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Perry County  
Memorial Hospital

434 North West Street • Perryville, MO 63775-1398 • 573-547-2536

September 15, 2004

Nuclear Materials Licensing Branch  
Region III, U.S.N.R.C.  
801 Warrenville Road  
Lisle, IL 60532-4351

Re: Materials License Number 24-32071-02

To Whom It May Concern:

Enclosed is our application for renewal of our Nuclear Material License, No. 24-32071-02, which is due to expire on October 31, 2004.

If you have any questions or additional requests of information concerning this renewal, please contact Christopher Wibbenmeyer, Radiology Manager for Perry County Memorial Hospital at 573-547-2530, extension 567.

Sincerely,

Patrick E. Carron, COO  
Perry County Memorial Hospital  
434 N. West St.  
Perryville, Missouri 63775

OCT 14 2004

**APPLICATION FOR MATERIAL LICENSE**

Estimated burden per response to comply with this mandatory collection request: 7.4 hours. Submittal of the application is necessary to determine that the applicant is qualified and that adequate procedures exist to protect the public health and safety. Send comments regarding burden estimate to the Records Management Branch (T-6 E6), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to bjs1@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0000), Office of Management and Budget, Washington, DC 20503. If a means used to impose an information collection does not display a currently valid OMB control number, the NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.

**INSTRUCTIONS: SEE THE APPROPRIATE LICENSE APPLICATION GUIDE FOR DETAILED INSTRUCTIONS FOR COMPLETING APPLICATION. SEND TWO COPIES OF THE ENTIRE COMPLETED APPLICATION TO THE NRC OFFICE SPECIFIED BELOW.**

**APPLICATION FOR DISTRIBUTION OF EXEMPT PRODUCTS FILE APPLICATIONS WITH:**

DIVISION OF INDUSTRIAL AND MEDICAL NUCLEAR SAFETY  
OFFICE OF NUCLEAR MATERIALS SAFETY AND SAFEGUARDS  
U.S. NUCLEAR REGULATORY COMMISSION  
WASHINGTON, DC 20555-0001

**ALL OTHER PERSONS FILE APPLICATIONS AS FOLLOWS:**

**IF YOU ARE LOCATED IN:**

CONNECTICUT, DELAWARE, DISTRICT OF COLUMBIA, MAINE, MARYLAND, MASSACHUSETTS, NEW HAMPSHIRE, NEW JERSEY, NEW YORK, PENNSYLVANIA, RHODE ISLAND, OR VERMONT, SEND APPLICATIONS TO:

LICENSING ASSISTANT SECTION  
NUCLEAR MATERIALS SAFETY BRANCH  
U.S. NUCLEAR REGULATORY COMMISSION, REGION I  
475 ALLENDALE ROAD  
KING OF PRUSSIA, PA 18408-1415

ALABAMA, FLORIDA, GEORGIA, KENTUCKY, MISSISSIPPI, NORTH CAROLINA, PUERTO RICO, SOUTH CAROLINA, TENNESSEE, VIRGINIA, VIRGIN ISLANDS, OR WEST VIRGINIA, SEND APPLICATIONS TO:

SAM NUNN ATLANTA FEDERAL CENTER  
U. S. NUCLEAR REGULATORY COMMISSION, REGION II  
61 FORSYTH STREET, S.W., SUITE 23T85  
ATLANTA, GEORGIA 30303-8831

**IF YOU ARE LOCATED IN:**

ILLINOIS, INDIANA, IOWA, MICHIGAN, MINNESOTA, MISSOURI, OHIO, OR WISCONSIN, SEND APPLICATIONS TO:

MATERIALS LICENSING BRANCH  
U.S. NUCLEAR REGULATORY COMMISSION, REGION III  
801 WARRENVILLE RD.  
LISLE, IL 60532-4351

ALASKA, ARIZONA, ARKANSAS, CALIFORNIA, COLORADO, HAWAII, IDAHO, KANSAS, LOUISIANA, MONTANA, NEBRASKA, NEVADA, NEW MEXICO, NORTH DAKOTA, OKLAHOMA, OREGON, PACIFIC TRUST TERRITORIES, SOUTH DAKOTA, TEXAS, UTAH, WASHINGTON, OR WYOMING, SEND APPLICATIONS TO:

NUCLEAR MATERIALS LICENSING SECTION  
U.S. NUCLEAR REGULATORY COMMISSION, REGION IV  
611 RYAN PLAZA DRIVE, SUITE 400  
ARLINGTON, TX 76011-8064

**PERSONS LOCATED IN AGREEMENT STATES SEND APPLICATIONS TO THE U.S. NUCLEAR REGULATORY COMMISSION ONLY IF THEY WISH TO POSSESS AND USE LICENSED MATERIAL IN STATES SUBJECT TO U.S. NUCLEAR REGULATORY COMMISSION JURISDICTIONS.**

**1. THIS IS AN APPLICATION FOR (Check appropriate item)**

- A. NEW LICENSE
- B. AMENDMENT TO LICENSE NUMBER \_\_\_\_\_
- C. RENEWAL OF LICENSE NUMBER 24-17037-02

**2. NAME AND MAILING ADDRESS OF APPLICANT (Include ZIP code)**

Perry County Memorial Hospital  
434 N. West St.  
Perryville, MO 63775

**3. ADDRESS WHERE LICENSED MATERIAL WILL BE USED OR POSSESSED**

434 N. West St.  
Perryville, MO 63775

**4. NAME OF PERSON TO BE CONTACTED ABOUT THIS APPLICATION**

Christopher M. Wibbenmeyer

**TELEPHONE NUMBER**

573-547-2530 x 567

**SUBMIT ITEMS 5 THROUGH 11 ON 8-1/2 X 11" PAPER. THE TYPE AND SCOPE OF INFORMATION TO BE PROVIDED IS DESCRIBED IN THE LICENSE APPLICATION GUIDE.**

**5. RADIOACTIVE MATERIAL**  
a. Element and mass number, b. chemical and/or physical form; and c. maximum amount which will be possessed at any one time.

