

FORM NRC-313M (8-78) 10 CFR 35	U.S. NUCLEAR REGULATORY COMMISSION APPLICATION FOR MATERIALS LICENSE – MEDICAL	Approved: GAO R0557
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INSTRUCTIONS – Complete Items 1 through 26 if this is an initial application or an application for renewal of a license. Use supplemental sheets where necessary. Item 26 must be completed on all applications and signed. Retain one copy. Submit original and one copy of entire application to: Director, Office of Nuclear Materials Safety and Safeguards, U.S. Nuclear Regulatory Commission, Washington, D.C. 20555. Upon approval of this application, the applicant will receive a Materials License. An NRC Materials License is issued in accordance with the general requirements contained in Title 10, Code of Federal Regulations, Part 30, and the Licensee is subject to Title 10, Code of Federal Regulations, Parts 19, 20 and 35 and the license fee provision of Title 10, Code of Federal Regulations, Part 170. The license fee category should be stated in Item 26 and the appropriate fee enclosed.

1.a. NAME AND MAILING ADDRESS OF APPLICANT (institution, firm, clinic, physician, etc.) INCLUDE ZIP CODE Woodland Medical Group 22341 W. Eight Mile Road Detroit, Michigan, 48219 TELEPHONE NO.: AREA CODE (313) 538 4700	1.b. STREET ADDRESS(ES) AT WHICH RADIOACTIVE MATERIAL WILL BE USED (If different from 1.a.) INCLUDE ZIP CODE
2. PERSON TO CONTACT REGARDING THIS APPLICATION Wiley Jordan TELEPHONE NO.: AREA CODE (313) 538 4700	3. THIS IS AN APPLICATION FOR: (Check appropriate item) a. <input type="checkbox"/> NEW LICENSE b. <input type="checkbox"/> AMENDMENT TO LICENSE NO. _____ c. <input checked="" type="checkbox"/> RENEWAL OF LICENSE NO. 21-13255-01
4. INDIVIDUAL USERS (Name individuals who will use or directly supervise use of radioactive material. Complete Supplements A and B for each individual.) Barry Samules, M.D. Harold Daitch, M.D. Richard Small, M.D.	5. RADIATION SAFETY OFFICER (RSO) (Name of person designated as radiation safety officer. If other than individual user, complete resume of training and experience as in Supplement A.) Barry Samules, M.D.

5/31/79
7B

6.a. RADIOACTIVE MATERIAL FOR MEDICAL USE			
RADIOACTIVE MATERIAL LISTED IN:	ITEMS DESIRED "X"	MAXIMUM POSSESSION LIMITS (In millicuries)	ADDITIONAL ITEMS:
10 CFR 31.11 FOR IN VITRO STUDIES	X	3	IODINE-131 AS IODIDE FOR TREATMENT OF HYPERTHYROIDISM
10 CFR 35.100, SCHEDULE A, GROUP I	X	AS NEEDED	PHOSPHORUS-32 AS SOLUBLE PHOSPHATE FOR TREATMENT OF POLYCYTHEMIA VERA, LEUKEMIA AND BONE METASTASES
10 CFR 35.100, SCHEDULE A, GROUP II	X	AS NEEDED	PHOSPHORUS-32 AS COLLOIDAL CHROMIC PHOSPHATE FOR INTRACAVITARY TREATMENT OF MALIGNANT EFFUSIONS.
10 CFR 35.100, SCHEDULE A, GROUP III	X		GOLD-198 AS COLLOID FOR INTRACAVITARY TREATMENT OF MALIGNANT EFFUSIONS.
10 CFR 35.100, SCHEDULE A, GROUP IV		AS NEEDED	IODINE-131 AS IODIDE FOR TREATMENT OF THYROID CARCINOMA
10 CFR 35.100, SCHEDULE A, GROUP V		AS NEEDED	XENON-133 AS GAS OR GAS IN SALINE FOR BLOOD FLOW STUDIES AND PULMONARY FUNCTION STUDIES.
10 CFR 35.100, SCHEDULE A, GROUP VI			

