

Applicant Information:

Control No. 471069

Name: Mercy Medical Center	Type of Request: Amend Program Code(s):
Location: ID	License No.: 11-27089-01 Docket No.: 030-32246

STEP 1—Radioactive Materials and Quantities Requested:

Instructions for Step 1: Complete Step 1 for all applications. If all your responses in Step 1 are "No" then do not complete Step 2 (Screening Criteria). Sign and date the completed step-sheet and add it as the sensitive and non-publicly available OAR in ADAMS. If a "yes" response is indicated for any item in Step 1, also complete Step 2. If the type of use is subject to a Security Order or the requirements for increased controls, complete Step 3 (Item A or Item B) without delay.		Yes or No
A.	The request is from a new applicant.	N
B.	NUREG-1556, Volume 20, Section 4.9 indicates a licensing site visit is needed for the requested type of use, e.g., (1) Type A broad scope license, (2) panoramic irradiator containing > 10000 curies, (3) manufacturers or distributors using unsealed radioactive material or significant quantities of sealed material, (4) radioactive waste brokers, (5) radioactive waste incinerators, (6) commercial nuclear laundries, and (7) any other application that in the judgement of the reviewer and cognizant supervisor involves complex technical issues, complex safety questions, or unprecedented issues that warrant a site visit.	N
C.	The applicant requested certain radionuclides and quantities that equal or exceed the Risk Significant Quantity (TBq) values in the table, below, that have been "highlighted" by the reviewer	N

Table of Risk Significant Quantities

(Category 2 Quantities, IAEA Safety Guide No. RS-G-1.9, Categorization of Radioactive Sources, August 2005)

Radionuclide	Risk Significant Quantity (TBq ¹)	Risk Significant Quantity (Ci ¹)	Radionuclide	Risk Significant Quantity (TBq ¹)	Risk Significant Quantity (Ci ¹)
Am-241	0.6	16	Pm-147	400	11,000
Am-241/Be	0.6	16	Pu-238	0.6	16
Cf-252	0.2	5.4	Pu-239/Be	0.6	16
Cm-244	0.5	14	Ra-226 ²	0.4	11
Co-60	0.3	8.1	Se-75	2	54
Cs-137	1	27	Sr-90 (Y-90)	10	270
Gd-153	10	270	Tm-170	200	5,400
Ir-192	0.8	22	Yb-169	3	81

¹ The primary values are TBq. The curie (Ci) values are for informational purposes only.
² The Atomic Energy Act, as amended by the Energy Policy Act of 2005, authorizes NRC to regulate Ra-226 and NRC is in the process of amending its regulations for discrete sources of Ra-226.

Calculations of the Total Activity or the Unity Rule are attached to document whether or not the screening criteria in Step 2 were also completed to evaluate the application. NOTE—If an amendment of an existing license is being requested, the calculations will include the previously authorized quantities for the radionuclide(s).	Yes, No, or Not Applicable (NA)
Total Activity—multiple activities are requested for a single radionuclide and the sum of the activities equals or exceeds the quantity of concern for the radionuclide	
Unity Rule—multiple radionuclides are requested and the sum of the ratios equals or exceeds unity, e.g., [(total activity for radionuclide A) ÷ (risk significant quantity for radionuclide A)] + [(total activity for radionuclide B) ÷ (risk significant quantity for radionuclide B)] ≥ 1.0.	

Signature and Date for Step 1:


 License Reviewer and Date 8/9/06

Mercy Medical Center

RECEIVED

AUG 04 2006

DNMS

July 18, 2006

Nuclear Regulatory
Region IV
611 Ryan Plaza Drive – Suite 400
Arlington, TX 76011-8064

Re: License Number 11-27089-01
Region Number 4

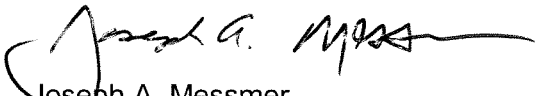
To Whom It May Concern:

Mercy Medical Center would like to amend license number 11-27089-01 to add a physician to our current license. The individual is a diplomat of the American Board of Radiology.

Add as user: Dirk E. Bigler, DO
Authorized user for materials identified in 10CFR 35.100, 35.200 and 35.300.
Please see attachments.

If additional information is needed, please feel free to contact me.

Sincerely,



Joseph A. Messmer
President &
Chief Executive Officer

/mh

Attachments -

The American Board of Radiology

*Organized through the cooperation of the
American College of Radiology, the American Roentgen Ray Society,
the American Radium Society, the Radiological Society of North America,
the Section on Radiology of the American Medical Association,
the American Society for Therapeutic Radiology and Oncology, the Association of
University Radiologists, and American Association of Physicians in Medicine*

Hereby certifies that

Birk Edward Wigler, MD

*Has pursued an accepted course of graduate study
and clinical work, has met certain standards and qualifications and
has passed the examinations conducted under the authority of
The American Board of Radiology*

On this ninth day of June, 2004

*Thereby demonstrating to the satisfaction of the Board
that he is qualified to practice the specialty of*

Diagnostic Radiology

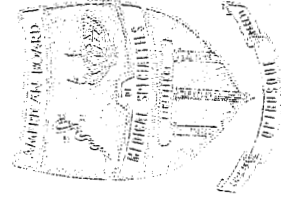


William H. ...
President

Philip O. Addison, MD
Secretary-Treasurer

R. R. Hatten, MD
Executive Director

Certificate No. 51649



IDAHO STATE BOARD OF MEDICINE
P.O. Box 83720 - Boise, Idaho 83720-0058

This Certifies that

DIRK EDWARD BIGLER DO

Holds Idaho license as an

OSTEOPATHIC PHYSICIAN AND SURGEON

License No. O-325
Expire Date: 06/30/2008

Nancy Kerr
Executive Director

DIRK EDWARD BIGLER DO

06/19/2006

155

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P.O. Box 83720 - Boise, Idaho 83720-0058

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Nancy Kerr
Executive Director

*Duplicate copy of your
license is attached for
your convenience for
use with
credentialing/hospital
privilege actions.*

PRECEPTOR STATEMENT

Statement must be completed by the applicant physician's preceptor. If more than one preceptor is necessary to document experience, obtain a separate statement from each.