**6. PURPOSE(S) FOR WHICH LICENSED MATERIAL WILL BE USED.**

**7. INDIVIDUAL(S) RESPONSIBLE FOR RADIATION SAFETY PROGRAM AND THEIR TRAINING EXPERIENCE.**

**8. TRAINING FOR INDIVIDUALS WORKING IN OR FREQUENTING RESTRICTED AREAS.**

**9. FACILITIES AND EQUIPMENT.**

**10. RADIATION SAFETY PROGRAM.**

**11. WASTE MANAGEMENT.**

**12. LICENSE FEES (See 10 CFR 170 and Section 170.31)**

FEE CATEGORY	AMOUNT ENCLOSED	\$

**13. CERTIFICATION. (Must be completed by applicant) THE APPLICANT UNDERSTANDS THAT ALL STATEMENTS AND REPRESENTATIONS MADE IN THIS APPLICATION ARE BINDING UPON**

THE APPLICANT AND ANY OFFICIAL EXECUTING THIS CERTIFICATION ON BEHALF OF THE APPLICANT, NAMED IN ITEM 2, CERTIFY THAT THIS APPLICATION IS PREPARED IN CONFORMITY WITH TITLE 10, CODE OF FEDERAL REGULATIONS, PARTS 30, 32, 33, 34, 35, 36, 39, AND 40, AND THAT ALL INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF THEIR KNOWLEDGE AND BELIEF.

WARNING: 18 U.S.C. SECTION 1001 ACT OF JUNE 25, 1948 82 STAT. 749 MAKES IT A CRIMINAL OFFENSE TO MAKE A WILLFULLY FALSE STATEMENT OR REPRESENTATION TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES AS TO ANY MATTER WITHIN ITS JURISDICTION.

**CERTIFYING OFFICER - TYPED/PRINTED NAME AND TITLE**

Patrick E. Carron

**SIGNATURE**

*Patrick Carron*

**DATE**

8-18-04

**FOR NRC USE ONLY**

TYPE OF FEE	FEE LOG	FEE CATEGORY	AMOUNT RECEIVED	CHECK NUMBER	COMMENTS
			\$		
<b>APPROVED BY</b>				<b>DATE</b>	

APPENDIX C

Table C.2 outlines the detailed responses that may be made to Items 5 and 6 on Form 313 for type of radioactive material requested and purposes for which it will be used. For example, if the applicant is seeking a license for unsealed byproduct material under 10 CFR 35.100 or 35.200, then the applicant should check the "yes" column next to 10 CFR 35.100 and 35.200 in Table C.2. The table then indicates appropriate responses for that type of use. An applicant may copy the checklist and include it in the license application.

**Table C.2 Items 5 and 6 on NRC Form 313: Radioactive Material And Use**

*(If using this checklist, check applicable rows and fill in details, and attach copy of checklist to the application.)*

Yes	Radionuclide	Form or Manufacturer/ Model No.	Maximum Quantity	Purpose of Use
X	Any byproduct material permitted by 10 CFR 35.100	Any	As needed	Any uptake, dilution, and excretion study permitted by 10 CFR 35.100.
X	Any byproduct permitted by 10 CFR 35.200	Any (EXCLUDING Xe-133)	As needed	Any imaging and localization study permitted by 10 CFR 35.200.
	Any byproduct material permitted by 10 CFR 35.300	Any	___ millicuries	Any radiopharmaceutical therapy procedure permitted by 10 CFR 35.300.
	Iodine-131	Any	___ millicuries	Administration of I-131 sodium iodide.
	Byproduct material under 10 CFR 35.400 (Radionuclide _____)	Sealed source or device (Manufacturer _____, Model No. _____)	___ millicuries	Any brachytherapy procedure permitted by 10 CFR 35.400.
	Byproduct material under 10 CFR 35.400 (Radionuclide _____)	Sealed source or device (Manufacturer _____, Model No. _____)	___ millicuries	Any brachytherapy procedure permitted by 10 CFR 35.400.
	Byproduct material under 10 CFR 35.400 (Radionuclide _____)	Sealed source or device (Manufacturer _____, Model No. _____)	___ millicuries	Any brachytherapy procedure permitted by 10 CFR 35.400.
	Byproduct material under 10 CFR 35.400 (Radionuclide _____)	Sealed source or device (Manufacturer _____, Model No. _____)	___ millicuries	Any brachytherapy procedure permitted by 10 CFR 35.400.
	Strontium-90	Sealed source or device (Manufacturer _____, Model No. _____)	___ millicuries	Treatment of superficial eye conditions using an applicator distributed pursuant to 10 CFR 32.74 and permitted by 10 CFR 35.400.