6.b. RADIOACTIVE MATERIAL FOR USES NOT LISTED IN ITEM 6.a. (Sealed sources up to 3 mCi used for calibration and reference standards are authorized under Section 35.14(d), 10 CFR Part 35, and NEED NOT BE LISTED.)			
ELEMENT AND MASS	CHEMICAL FORM AND/OR PHYSICAL FORM	MAXIMUM NUMBER OF MLCs OF EACH FORM	DESCRIBE PURPOSE OF USE
<p>RECEIVED BY LMP</p> <p>Date MAY 10 1979</p> <p>Log May 6 1979</p> <p>By Brown</p> <p>Orig. To</p> <p>Action Compl. 5/14/79</p> <p>Applicant 15364</p> <p>Check No. 150 (10)</p> <p>Amount Fee Category</p> <p>Type of rev. Renewal</p> <p>Date Check rec'd MAY 10 1979</p> <p>Received By Brown</p> <p>30 1979</p> <p>B/2</p>			


INFORMATION REQUIRED FOR ITEMS 7 THROUGH 23

For Items 7 through 23, check the appropriate box(es) and submit a detailed description of all the requested information. Begin each item on a separate sheet. Identify the item number and the date of the application in the lower right corner of each page. If you indicate that an appendix to the medical licensing guide will be followed, do not submit the pages, but specify the revision number and date of the referenced guide: Regulatory Guide 10.8, Rev. _____ Date: January 1979

7. MEDICAL ISOTOPES COMMITTEE N.A.		15. GENERAL RULES FOR THE SAFE USE OF RADIOACTIVE MATERIAL (Check One)	
<input type="checkbox"/>	Names and Specialties Attached; and	<input checked="" type="checkbox"/>	Appendix G Rules Followed; or
<input type="checkbox"/>	Duties as in Appendix B; or _____ (Check One)	<input type="checkbox"/>	Equivalent Rules Attached
<input type="checkbox"/>	Equivalent Duties Attached	16. EMERGENCY PROCEDURES (Check One)	
8. TRAINING AND EXPERIENCE Supplemental Sheet		<input checked="" type="checkbox"/>	Appendix H Procedures Followed; or
<input type="checkbox"/>	Supplements A & B Attached for Each Individual User; and	<input type="checkbox"/>	Equivalent Procedures Attached
<input type="checkbox"/>	Supplement A Attached for RSO.	17. AREA SURVEY PROCEDURES (Check One)	
9. INSTRUMENTATION (Check One)		<input checked="" type="checkbox"/>	Appendix I Procedures Followed; or
<input checked="" type="checkbox"/>	Appendix C Form Attached; or	<input type="checkbox"/>	Equivalent Procedures Attached
<input type="checkbox"/>	List by Name and Model Number	18. WASTE DISPOSAL (Check One)	
10. CALIBRATION OF INSTRUMENTS		<input checked="" type="checkbox"/>	Appendix J Form Attached; or
<input checked="" type="checkbox"/>	Appendix D Procedures Followed for Survey Instruments; or _____ (Check One)	<input type="checkbox"/>	Equivalent Information Attached
<input type="checkbox"/>	Equivalent Procedures Attached; and	19. THERAPEUTIC USE OF RADIOPHARMACEUTICALS (Check One)	
<input checked="" type="checkbox"/>	Appendix D Procedures Followed for Dose Calibrator; or _____ (Check One)	<input checked="" type="checkbox"/>	Appendix K Procedures Followed; or
<input type="checkbox"/>	Equivalent Procedures Attached	<input type="checkbox"/>	Equivalent Procedures Attached
11. FACILITIES AND EQUIPMENT		20. THERAPEUTIC USE OF SEALED SOURCES	
<input checked="" type="checkbox"/>	Description and Diagram Attached	<input type="checkbox"/>	Detailed Information Attached; and
12. PERSONNEL TRAINING PROGRAM		<input type="checkbox"/>	Appendix L Procedures Followed; or _____ (Check One)
<input checked="" type="checkbox"/>	Description of Training Attached	<input type="checkbox"/>	Equivalent Procedures Attached
13. PROCEDURES FOR ORDERING AND RECEIVING RADIOACTIVE MATERIAL		21. PROCEDURES AND PRECAUTIONS FOR USE OF RADIOACTIVE GASES (e.g., Xenon - 133)	
<input checked="" type="checkbox"/>	Detailed Information Attached	See previous appl. License recently amended. Detailed Information Attached	
14. PROCEDURES FOR SAFELY OPENING PACKAGES CONTAINING RADIOACTIVE MATERIALS (Check One)		22. PROCEDURES AND PRECAUTIONS FOR USE OF RADIOACTIVE MATERIAL IN ANIMALS	
<input type="checkbox"/>	Appendix F Procedures Followed; or	<input type="checkbox"/>	Detailed Information Attached
<input checked="" type="checkbox"/>	Equivalent Procedures Attached	23. PROCEDURES AND PRECAUTIONS FOR USE OF RADIOACTIVE MATERIAL SPECIFIED IN ITEM 6.b	
<input type="checkbox"/>		<input type="checkbox"/>	Detailed Information Attached

