectiveness of drugs to make this determination.

b. Its use has become recognized as investigational as a result of studies to determine its safety and effectiveness for use under such conditions.

Investigational medical device
a. A device that is not generally used in the diagnosis, cure, mitigation, treatment, or prevention of disease in humans, and recognized as safe and effective.

b. Research is usually, but not necessarily, initiated to determine if the device is safe or effective.

Legally authorized representative
A person or judicial or other body authorized under applicable law to consent on behalf of a prospective subject to the subject's taking part in the procedures involved in the CI.

Major Defense Program 6 Funds
Funds appropriated to the DOD to conduct research by RDTE activities. (See AR 37–100–FY.)

Major Defense Program 8 Funds
Funds appropriated to the DOD to provide health care. (See AR 37–100–FY.)

Medical device
Any instrument, apparatus, or other similar or related article, including component, part, or accessory that—

a. Is recognized in the National Formulary or United States Pharmacopeia or any supplement thereto; and

b. Is intended for use in the diagnosis of disease or other conditions or in the cure, mitigation, treatment, or prevention of disease in man or other animals; or

c. Is intended to alter the structure or function of the body of man or other animals; and

d. Does not achieve any of its principal intended purposes through chemical action within or on the body of man or other animals and is not dependent upon being metabolized for the achievement of any of its principal intended purposes.

Medical monitor
This person is a military or DA health care provider qualified by training, experience, or both, to monitor human subjects during the conduct of CIs. This person is an advocate for the medical safety of the volunteers and as such will not be an investigator involved in the protocol.

Minimal risk
The proposed risks are not considered greater than those encountered in the subject's daily life or during routine physical or psychological examinations.

New Drug Application
Documentation submitted to the FDA that is intended to demonstrate the safety and effectiveness of the drug in order to obtain approval to market the drug in the United States.

Non-U.S. citizens
Foreign nationals excluding personnel on active duty.

Personal identifier
A method or system that links data to the individual from whom or about whom it pertains.

Principal investigator
A uniformed or civilian individual who is assigned or employed in an MTF, DTF, USUHS, or other DOD research facility and who is responsible for the innovation, experimental design, generation, and analysis of data, presentation of reports, and protection of human subjects in the performance of a CI study.

Protocol
The written, detailed plan by which clinical investigation is to be conducted. (See app G for an example of a CI protocol.) The plan contains, as a minimum—

a. The objectives of the project.

b. The information to be collected and the means by which it will be collected and evaluated.

c. An assessment of potential risk and benefits to subjects and of safety measures and other means to be used to reduce risk to subjects.

Radioactive drug research committee
A committee appointed by the commander and approved by the FDA to review and approve the conditions under which radioactive drugs having neither an IND nor an approved NDA that are intended for human subject research are considered safe and effective.

Radioisotope/radiation control committee
A committee appointed by the commander to ensure that individual users of radioactive materials within the medical facility in accordance with the requirements specified in the conditions of the Nuclear Regulatory Commission license, DA radioactive material authorization, and appropriate Federal directives.

Research
A systematic scientific investigation designed to develop or contribute to generalizable knowledge. DOD Directive 3216.2 states that the term does not include individual or group training of military personnel in skills such as combat readiness, effectiveness, and proficiency or fitness exercises.

Research, development, test, and evaluation
Includes those categories of research and development included in Major Defense Program 6 (see AR 37–100–FY), Research and Development, and operational systems development contained in the Five-Year Defense Program.

Schedule I controlled drug substances
Any drug or substance by whatever official name, common or usual name, chemical name, or brand name listed in AR 40–7 and 21 CFR 1308 (see the FDA Regulation entry in app A); for example, heroin.

Significant risk device
A device that presents potential for serious risk to health safety or welfare of the subject. Such a device is intended as an implant; is to be used in supporting or sustaining human life; or is of substantial importance in diagnosing, curing, mitigating, or treating disease or otherwise preventing the impairment of human health. Examples of such devices are pacemakers and some laser and hemodialysis systems.

Subinvestigator
See associate investigator.

Test
A process by which data accumulated to serve as a basis for assessing the degree to which an item or system meets, exceeds, or fails to meet the technical or operational properties required. See AR 70–10 for a more detailed discussion of the RDTE type tests.