Table C.2 (continued)

Yes	Radionuclide	Form or Manufacturer/ Model No.	Maximum Quantity	Purpose of Use
	Byproduct material permitted by 10 CFR 35.500 Check all that apply: <input type="checkbox"/> Gd-153; <input type="checkbox"/> I-125; <input type="checkbox"/> Other, describe	Sealed source or device (Manufacturer _____, Model No. _____)	___ curies per source and ___ curies total	Diagnostic medical use of sealed sources permitted by 10 CFR 35.500 in compatible devices registered pursuant to 10 CFR 30.32(g).
	Iridium-192	Sealed source or device (Manufacturer _____, Model No. _____)	___ curies per source and ___ curies total	One source for medical use permitted by 10 CFR 35.600, in a Manufacturer _____ Model No. _____ remote afterloading brachytherapy device. One source in its shipping container as necessary for replacement of the source in the remote afterloader device.
	Cobalt-60	Sealed source or device (Manufacturer _____, Model No. _____)	___ curies per source and ___ curies total	One source for medical use permitted by 10 CFR 35.600, in a Manufacturer _____ Model No. _____ teletherapy unit. One source in its shipping container as necessary for replacement of the source in the teletherapy unit.
	Cobalt-60	Sealed source or device (Manufacturer _____, Model No. _____)	___ curies per source and ___ curies total	For medical use permitted by 10 CFR 35.600, in a Manufacturer _____ Model No. _____ stereotactic radiosurgery device. Sources in the shipping container as necessary for replacement of the sources in the stereotactic radiosurgery device.
	Any byproduct material under 10 CFR 31.11	Prepackaged kits	___ millicuries	<i>In vitro</i> studies.
	Depleted uranium	Metal	___ kilograms	Shielding in a teletherapy unit.

**Table C.2 (continued)**

Yes	Radionuclide	Form or Manufacturer/ Model No.	Maximum Quantity	Purpose of Use
	Depleted uranium	Metal	___ kilograms	Shielding in a linear accelerator.
	Any radionuclide in excess of 30 millicuries for use in calibration, transmission, and reference sources. (List radionuclide: _____)	Sealed source or device (Manufacturer _____, Model No. _____)	___ millicuries	For use in a Manufacturer _____ Model No. _____ for calibration and checking of licensee's survey instruments.
	Americium-241	Sealed source or device (Manufacturer _____, Model No. _____)	___ millicuries per source and ___ millicuries total	Use as an anatomical marker.
	Plutonium (principal radionuclide Pu-238)	Sealed sources	___ millicuries per source and ___ grams total	As a component of Manufacturer _____ Model No. _____, nuclear-powered cardiac pacemakers for clinical evaluation in accordance with manufacturer's protocol dated _____. This authorization includes: follow-up, explantation, recovery, disposal, and implantation.
	Other	Form or Manufacturer/ Model No. _____	___ millicuries	Purpose of use _____.

Table C.3 is a checklist that may be used to identify the attached documents that the applicant is supplying for items for which a response is required. For example, an applicant may fill in the name(s) of Radiation Safety Officer in Table C.3 and then check the boxes indicating which documents pertaining to the RSO are being included in the license application. An applicant may copy the checklist and include it in the license application.

**Table C.3 Items 7 through 11 on NRC Form 313: Training & Experience, Facilities & Equipment, Radiation Protection Program, and Waste Disposal**

*(Check all applicable rows and fill in details and attach a copy of the checklist to the application or provide information separately.)*

Item Number and Title	Suggested Response	Check box to indicate material included in application
Item 7: Radiation Safety Officer Name: <u>JOHN A. MERKLE, M.D.</u>	<p>Previous license number (if issued by NRC) or a copy of the license (if issued by an Agreement State) that authorized the uses requested and on which the individual was specifically named as the RSO.</p> <p style="text-align: center;"><b>OR</b></p> <p>Copy of the certification(s) for the board(s) recognized by NRC and as applicable to the types of use for which he or she has RSO responsibilities.</p> <p style="text-align: center;"><b>OR</b></p> <p>Description of the training and experience specified in 10 CFR 35.900(b).</p> <p style="text-align: center;"><b>OR</b></p> <p>Description of the training and experience specified in 10 CFR 35.50(b) demonstrating that the proposed RSO is qualified by training and experience as applicable to the types of use for which he or she has RSO responsibilities.</p> <p style="text-align: center;"><b>AND</b></p> <p>Written certification, signed by a preceptor RSO, that the above training and experience has been satisfactorily completed and that a level of radiation safety knowledge sufficient to function independently as an RSO for a medical use licensee has been achieved.</p> <p style="text-align: center;"><b>AND</b></p> <p>If applicable, description of recent related continuing education and experience as required by 10 CFR 35.59.</p>	<p style="text-align: center;"><input checked="" type="checkbox"/></p> <p style="text-align: center;"><input type="checkbox"/></p>