24. PERSONNEL MONITORING DEVICES				
TYPE <small>(Check appropriate box)</small>		SUPPLIER	EXCHANGE FREQUENCY	
a. WHOLE BODY	<input type="checkbox"/> FILM	R.S.Landauer, Jr. & Co.	monthly	
	<input type="checkbox"/> TLD			
	<input type="checkbox"/> OTHER <small>(Specify)</small>			
b. FINGER	<input type="checkbox"/> FILM			
	<input type="checkbox"/> TLD	R.S.Landauer, Jr. & Co.	monthly	
	<input type="checkbox"/> OTHER <small>(Specify)</small>			
c. WRIST	<input type="checkbox"/> FILM			
	<input type="checkbox"/> TLD			
	<input type="checkbox"/> OTHER <small>(Specify)</small>			
d. OTHER <small>(Specify)</small>				

25. FOR PRIVATE PRACTICE APPLICANTS ONLY				
a. HOSPITAL AGREEING TO ACCEPT PATIENTS CONTAINING RADIOACTIVE MATERIAL				
NAME OF HOSPITAL see previous license application			b. ATTACH A COPY OF THE AGREEMENT LETTER SIGNED BY THE HOSPITAL ADMINISTRATOR.	
MAILING ADDRESS			c. WHEN REQUESTING THERAPY PROCEDURES, ATTACH A COPY OF RADIATION SAFETY PRECAUTIONS TO BE TAKEN AND LIST AVAILABLE RADIATION DETECTION INSTRUMENTS.	
CITY	STATE	ZIP CODE		

26. CERTIFICATE <small>(This item must be completed by applicant)</small>	
The applicant and any official executing this certificate on behalf of the applicant named in Item 1a certify that this application is prepared in conformity with Title 10, Code of Federal Regulations, Parts 30 and 35, and that all information contained herein, including any supplements attached hereto, is true and correct to the best of our knowledge and belief.	
a. LICENSE FEE REQUIRED <small>(See Section 170.31, 10 CFR 170)</small>	b. APPLICANT OR CERTIFYING OFFICIAL <small>(Signature)</small>  (1) NAME <small>(Type of Print)</small> BARRY J. SAMUELSON (2) TITLE DIRECTOR OF RADIATION SAFETY
(1) LICENSE FEE CATEGORY: 7b	(2) DATE APR 25 1979
(2) LICENSE FEE ENCLOSED: \$ 150.	

PRIVACY ACT STATEMENT

Pursuant to 5 U.S.C. 552a(e)(3), enacted into law by section 3 of the Privacy Act of 1974 (Public Law 93-579), the following statement is furnished to individuals who supply information to the Nuclear Regulatory Commission on Form NRC-313M. This information is maintained in a system of records designated as NRC-3 and described at 40 Federal Register 45334 (October 1, 1975).

