

REGISTRATION CERTIFICATE -- *in vitro* TESTING WITH BYPRODUCT MATERIAL UNDER GENERAL LICENSE

ESTIMATED BURDEN PER RESPONSE TO COMPLY WITH THIS INFORMATION COLLECTION REQUEST: 7 MINUTES. THE VALIDATED REGISTRATION IS MANDATORY AND SERVES AS EVIDENCE TO SUPPLIERS OF BYPRODUCT MATERIAL THAT THE REGISTRANT IS ENTITLED TO RECEIVE THE BYPRODUCT MATERIAL. FORWARD COMMENTS REGARDING BURDEN ESTIMATE TO THE INFORMATION AND RECORDS MANAGEMENT BRANCH (MNBB 214), U.S. NUCLEAR REGULATORY COMMISSION, WASHINGTON, DC 20555-0001, AND TO THE PAPERWORK REDUCTION PROJECT (3150-0026), OFFICE OF MANAGEMENT AND BUDGET, WASHINGTON, DC 20503.

Section 31.11 of 10 CFR 31 establishes a general license authorizing physicians, clinical laboratories, hospitals, and veterinarians in the practice of veterinary medicine to possess certain small quantities of byproduct material for *in vitro* clinical or laboratory tests not involving the internal or external administration of the byproduct material or the radiation therefrom to human beings or animals. Possession of byproduct material under 10 CFR 31.11 is not authorized until the physician, clinical laboratory, hospital, or veterinarian in the practice of veterinary medicine, has filed NRC Form 483 and received from the Commission a validated copy of NRC Form 483 with a registration number.

1. NAME AND ADDRESS OF APPLICANT (See Instruction 3.B. below)
GENERAL MEDICAL LABORATORIES
36 S. Brooks St.
MADISON, WI 53715


TELEPHONE NUMBER (Include Area Code)
608-267-6267

3. INSTRUCTIONS:
A. Submit this form in duplicate to:

Medical, Academic and Commercial Use
Safety Branch (6 H3)
Division of Industrial and Medical Nuclear Safety
Office of Nuclear Material Safety and Safeguards
U.S. Nuclear Regulatory Commission
Washington, DC 20555-0001

(At NRC, a registration number will be assigned and a validated copy of NRC Form 483 will be returned.)
B. In the box above, print or type the name, address (including ZIP Code), and telephone number of the registrant physician, clinical laboratory, hospital, or veterinarian in the practice of veterinary medicine for whom or for which this registration form is filed.

2. APPLICATION (Check one box only)
I hereby apply for a registration number pursuant to 10 CFR 31, Section 31.11, for use of byproduct materials for:
 A. Myself, a duly licensed physician authorized to dispense drugs in the practice of medicine.
 B. The above-named clinical laboratory.
 C. The above named hospital.
 D. Veterinarian in the practice of veterinary medicine.

4. REGISTRATION
REGISTRATION NUMBER:
9100

Carolyn Boyle
November 8, 1996
(If this is an initial registration, leave this space blank - number to be assigned by NRC. If this is a change of information from a previously registered general license, include your registration number.)

5. If place of use is different from address listed above, give complete address:

6. CERTIFICATION
I hereby certify that:
A. All information in this registration certificate is true and complete.
B. The registrant has appropriate radiation measuring instruments to carry out the tests for which byproduct material will be used under the general license of 10 CFR 31.11. The tests will be performed only by personnel competent in the use of the instruments and in the handling of the byproduct materials.
C. I understand that Commission regulations require that any change in the information furnished by a registrant on this registration certificate be reported to the Director of Nuclear Material Safety and Safeguards within 30 days from the effective date of such change.
D. I have read and understand the provisions of Section 31.11 of NRC regulations 10 CFR 31 (reprinted on the reverse side of this form); and I understand that the registrant is required to comply with those provisions as to all byproduct material which he receives, acquires, possesses, uses, or transfers under the general license for which this Registration Certificate is filed with the U.S. Nuclear Regulatory Commission.

PRINTED OR TYPED NAME AND TITLE OF APPLICANT: **NANCY MAERSCH
MANAGER, GENERAL MEDICAL LABS**
SIGNATURE OF APPLICANT: *Nancy Maersch*
DATE: **9/10/96**

WARNING: FALSE STATEMENTS IN THIS CERTIFICATE MAY BE SUBJECT TO CIVIL AND/OR CRIMINAL PENALTIES. NRC REGULATIONS REQUIRE THAT SUBMISSIONS TO THE NRC BE COMPLETE AND ACCURATE IN ALL MATERIAL RESPECTS. 18 U.S.C. SECTION 1001 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.