**Table C.3 (continued)**

Item Number and Title	Suggested Response	Check box to indicate material included in application
<p>Item 7: Authorized Users Names and Requested Uses for Each Individual _____</p>	<p>Previous license number (if issued by NRC) or a copy of the license (if issued by an Agreement State) on which the physician was specifically named as an AU for the uses requested.</p> <p style="text-align: center;"><b>OR</b></p> <p>Copy of the certification(s) for the board(s) recognized by NRC under 10 CFR Part 35, Subparts D, E, F, G, H, and as applicable to the use requested.</p> <p style="text-align: center;"><b>OR</b></p> <p>Description of the training and experience identified in 10 CFR Part 35 Subpart J demonstrating that the proposed AU is qualified by training and experience for the use requested.</p> <p style="text-align: center;"><b>OR</b></p> <p>A description of the training and experience identified in 10 CFR Part 35 Subparts D, E, F, G, and H demonstrating that the proposed AU is qualified by training and experience for the use requested;</p> <p style="text-align: center;"><b>AND</b></p> <p>Written certification, signed by a preceptor physician AU, that the above training and experience has been satisfactorily completed and that a level of competency sufficient to function independently as an AU for the medical uses authorized has been achieved.</p> <p style="text-align: center;"><b>AND</b></p> <p>If applicable, description of recent related continuing education and experience as required by 10 CFR 35.59.</p>	<p style="text-align: center;"><input checked="" type="checkbox"/></p> <p style="text-align: center;"><input type="checkbox"/></p>
<p>Item 7: Authorized Nuclear Pharmacists</p> <p>Names: _____</p>	<p>Previous license number (if issued by NRC) or a copy of the license (if issued by an Agreement State) on which the individual was specifically named ANP.</p> <p style="text-align: center;"><b>OR</b></p> <p>Copy of the certification(s) for the radiopharmacy board(s) recognized by NRC under 10 CFR 35.55(a) or 10 CFR 35.980(a).</p> <p style="text-align: center;"><b>OR</b></p> <p>Description of the training and experience demonstrating that the proposed ANP is qualified by training and experience.</p> <p style="text-align: center;"><b>AND</b></p> <p>Written certification, signed by a preceptor ANP, that the above training and experience has been satisfactorily completed and that a level of competency</p> <ul style="list-style-type: none"> <li>• sufficient to function independently as an ANP has been achieved (10 CFR 35.55), or</li> <li>• sufficient to independently operate a nuclear pharmacy (10 CFR 35.980).</li> </ul> <p style="text-align: center;"><b>AND</b></p> <p>If applicable, description of recent related continuing education and experience as required by 10 CFR 35.59.</p>	<p style="text-align: center;"><input type="checkbox"/></p>



**Table C.3 (continued)**

Item Number and Title	Suggested Response	Check box to indicate material included in application
Item 9: Radiation Monitoring Instruments Ludlum Survey Meter model: 14C SN: 80921 Probe: GM	<p>A statement that: "Radiation monitoring instruments will be calibrated by a person qualified to perform survey meter calibrations."</p> <p style="text-align: center;"><b>AND/OR</b></p> <p>A statement that: "We have developed and will implement and maintain written survey meter calibration procedures in accordance with the requirements in 10 CFR 20.1501 and that meet the requirements of 10 CFR 35.61."</p> <p style="text-align: center;"><b>AND</b></p> <p>A description of the instrumentation (e.g., gamma counter, solid state detector, portable or stationary count rate meter, portable or stationary dose rate or exposure rate meter, single or multichannel analyzer, liquid scintillation counter, proportional counter) that will be used to perform required surveys.</p> <p style="text-align: center;"><b>AND</b></p> <p>A statement that: "We reserve the right to upgrade our survey instruments as necessary as long as they are adequate to measure the type and level of radiation for which they are used."</p>	<p style="text-align: center;"><input checked="" type="checkbox"/></p> <p style="text-align: center;"><input type="checkbox"/></p> <p style="text-align: center;"><input type="checkbox"/></p> <p style="text-align: center;"><input checked="" type="checkbox"/></p>
Item 9: Dose Calibrator and Other Dosage Measuring Equipment	A statement that: "Equipment used to measure dosages will be calibrated in accordance with nationally recognized standards or the manufacturer's instructions."	<p style="text-align: center;"><input checked="" type="checkbox"/></p>
Item 9: Therapy Unit - Calibration and Use	We are providing the procedures required by 10 CFR 35.642, 10 CFR 35.643, and 10 CFR 35.645, if applicable to the license application.	<p style="text-align: center;"><input type="checkbox"/></p>
Item 9: Other Equipment and Facilities	<p>Attached is a description identified as Attachment 9.4, of additional facilities and equipment.</p> <p>For manual brachytherapy facilities, we are providing a description of the emergency response equipment.</p> <p>For teletherapy, GSR, and remote afterloader facilities, we are providing a description of the following:</p> <ul style="list-style-type: none"> <li>• Warning systems and restricted area controls (e.g., locks, signs, warning lights and alarms, interlock systems) for each therapy treatment room;</li> <li>• Area radiation monitoring equipment;</li> <li>• Viewing and intercom systems (except for LDR units);</li> <li>• Steps that will be taken to ensure that no two units can be operated simultaneously, if other radiation-producing equipment (e.g., linear accelerator, X-ray machine) are in the treatment room;</li> <li>• Methods to ensure that whenever the device is not in use or is unattended, the console keys will be inaccessible to unauthorized persons; and</li> <li>• Emergency response equipment.</li> </ul>	<p style="text-align: center;"><input type="checkbox"/></p>
Item 10. Safety Procedures and Instructions	Attached procedures required by 10 CFR 35.610	<p style="text-align: center;"><input type="checkbox"/></p>





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Memorial Hospital

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Item 5- RADIOACTIVE MATERIAL

	<u>Byproduct, Source, and/or Special Nuclear Material</u>	5b.	<u>Chemical and/or Physical Form</u>	5c.	<u>Maximum Amount that Licensee May Possess</u>
A.	Any byproduct material identified in 10 CFR 35.100	A.	Any radiopharmaceutical identified in 10 CFR 35.100	A.	As needed
B.	Any byproduct material identified in 10 CFR 35.200	B.	Any radiopharmaceutical identified in 10 CFR 35.200 (excluding Xe-133)	B.	As needed

Item 6- AUTHORIZED USE

- A. Medical use described in 10 CFR 35.100
- B. Medical use described in 10 CFR 35.200, excluding Xe-133