1. **AUTHORITY** Sections 81 and 161(b) of the Atomic Energy Act of 1954, as amended (42 U.S.C. 2111 and 2201(b)).
2. **PRINCIPAL PURPOSE(S)** The information is evaluated by the NRC staff pursuant to the criteria set forth in 10 CFR Parts 30-36 to determine whether the application meets the requirements of the Atomic Energy Act of 1954, as amended, and the Commission's regulations, for the issuance of a radioactive material license or amendment thereof.
3. **ROUTINE USES** The information may be used: (a) to provide records to State health departments for their information and use; and (b) to provide information to Federal, State, and local health officials and other persons in the event of incident or exposure, for their information, investigation, and protection of the public health and safety. The information may also be disclosed to appropriate Federal, State, and local agencies in the event that the information indicates a violation or potential violation of law and in the course of an administrative or judicial proceeding. In addition, this information may be transferred to an appropriate Federal, State, or local agency to the extent relevant and necessary for a NRC decision or to an appropriate Federal agency to the extent relevant and necessary for that agency's decision about you. A copy of the license issued will routinely be placed in the NRC's Public Document Room, 1717 H Street, N.W., Washington, D.C.
4. **WHETHER DISCLOSURE IS MANDATORY OR VOLUNTARY AND EFFECT ON INDIVIDUAL OF NOT PROVIDING INFORMATION** Disclosure of the requested information is voluntary. If the requested information is not furnished, however, the application for radioactive material license, or amendment thereof, will not be processed.
5. **SYSTEM MANAGER(S) AND ADDRESS** Director, Division of Fuel Cycle and Material Safety, Office of Nuclear Material Safety and Safeguards, U.S. Nuclear Regulatory Commission, Washington, D.C. 20555.

SUPPLEMENTAL SHEETS

Item 7. MEDICAL ISOTOPES COMMITTEE

N.A.

Item 8. TRAINING AND EXPERIENCE

Individual users previously licensed on License No. 21-13255-01

Item 9. INSTRUMENTATION

See attached APPENDIX C

Item 10. CALIBRATION OF INSTRUMENTS

See attached APPENDIX D

Item 11. FACILITIES AND EQUIPMENT

A. Facilities:

(see attached diagram)

B. Equipment:

For Health Physics and Clinical Instrumentation see Item 9.

For reducing internal exposures, disposable gloves, absorbent pads, etc. will be used.

For reducing external exposures, remote handling devices, shielding (lead bricks, lead glass "face" shield, syringe holders, lead "pigs") will be used. Syringe shields will be used when the use does not interfere with patient care (e.g. in the case of difficult injections).

Item 12. PERSONNEL TRAINING PROGRAM

All personnel will receive proper instruction in the items specified in 19.12 of 10CFR Part 19, including items a through j page 10.8-6 of REGULATORY GUIDE 10.8.

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APPENDIX C
INSTRUMENTATION

1. Survey meters

- a. Manufacturer's name: Picker
 Manufacturer's model number: G.M. Survey Meter
 Number of instruments available: 1
 Minimum range: 0 mr/hr to .5 mr/hr
 Maximum range: 0 mr/hr to 50 mr/hr
- b. Manufacturer's name: Eberline Instrument Corporation
 Manufacturer's model number: E-520
 Number of instruments available: 1
 Minimum range 0 mr/hr to .2 mr/hr
 Maximum range 0 mr/hr to 2000 mr/hr

(energy compensated with HP-270 Probe)

2. Dose calibrator

- Manufacturer's name: Capintec
 Manufacturer's model number: CRC-4
 Number of instruments available: 1

3. Diagnostic instruments

<u>Type of Instrument</u>	<u>Manufacturer's Name</u>	<u>Model No.</u>
Gamma Camera	Searle	LFOV
Uptake Probe	Picker	Spectroscaler 4R + 2"x2"
		NaI(Tl)
Autowell	Searle	1185

4. Other

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CALIBRATION OF SURVEY INSTRUMENTS

Check appropriate items.

 x 1. Survey instruments will be calibrated at least annually and following repair.

 x 2. Calibration will be performed at two points on each scale.

