



Thomas Memorial Hospital
Department of Imaging Services
4605 MacCorkle Avenue S.W.
South Charleston, West Virginia 25309

J-9
MS-16



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03013267

Fax: 304-766-3487

Health Care Information is personal and sensitive information related to the diagnosis, treatment, and care of patients. It is the property of Thomas Memorial Hospital and is not to be disclosed to anyone without the express written consent of the patient or the patient's legal representative. It is the policy of Thomas Memorial Hospital to protect the confidentiality of this information. It is prohibited to disclose this information to anyone without the express written consent of the patient or the patient's legal representative. It is the policy of Thomas Memorial Hospital to protect the confidentiality of this information. It is prohibited to disclose this information to anyone without the express written consent of the patient or the patient's legal representative.

TO: CAROL WEISBERG

PHONE: _____

CONTROL # 137072

FAX: 610-337-5393

DATE: 6-24-05

TIME: 1215

Number of pages including this sheet: 3

FROM: Barry Davis

Nuclear Medicine

Comments: THESE ARE THE LAST SOURCES POSSESSED.

This information is intended for the use of the entity to which it is addressed and is not to be disseminated to anyone else. It is the property of Thomas Memorial Hospital and is not to be disclosed to anyone without the express written consent of the patient or the patient's legal representative. It is the policy of Thomas Memorial Hospital to protect the confidentiality of this information. It is prohibited to disclose this information to anyone without the express written consent of the patient or the patient's legal representative.

TECHNICAL DATA SHEET

MODEL NO.: MED3601 Line Source

Reel 10-5-00

SURV = BKL

WIPLOT = 0 DPM

QUANTITY: 2

<u>NUCLIDE</u>	<u>S/N OR LOT NO.</u>	<u>ACTIVITY</u>	<u>UNCERTAINTY</u>	<u>REFERENCE DATE</u>	<u>HALF-LIFE</u>
Gd-153	L147, L148	9.25 GBq (250 mCi)	± 15%	October 1, 2000	241.6 days

54.8mCi

3-14-2002

NATURE OF ACTIVE DEPOSIT: gadolinium chloride in resin matrix

BACKING: n/a

COVER: n/a

ACTIVE DIAMETER/AREA: 1.5 mm diameter x 508 mm length

OVERALL DIAMETER/DIMENSIONS: 3.05 mm diameter x 522 mm length

DECAY CHART

Months Since Reference Date	1	2	3	4	5	6	7	8	9	10	11	12
Activity (mCi)	229	210	192	176	162	148	136	124	114	104	96	88

• LEAK TEST CERTIFICATION ON REVERSE •

North American Scientific, Inc. 7435 Greenbush Ave., North Hollywood, CA 91605 (818) 734-8600 Fax (818) 734-8606

**PACKING LIST
RETURN SHIPMENT OF SEALED SOURCE(S) TO NASI**

Complete all items and make a copy for your records. Call NASI Traffic Dept. at (800) 992-6274 if you require assistance.

Please Note: This packing list authorizes the return of one equivalent radioactive source in exchange for the new one purchased. Disposal of other radiation products is not authorized without prior approval. Failure to comply is a violation of Regulatory Guidelines and applicable agencies will be notified.

In order for your return to be accepted and processed at NASI is important that:

1. the return authorization number (as shown under your address) is written on the outside of the package.
2. this packing list is sealed in the packing list envelope and is on the outside of the package.

Failure to comply with the above will result in your shipment being refused by NASI Traffic Dept.

From: Thomas Memorial Hospital
4605 MacCorkle Ave SW
Barry Davis/Nuclear Medicine
So. Charleston WV 25309
Spent Source Return Auth.# SRA1022782 ADAC

SHIPPING W I P E

• MAR 1 8 2002 •

To: North American Scientific, Inc.
7435 Greenbush Ave
North Hollywood, Ca. 91605
Attn: Traffic Department

TEST RESULT

This packing list authorizes the shipment of one set of Gd-153 Line Sources. In order for your return to be processed, it is very important that all the information in the box below is complete and accurate.

Activity of source at shipment: 55 mCi

Manufacturer of source: NAS

Model number: MED 3601 LINE SOURCE

Serial number(s): L147, L148

Label activity shown on source: 250 mCi

Date shown on source: 10-1-2000

Date last leak tested: 10/11/01

Method of leak test: wipe test, Other: (check one, if other is checked please explain on other side of this page.)

Result less than 5nCi?

Certified by:

X BARRY DAVIS X Barry Davis X
CNMT, RSO (Title) (Signature) (print name)

Daytime phone #: 304-766-4423 Date: 3-14-02