Item 7 - INDIVIDUALS RESPONSIBLE FOR RADIATION SAFETY -- THEIR TRAINING AND EXPERIENCE

7.1 Authorized Users for Medical Use

Licensed material for medical use shall be used by, or under the supervision of, the following physicians:

<u>Physician</u>	<u>Requested Use</u>	<u>Previous License Number</u>
John A. Merkle, M.D.	35.100, 35.200 (excluding Xe-133)	24-17037-02
Robert D. Seelig, M.D.	35.100, 35.200 (excluding Xe-133)	24-17037-02
Elizabeth L. Huck, D.O.	35.100, 35.200 (excluding Xe-133)	24-17037-02
Patrick Cabrera, D.O.	35.100, 35.200 (excluding Xe-133)	24-32071-02

All authorized users will meet the requirement as designated in 10 CFR Part 35

Each authorized user will be responsible for providing adequate instruction to all individuals who work with or in the vicinity of licensed material. It is also the responsibility of the authorized user to ensure that the facility and equipment are adequate and maintained for compliance with ALARA exposures and regulatory requirements.

Item 7 - INDIVIDUALS RESPONSIBLE FOR RADIATION SAFETY – THEIR TRAINING AND EXPERIENCE CONTINUED

7.2 Radiation Safety Officer

John A. Merkle, M.D.  
Current RSO on license number 24-17037-02

Item 9 – FACILITY DIAGRAM

A diagram is enclosed that describes the facilities and identifies activities conducted in all contiguous areas surrounding the area(s) of use.

Item 9 – RADIATION MONITORING INSTRUMENTS

Radiation monitoring instruments will be calibrated by a person qualified to perform survey meter calibrations.

We reserve the right to upgrade our survey instruments as necessary as long as they are adequate to measure the type and level of radiation for which they are used.

Survey Meter Manufacturer:	Ludlum
Model:	14C
SN:	80921
Probe:	GM

Item 9 – DOSE CALIBRATOR

Equipment used to measure dosages will be calibrated in accordance with nationally recognized standards or the manufacturer's instructions.

Item 10 – OCCUPATIONAL DOSE

Either we will perform a prospective evaluation demonstrating that unmonitored individuals are not likely to receive, in one year, a radiation dose in excess of 10% of the allowable limits in 10CFR Part 20 or we will provide dosimetry that meets the requirements listed under "Criteria" in NUREG-1556, Vol. 9, "Consolidated Guidance About Materials Licenses: Program-Specific Guidance About Medical Use Licensees," dated October 2002.

Item 10 – AREA SURVEYS

We have developed and will implement and maintain written procedures for area surveys in accordance with 10CFR 20.1101 that meet the requirements of 10CFR 20.1501 and 10CFR 35.70.

Item 10 – SAFE USE OF UNSEALED LICENSED MATERIAL

We have developed and will implement and maintain procedures for safe use of unsealed byproduct material that meet the requirements of 10CFR 20.1101 and 10CFR 20.1301.