The two points will be approximately 1/3 and 2/3 of full scale. A survey instrument may be considered properly calibrated when the instrument readings are within $\pm 10\%$ of the calculated or known values for each point checked. Readings within $\pm 20\%$ are considered acceptable if a calibration chart or graph is prepared and attached to the instrument.

3. Survey instruments will be calibrated

 a. By the manufacturer

 b. At the licensee's facility

(1) Calibration source

Manufacturer's name _____
Model no. _____
Activity in millicuries _____
Accuracy _____
Traceability to primary standard _____

 x (2) The calibration procedures in Section I of Appendix D will be used

or

 (3) The step-by-step procedures, including radiation safety procedures, are attached.

 x c. By a consultant or outside firm

(1) Name Medical Physics Consultants

(2) Location Ann Arbor Michigan

(3) Procedures and sources

 x have been approved by NRC and are on file in
License No. 21-17126101 MD

 are attached

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CALIBRATION OF DOSE CALIBRATOR

A. Sources Used for Linearity Test

(Check as appropriate)

 x First elution from new Mo-99/Tc-99m generator

or

 Other* (specify) _____

B. Sources Used for Instrument Accuracy and Constancy Tests

Radionuclide	Activity (mCi)	Accuracy
Co-57	<u> 1-5 </u>	<u> + 3-5% </u>
Ba-133	<u> </u>	<u> </u>
Cs-137	<u> .2 </u>	<u> + 3-5% </u>
<u> </u>	<u> </u>	<u> </u>
<u> </u>	<u> </u>	<u> </u>

C. x The procedures described in Section 2 of Appendix D will be used for calibration of the dose calibrator

or

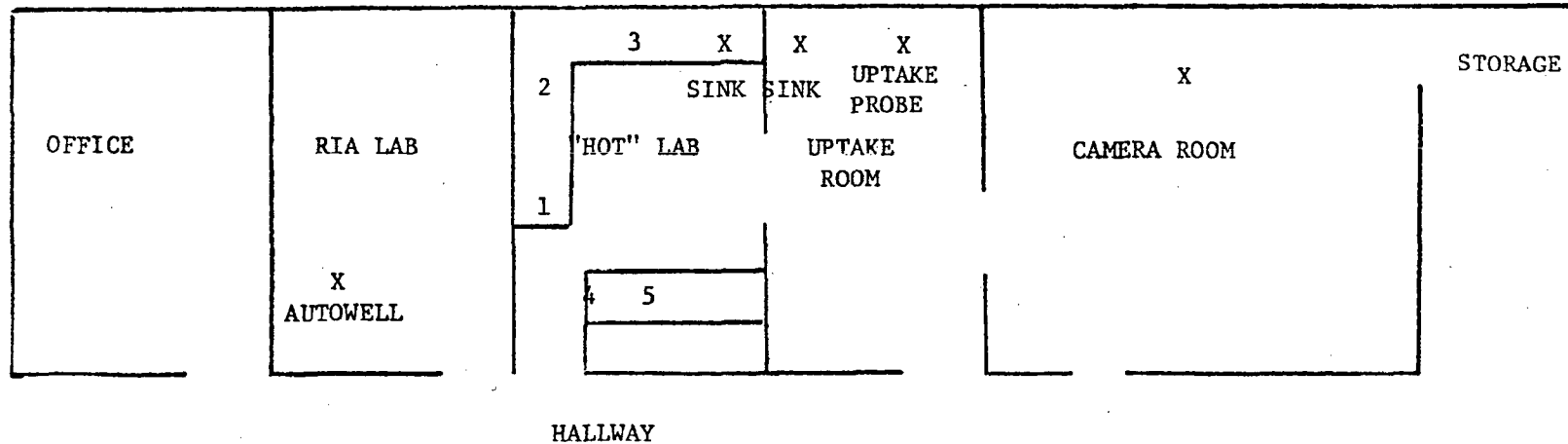
 Equivalent procedures are attached.