1. APPLICANT'S PHYSICIAN'S NAME AND ADDRESS	KEY TO COLUMN C Personal Participation Should Consist of:
FULL NAME Dirk E. Bigler, DO	1. Supervised examination of patients to determine the suitability for radioisotope diagnosis and/or treatment and recommendation for prescribed dosage. 2. Collaboration in dose calibration and actual administration of dose to the patient including calculation of the radiation dose, related measurements and plotting of data. 3. Adequate period of training to enable physician to manage radioactive patients and follow patients through diagnosis and/or course of treatment.
STREET ADDRESS 101 W 8 th Avenue Box 2555	
CITY STATE ZIP CODE Spokane WA 99220-2555	

2. CLINICAL TRAINING AND EXPERIENCE OF ABOVE NAMED PHYSICIAN

ISOTOPE A	CONDITIONS DIAGNOSED OR TREATED B	NUMBER OF CASES INVOLVING PERSONAL PARTICIPATION C	COMMENTS (Additional submitted)
1-131 or 1-125	DIAGNOSIS OF THYROID FUNCTION		
	DETERMINATION OF BLOOD AND BLOOD PLASMA VOLUME	12	
	LIVER FUNCTION STUDIES	0	
	FAT ABSORPTION STUDIES		
	KIDNEY FUNCTION STUDIES	160	
	IN VITRO STUDIES	15	
OTHER	67 GALLIUM IMAGING	70	
1-125	DETECTION OF THROMBOSIS	0	
1-131	THYROID IMAGING	20	
P-32	EYE TUMOR LOCALIZATION	0	
Se-75	PANCREAS IMAGING	0	
Yb-169	CISTERNOGRAPHY	10	
Xe-133	BLOOD FLOW STUDIES AND PULMONARY FUNCTION STUDIES	360	
OTHER	III In WBC SCANNING	72	
Tc-99m	BRAIN IMAGING	10	
	CARDIAC IMAGING	600	
	THYROID IMAGING	25	
	SALIVARY GLAND IMAGING	0	
	BLOOD POOL IMAGING	55	
	PLACENTA LOCALIZATION	0	
	LIVER AND SPLEEN IMAGING	325	
	LUNG IMAGING	360	
BONE IMAGING	325		
OTHER	III IN MONOCLONAL IMAGING	5	

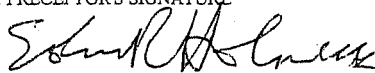
PRECEPTOR STATEMENT (Continued)

2. CLINICAL TRAINING AND EXPERIENCE OF ABOVE NAMED PHYSICIAN (Continued)

ISOTOPE A	CONDITIONS DIAGNOSED OR TREATED B	NUMBER OF CASES INVOLVING PERSON PARTICIPATION C
P-32 (Soluble)	TREATMENT OF POLYCYTHEMIA VERA, LEUKEMIA, AND BONE METASTASES	0
P-32 (Colloidal)	INTRACAVITARY TREATMENT	1
I-131	TREATMENT OF THYROID CARCINOMA	10
	TREATMENT OF HYPERTHYROIDISM	14
Au-198	INTRACAVITARY TREATMENT	0
Co-60 or Cs-137	INTERSTITIAL TREATMENT	0
	INTERCAVITARY TREATMENT	0
I-125 or Ir-192	INTERSTITIAL TREATMENT	0
	TELETHERAPY TREATMENT	0
Co-60 or Cs-137	TREATMENT OF EYE DISEASE	0
	RADIOPHARMACEUTICAL PREPARATION	
Mo-99/Tc-99m	GENERATOR	20
Sn-113/In-113m	GENERATOR	0
Tc-99m	REAGENT KITS	20
OTHER 89SR	TREATMENT OF BONY METASTASES	18

3. DATES AND TOTAL NUMBER OF HOURS RECEIVED IN CLINICAL RADIOISOTOPE TRAINING

DATES 960 Hrs. (6 months, full time)
 9/1/01-9/30/01
 4/7/02-4/30/02
 7/1/02-7/31/02
 9/1/02-9/30/02
 7/1/03-7/31/03
 5/1/04-5/31/04

4. THE TRAINING AND EXPERIENCE INDICATED ABOVE WAS OBTAINED UNDER THE SUPERVISION OF: a. Name of Supervisor Preceptor	6. PRECEPTOR'S SIGNATURE 
b. Name of Institution: Sacred Heart Medical Center Department of Radiology	7. PRECEPTOR'S NAME (Please Print) EDWIN R. HOLMES, III, M.D.
b. Mailing Address: 101 w. 8th Ave., PO Box 2555 Spokane, WA 99220-2555	8. DATE 06/30/04
5. MATERIALS LICENSE NUMBER (S) MO31-1	