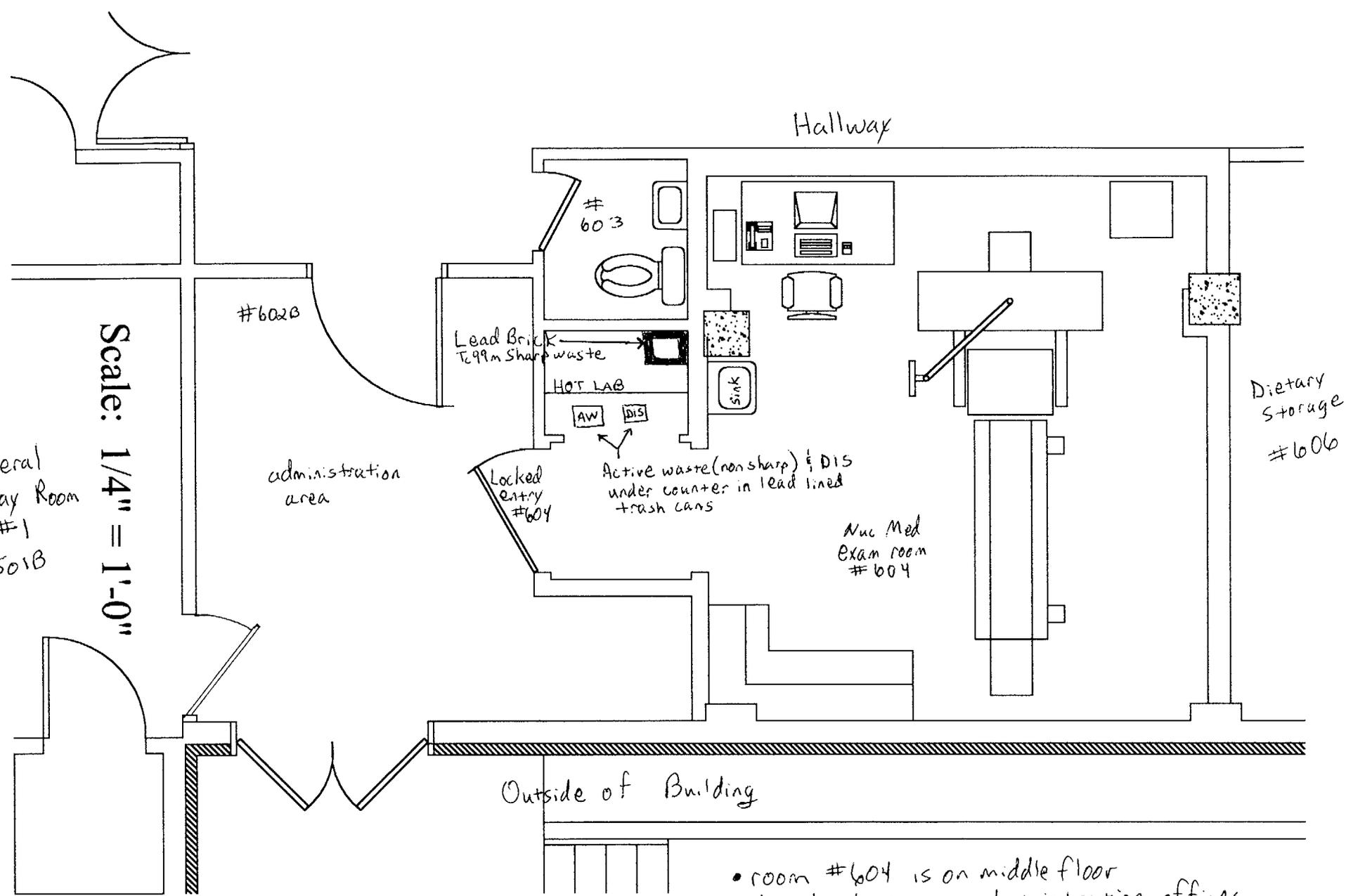
Item 10 – SPILL PROCEDURES

We have developed and will implement and maintain written procedures for safe response to spills of licensed material in accordance with 10CFR 20.1101.

Item 11 – WASTE MANAGEMENT

We have developed and will implement and maintain written waste disposal procedures for licensed material in accordance with 10CFR 20.1101, that also meets the requirements of the applicable section of Subpart K to 10CFR 20 and 10CFR 35.92.

General X-ray Room #1 #501B  
Scale: 1/4" = 1'-0"



- room #604 is on middle floor
- directly above are administration offices
- directly below is the boiler room



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9/14/2004

US Nuclear Regulatory Commission, Region III  
801 Warrenville Rd.  
Lisle, IL 60532-4351

Regarding: Material License Number 24-32071-02

To Whom It May Concern:

Perry County Memorial Hospital is requesting the removal of the following Authorized Users from its nuclear material license number, 24-32071-02:

M. Afzal Riaz, M.D.  
Kenneth L. Kraudel, M.D.  
Prashanth C. Shekar, M.D.  
Henry H. Chen, M.D.  
Stephen H. Radinsky, M.D.  
Samuel Krain, M.D.  
Michael G. Higgins, M.D.  
Thomas J. Pilla, M.D.  
Shepherd Abrams, M.D.  
Peter L. Litzow, M.D.

If you have any questions or concerns regarding this request, please contact Christopher Wibbenmeyer at 573-547-2530, extension 567.

Sincerely,

Patrick E. Carron, COO  
Perry County Memorial Hospital  
434 N. West St  
Perryville, MO 63775