*Must be equivalent to the highest activity used.

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OUTSIDE (2nd Level)

Woodland Medical Group
22341 W. Eight Mile Road
Detroit, Michigan 48219



1. Refrigerator
2. "Dose" Preparation and Compounding
Lead-Glass "Face" Shield
3. Generator and Waste Storage Area (Lead Bricks)
4. Survey Meter(s) - Package Receipt
5. "Dose" Calibrator

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Item 13. PROCEDURES FOR ORDERING AND RECEIVING RADIOACTIVE MATERIAL

Byproduct material will be ordered by authorized personnel in accordance with licensed possession limits and conditions. Byproduct material received during off-duty hours will be delivered to a locked Nuclear Medicine room that has been identified for radiopharmaceutical receipt.

Delivery persons will be given the following instructions:

Take package(s) to designated Nuclear Medicine Room
Do not open or tamper with package(s) in any way
Place in designated area
Lock door upon leaving

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ITEM 14

RECEIVING, OPENING AND LOGGING PACKAGES
CONTAINING RADIOACTIVE MATERIALS

Packages containing radioactive materials shall be received by authorized personnel and delivered to the nuclear medicine laboratory. They shall be placed in an area designated for processing and secured against unauthorized removal.

Packages shall be processed as soon as practicable after receipt.

Disposable gloves shall be worn while processing packages and remote handling devices shall be used when practicable. Absorbent pads shall be used to cover the processing area.

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Procedure

1. Monitor the exposure rates at the package surface and at three feet from the package surface. If the exposure rate at the package surface exceeds 200 mR/hr or if the exposure rate at three feet exceeds 10 mR/hr, do not open. Place package behind the protective lead barrier and notify the Radiation Protection Officer.
2. Open the outer package and remove the packing slip. Open inner package and verify that the contents agree in activity, chemical form, and calibration date with the packing slip.
3. Check for possible breakage of seals or containers, loss of liquid, or change in color of liquid absorbing material.
4. If the package appears intact, remove the radioactive material from the outer package and place behind the protective lead barrier. If the shipment appears damaged or discrepant in any way, do not remove the radioactive material. Place the package behind the protective lead barrier and notify the Radiation Protection Officer.
5. With the radioactive material removed, monitor (G.M. survey meter) the package's outer surface and inner contents for contamination. If contamination is noted, place the package behind the protective lead barrier and notify the Radiation Protection Officer..
6. On form "log 1" record date, radionuclide, chemical form, activity, supplier, exposure rate at package surface and at three feet, and if contamination was noted.
7. Store the radioactive material at the assigned shielded location.
8. On form "log 2" record use and ultimate disposal of remaining radioactive material (see also the section on Radioactive Waste Disposal).

Note:

Title 10, Part 20, Section 20.205 requires that exposure rates be measured and if they exceed 200 mR per hour at the package surface or 10 mR per hour at three feet, the licensee shall notify the final delivering carrier and the Nuclear Regulatory Commission immediately. It also requires that removable package surface contamination be measured and if it exceeds 0.01 microcuries per 100 square centimeters of package surface, the licensee shall notify the final delivering carrier and the Nuclear Regulatory Commission immediately. In the procedure outlined above, if package surface contamination is noted using the G.M. survey meter, the package surface should then be "smeared" for removable contamination and the activity per 100 square centimeters quantified and required action taken.

Contaminated containers, liners, shields, etc. should be discarded in the assigned "hot" waste containers. Noncontaminated items may be discarded in the regular waste containers after removing or defacing any label indicating the presence of radioactive material.

Packages containing Na¹³¹I or ¹³³Xe should be processed in a fume hood.