VOLUNTEER AGREEMENT AFFIDAVIT

For use of this form, see AR 70-25 or AR 40-38; the proponent agency is OTSG

PRIVACY ACT OF 1974

Authority: 10 USC 3013, 44 USC 3101, and 10 USC 1071-1087.

Principle Purpose: To document voluntary participation in the Clinical Investigation and Research Program. SSN and home address will be used for identification and locating purposes.

Routine Uses: The SSN and home address will be used for identification and locating purposes. Information derived from the study will be used to document the study; implementation of medical programs; adjudication of claims; and for the mandatory reporting of medical conditions as required by law. Information may be furnished to Federal, State and local agencies.

Disclosure: The furnishing of your SSN and home address is mandatory and necessary to provide identification and to contact you if future information indicates that your health may be adversely affected. Failure to provide the information may preclude your voluntary participation in this investigational study.

PART A(1) - VOLUNTEER AFFIDAVIT

Volunteer Subjects in Approved Department of the Army Research Studies

Volunteers under the provisions of AR 40-38 and AR 70-25 are authorized all necessary medical care for injury or disease which is the proximate result of their participation in such studies.

I, _____, SSN _____,

having full capacity to consent and having attained my _____birthday, do hereby volunteer/give consent as legal

representative for _____ to participate in _____

_____

(Research study)

_____

under the direction of _____

conducted at _____.

(Name of Institution)

The implications of my voluntary participation/consent as legal representative; duration and purpose of the research study; the methods and means by which it is to be conducted; and the inconveniences and hazards that may reasonably be expected have been explained to me by

_____.

I have been given an opportunity to ask questions concerning this investigational study. Any such questions were answered to my full and complete satisfaction. Should any further questions arise concerning my rights/the rights of the person I represent on study-related injury, I may contact

_____

at _____

(Name, Address and Phone Number of Hospital (Include Area Code))

I understand that I may at any time during the course of this study revoke my consent and withdraw/have the person I represent withdrawn from the study without further penalty or loss of benefits; however, I/the person I represent may be required (military volunteer) or requested *(civilian volunteer)* to undergo certain examination if, in the opinion of the attending physician, such examinations are necessary for my/the person I represent's health and well-being. My/the person I represent's refusal to participate will involve no penalty or loss of benefits to which I am/the person I represent is otherwise entitled.

_____

PART A (2) - ASSENT VOLUNTEER AFFIDAVIT *(MINOR CHILD)*

I, _____, SSN _____ having full

capacity to assent and having attained my _____ birthday, do hereby volunteer for _____

_____ to participate in _____

_____

(Research Study)

_____

under the direction of _____

conducted at _____.

(Name of Institution)

(Continue on Reverse)

PART A(2) - ASSENT VOLUNTEER AFFIDAVIT (*MINOR CHILD) (Cont'd.*)

The implications of my voluntary participation; the nature, duration and purpose of the research study; the methods and means by which it is to be conducted; and the inconveniences and hazards that may reasonably be expected have been explained to me by

_____

I have been given an opportunity to ask questions concerning this investigational study. Any such questions were answered to my full and complete satisfaction. Should any further questions arise concerning my rights I may contact

_____

at _____

(Name, Address, and Phone Number of Hospital (Include Area Code))

I understand that I may at any time during the course of this study revoke my assent and withdraw from the study without further penalty or loss of benefits; however, I may be requested to undergo certain examination if, in the opinion of the attending physician, such examinations are necessary for my health and well-being. My refusal to participate will involve no penalty or loss of benefits to which I am otherwise entitled.

_____

PART B - TO BE COMPLETED BY INVESTIGATOR

INSTRUCTIONS FOR ELEMENTS OF INFORMED CONSENT: *(Provide a detailed explanation in accordance with Appendix C, AR 40-38 or AR 70-25.)*

I **do** ☐ **do not** ☐ *(check one & initial)* consent to the inclusion of this form in my outpatient medical treatment record.

SIGNATURE OF VOLUNTEER	DATE	SIGNATURE OF LEGAL GUARDIAN *(If volunteer is a minor)*
PERMANENT ADDRESS OF VOLUNTEER	TYPED NAME OF WITNESS	
	SIGNATURE OF WITNESS	DATE

REVERSE OF DA FORM 5303-R, MAY 89