<p><b>NRC FORM 313</b> (8-1999) 10 CFR 30, 32, 33 34, 35, 38, 39 and 40</p>	<p><b>U. S. NUCLEAR REGULATORY COMMISSION</b></p>	<p>APPROVED BY OMB: NO. 3150-0120 EXPIRES: 08/31/2002</p>	<p>Estimated burden per response to comply with this mandatory information collection request: 7.4 hours. Submittal of the application is necessary to determine that the applicant is qualified and that adequate procedures exist to protect the public health and safety. Send comments regarding burden estimate to the Records Management Branch (T-8 E8), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to <a href="mailto:bjst1@nrc.gov">bjst1@nrc.gov</a>, and to the Desk Officer, Office of Information and Regulatory Affairs, NE08-10202, (3150-0120), Office of Management and Budget, Washington, DC 20503. If a means used to impose an information collection does not display a currently valid OMB control number, NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.</p>		
<p><b>APPLICATION FOR MATERIAL LICENSE</b></p>					
<p><b>INSTRUCTIONS: SEE THE APPROPRIATE LICENSE APPLICATION GUIDE FOR DETAILED INSTRUCTIONS FOR COMPLETING APPLICATION. SEND TWO COPIES OF THE ENTIRE COMPLETED APPLICATION TO THE NRC OFFICE SPECIFIED BELOW.</b></p>					
<p><b>APPLICATION FOR DISTRIBUTION OF EXEMPT PRODUCTS FILE APPLICATIONS WITH:</b> DIVISION OF INDUSTRIAL AND MEDICAL NUCLEAR SAFETY OFFICE OF NUCLEAR MATERIALS SAFETY AND SAFEGUARDS U.S. NUCLEAR REGULATORY COMMISSION WASHINGTON, DC 20555-0001</p> <p><b>ALL OTHER PERSONS FILE APPLICATIONS AS FOLLOWS:</b> <b>IF YOU ARE LOCATED IN:</b> CONNECTICUT, DELAWARE, DISTRICT OF COLUMBIA, MAINE, MARYLAND, MASSACHUSETTS, NEW HAMPSHIRE, NEW JERSEY, NEW YORK, PENNSYLVANIA, RHODE ISLAND, OR VERMONT, SEND APPLICATIONS TO:  LICENSING ASSISTANT SECTION NUCLEAR MATERIALS SAFETY BRANCH U.S. NUCLEAR REGULATORY COMMISSION, REGION I 475 ALLENDALE ROAD KING OF PRUSSIA, PA 19406-1415</p> <p>ALABAMA, FLORIDA, GEORGIA, KENTUCKY, MISSISSIPPI, NORTH CAROLINA, PUERTO RICO, SOUTH CAROLINA, TENNESSEE, VIRGINIA, VIRGIN ISLANDS, OR WEST VIRGINIA, SEND APPLICATIONS TO:  SAM NUNN ATLANTA FEDERAL CENTER U.S. NUCLEAR REGULATORY COMMISSION, REGION II 61 FORSYTH STREET, S.W., SUITE 23785 ATLANTA, GEORGIA 30303-8931</p>		<p><b>IF YOU ARE LOCATED IN:</b> ILLINOIS, INDIANA, IOWA, MICHIGAN, MINNESOTA, MISSOURI, OHIO, OR WISCONSIN, SEND APPLICATIONS TO:  MATERIALS LICENSING SECTION U.S. NUCLEAR REGULATORY COMMISSION, REGION III 801 WARRENVILLE RD. LISLE, IL 60532-4351</p> <p>ALASKA, ARIZONA, ARKANSAS, CALIFORNIA, COLORADO, HAWAII, IDAHO, KANSAS, LOUISIANA, MONTANA, NEBRASKA, NEVADA, NEW MEXICO, NORTH DAKOTA, OKLAHOMA, OREGON, PACIFIC TRUST TERRITORIES, SOUTH DAKOTA, TEXAS, UTAH, WASHINGTON, OR WYOMING, SEND APPLICATIONS TO:  NUCLEAR MATERIALS LICENSING SECTION U.S. NUCLEAR REGULATORY COMMISSION, REGION IV 611 RYAN PLAZA DRIVE, SUITE 400 ARLINGTON, TX 78011-8064</p>			
<p>PERSONS LOCATED IN AGREEMENT STATES SEND APPLICATIONS TO THE U.S. NUCLEAR REGULATORY COMMISSION ONLY IF THEY WISH TO POSSESS AND USE LICENSED MATERIAL IN STATES SUBJECT TO U.S. NUCLEAR REGULATORY COMMISSION JURISDICTIONS.</p>					
<p>1. THIS IS AN APPLICATION FOR (Check appropriate item) <input type="checkbox"/> A NEW LICENSE <input checked="" type="checkbox"/> B AMENDMENT TO LICENSE NUMBER <u>24-17037-02</u> <input type="checkbox"/> C RENEWAL OF LICENSE NUMBER _____</p>		<p>2. NAME AND MAILING ADDRESS OF APPLICANT (include Zip code) <u>Perry County Memorial Hospital</u> <u>434 N. West St.</u> <u>Perryville, MO 63775</u></p>			
<p>3. ADDRESS(ES) WHERE LICENSED MATERIAL WILL BE USED OR POSSESSED <u>434 N. West St.</u> <u>Perryville, MO 63775</u></p>		<p>4. NAME OF PERSON TO BE CONTACTED ABOUT THIS APPLICATION <u>Christopher M. Wilbenmeyer</u> TELEPHONE NUMBER <u>573-547-2530 x567</u></p>			
<p>SUBMIT ITEMS 5 THROUGH 11 ON 8-1/2 X 11" PAPER. THE TYPE AND SCOPE OF INFORMATION TO BE PROVIDED IS DESCRIBED IN THE LICENSE APPLICATION GUIDE</p>					
<p>5. RADIOACTIVE MATERIAL a. Element and mass number, b. chemical and/or physical form, and c. maximum amount which will be possessed at any one time</p>		<p>6. PURPOSE(S) FOR WHICH LICENSED MATERIAL WILL BE USED</p>			
<p>7. INDIVIDUAL(S) RESPONSIBLE FOR RADIATION SAFETY PROGRAM AND THEIR TRAINING EXPERIENCE.</p>		<p>8. TRAINING FOR INDIVIDUALS WORKING IN OR FREQUENTING RESTRICTED AREAS</p>			
<p>9. FACILITIES AND EQUIPMENT.</p>		<p>10. RADIATION SAFETY PROGRAM</p>			
<p>11. WASTE MANAGEMENT</p>		<p>12. LICENSEE FEES (See 10 CFR 170 and Section 170.31) FEE CATEGORY _____ AMOUNT ENCLOSED \$ _____</p>			
<p>13. CERTIFICATION (Must be completed by applicant) THE APPLICANT UNDERSTANDS THAT ALL STATEMENTS AND REPRESENTATIONS MADE IN THIS APPLICATION ARE BINDING UPON THE APPLICANT  THE APPLICANT AND ANY OFFICIAL EXECUTING THIS CERTIFICATION ON BEHALF OF THE APPLICANT, NAMED IN ITEM 2, CERTIFY THAT THIS APPLICATION IS PREPARED IN CONFORMITY WITH TITLE 10, CODE OF FEDERAL REGULATIONS, PARTS 30, 32, 33, 34, 35, 36, 38 and 40, AND THAT ALL INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF THEIR KNOWLEDGE AND BELIEF.  WARNING: 18 U.S.C. SECTION 1001 ACT OF JUNE 25, 1948 62 STAT. 749 MAKES IT A CRIMINAL OFFENSE TO MAKE A WILLFULLY FALSE STATEMENT OR REPRESENTATION TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES AS TO ANY MATTER WITHIN ITS JURISDICTION.</p>					
<p>CERTIFYING OFFICER - TYPED/PRINTED NAME AND TITLE <u>Patricia E. Carrow</u></p>		<p>SIGNATURE <u>Patricia Carrow</u></p>	<p>DATE <u>8-19-04</u></p>		
<p><b>FOR NRC USE ONLY</b></p>					
TYPE OF FEE	FEE LOG	FEE CATEGORY	AMOUNT RECEIVED	CHECK NUMBER	COMMENTS
			\$		
APPROVED BY				DATE	