KIT _____

DATE _____

@ _____ AM PM

 ml TOTAL

 mC1/m1

mCi TOTAL

DATE

ml TOTAL

1 mCi/ml

LOT NUMBER

DISPOSAL

DATE DISPOSED

MC1 DISPOSED

METHOD

INITIAL

LOC 1 RADIONUCLIDES RECEIVED - _____ (month)

[illegible]

TOTAL
ACTIVITY
RECEIVED (mCi)

99m	99
ASSAY (Na TcO ₄ ⁻)	Mo CHECK
_____ mCi TOTAL	_____ uCi Mo/mCi
_____ DATE	+++
_____ AM PM	Al
_____ ml TOTAL	_____ ug/ml
_____ mCi/ml	

SUPPLIER ASSAY(OR LABEL)

mCi TOTAL(Mo-99) _____

DATE _____

LOT NUMBER _____

[illegible]

99m		
DISPOSAL (Na TcO_4^-)		
DATE DISPOSED	_____	
mCi DISPOSED	_____	
METHOD	_____	INITIAL

DISPOSAL (GENERATOR)
DATE DISPOSED _____
MC1 DISPOSED _____
METHOD _____ INITIAL _____

APPENDIX H

EMERGENCY PROCEDURES

Minor Spills

1. NOTIFY: Notify persons in the area that a spill has occurred.
2. PREVENT THE SPREAD: Cover the spill with absorbent paper.
3. CLEAN UP: Use disposable gloves and remote handling tongs. Carefully fold the absorbent paper and pad. Insert into a plastic bag and dispose of in the radioactive waste container. Also insert into the plastic bag all other contaminated materials such as disposable gloves.
4. SURVEY: With a low-range, thin-window G-M survey meter, check the area around the spill, hands, and clothing for contamination.
5. REPORT: Report incident to the Radiation Safety Officer.

Major Spills

1. CLEAR THE AREA: Notify all persons not involved in the spill to vacate the room.
2. PREVENT THE SPREAD: Cover the spill with absorbent pads, but do not attempt to clean it up. Confine the movement of all

personnel potentially contaminated to prevent the spread.

3. SHIELD THE SOURCE: If possible, the spill should be shielded, but only if it can be done without further contamination or without significantly increasing your radiation exposure.
4. CLOSE THE ROOM: Leave the room and lock the door(s) to prevent entry.
5. CALL FOR HELP: Notify the Radiation Safety Officer immediately.
6. PERSONNEL DECONTAMINATION: Contaminated clothing should be removed and stored for further evaluation by the Radiation Safety Officer. If the spill is on the skin, flush thoroughly and then wash with mild soap and lukewarm water.

RADIATION SAFETY OFFICER: Dr. Samules
OFFICE PHONE: 538-4700
HOME PHONE: (b)(6)

ALTERNATE NAMES AND TELEPHONE
NUMBERS DESIGNATED BY RSO:

APPENDIX J

WASTE DISPOSAL

1. Liquid waste will be disposed of (check as appropriate)

_____ By commercial waste disposal service (see also item 4 below).

x

_____ In the sanitary sewer system in accordance with §20.303 of 10 CFR Part 20.

_____ Other (specify): _____

2. Mo-99/Tc-99m generators will be (check as appropriate)

_____ Returned to the manufacturer for disposal.

x

_____ Held for decay until radiation levels, as measured with a low-level survey meter and with all shielding removed, have reached background levels. All radiation labels will be removed or obliterated and the generators disposed of as normal trash. (Note: This method of disposal may not be practical for generators containing long-lived radioactive contaminants.)

_____ Disposed of by commercial waste disposal service (see also item 4 below).

_____ Other (specify): _____

3. Other solid waste will be (check as appropriate)

x

_____ Held for decay until radiation levels, as measured with a low-level survey meter and with all shielding removed, have reached background levels. All radiation labels will be removed or obliterated and the waste will be disposed of in normal trash.

_____ Disposed of by commercial waste disposal service (see also item 4 below).

_____ Other (specify): _____

4. The commercial waste disposal service used will be

_____ (Name) _____ (City, State)

NRC/Agreement State License No. _____

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