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U.S. NUCLEAR REGULATORY COMMISSION

PAGE 1 OF 2 PAGES  
Amendment No. 2**MATERIALS LICENSE**

Pursuant to the Atomic Energy Act of 1954, as amended, the Energy Reorganization Act of 1974 (Public Law 93-438), and Title 10, Code of Federal Regulations, Chapter I, Parts 30, 31, 32, 33, 34, 35, 36, 39, 40, and 70, and in reliance on statements and representations heretofore made by the licensee, a license is hereby issued authorizing the licensee to receive, acquire, possess, and transfer byproduct, source, and special nuclear material designated below; to use such material for the purpose(s) and at the place(s) designated below; to deliver or transfer such material to persons authorized to receive it in accordance with the regulations of the applicable Part(s). This license shall be deemed to contain the conditions specified in Section 183 of the Atomic Energy Act of 1954, as amended, and is subject to all applicable rules, regulations, and orders of the Nuclear Regulatory Commission now or hereafter in effect and to any conditions specified below.

<p>Licensee</p> <p>1. Berland Diagnostic Imaging Center of Creve Coeur</p> <p>2. 774 N. New Ballas Road Creve Coeur, MO 63141</p>	<p>In accordance with letter dated November 1, 2001,</p> <p>3. License number 24-32071-02 is amended in its entirety to read as follows:</p> <p>4. Expiration date March 31, 2009</p> <p>5. Docket No. 030-34988 Reference No.</p>
<p>6. Byproduct, source, and/or special nuclear material</p> <p>A. Any byproduct material identified in 10 CFR 35.100</p> <p>B. Any byproduct material identified in 10 CFR 35.200</p>	<p>7. Chemical and/or physical form</p> <p>A. Any radiopharmaceutical identified in 10 CFR 35.100</p> <p>B. Any radiopharmaceutical identified in 10 CFR 35.200 (excluding gases and generators)</p>
<p>9. Authorized Use:</p> <p>A. Medical use described in 10 CFR 35.100.</p> <p>B. Medical use described in 10 CFR 35.200 (excluding gases and generators).</p>	<p>8. Maximum amount that licensee may possess at any one time under this license</p> <p>A. As needed</p> <p>B. As needed</p>

**CONDITIONS**

10. Licensed material shall be used only at the licensee's facilities located at 774 N. New Ballas Road, Creve Coeur, Missouri.
11. The Radiation Safety Officer for this license is Robert Seelig, M.D.

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U.S. NUCLEAR REGULATORY COMMISSION

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**MATERIALS LICENSE  
SUPPLEMENTARY SHEET**

License Number  
24-32071-02

Docket or Reference Number  
030-34988

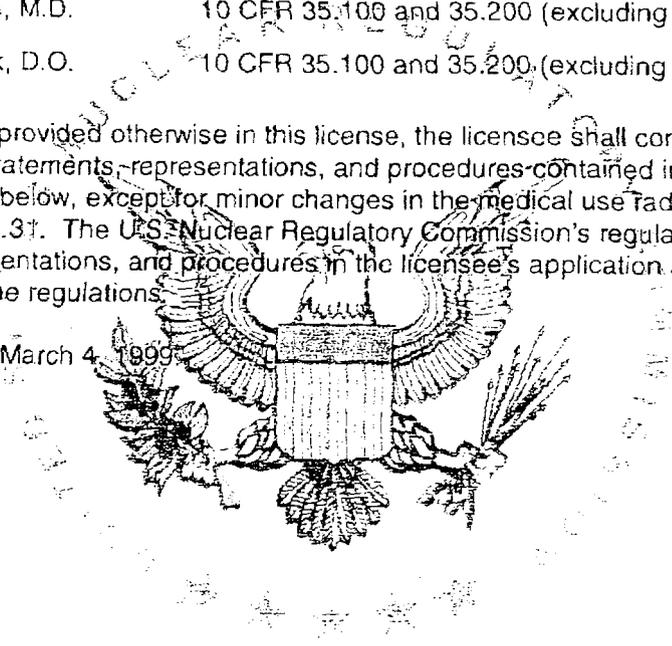
Amendment No. 2

12. Licensed material listed in Item 6 above is only authorized for use by, or under the supervision of, the following individuals for the materials and uses indicated:

<u>Authorized Users</u>	<u>Material and Use</u>
A. Robert Seelig, M.D.	10 CFR 35.100 and 35.200 (excluding gases and generators)
B. Patrick Cabrera, D.O.	10 CFR 35.100 and 35.200 (excluding gases and generators)
C. John Alan Merkle, M.D.	10 CFR 35.100 and 35.200 (excluding gases and generators)
D. Elizabeth L. Huck, D.O.	10 CFR 35.100 and 35.200 (excluding gases and generators)

13. Except as specifically provided otherwise in this license, the licensee shall conduct its program in accordance with the statements, representations, and procedures contained in the documents, including any enclosures, listed below, except for minor changes in the medical use radiation safety procedures as provided in 10 CFR 35.31. The U.S. Nuclear Regulatory Commission's regulations shall govern unless the statements, representations, and procedures in the licensee's application and correspondence are more restrictive than the regulations.

A. Application dated March 4, 1999



FOR THE U.S. NUCLEAR REGULATORY COMMISSION

Date JAN 11 2002

By William P. Reichhold  
William P. Reichhold  
Materials Licensing Branch  
Region III

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8 Sign to Authorize Delivery Without a Signature