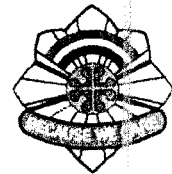




DEPARTMENT OF THE ARMY
HEADQUARTERS U.S. ARMY MEDICAL DEPARTMENT ACTIVITY
FORT KNOX, KENTUCKY 40121-5500



REF ID:
ATTENTION OF

K-8

MCXM-PMR

08 December 2008

MEMORANDUM THRU: COMMANDER, Walter Reed Army Medical Center (AMC)
ATTN: Chief, Health Physics Office (COL Mark Melanson), Washington DC 20307-5001

FOR: U.S. Nuclear Regulatory Commission, Division of Nuclear Materials Safety, Region I 475
Allendale Road, King of Prussia, PA 19406

SUBJECT: NRC License Amendment – Request for New Authorized User

1. This is to notify you that our Radiation Control Committee has approved CPT Eva Smietana, M.D., as an Authorized User for medical use under 10 CFR Parts 35.100, 35.200, 35.300, and 31.11. Dr. Smietana has been working under the supervision of COL Kevin Reilly, M.D., an authorized user, IAW with 10 CFR Part 35.25, since July of 2008. Our Radiation Control Committee approval memorandum, Dr. Smietana's credentials and applicable documentation are enclosed with this memorandum. We request the addition of Dr. Smietana to our USNRC Byproduct Material License (License # 16-03657-01). 03001748

2. This is to notify you that our Radiation Control Committee has also approved Michael M. Tate, M.D., as an Authorized User for medical use under 10 CFR Parts 35.100, 35.200, 35.300, 35.500 and 31.11. Dr. Tate is under a long-term contract with our hospital and is currently the radiation safety officer and an authorized user on USNRC license 13-12367-01. Our Radiation Control Committee approval memorandum and a copy of the USNRC aforementioned license are enclosed with this memorandum. We request the addition of Dr. Tate to our USNRC Byproduct Material License (License # 16-03657-01).

3. The point of contact for this memorandum is the undersigned at (502) 624-0589.

SARAH M. SUBLETT
LLT, MS
Chief, Health Physics/Radiation Protection

6 Encls

1 RCC Approval

REC'D IN LAT

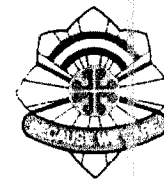
12/11/08

143066
NRC/RGN MATERIALS-002

2. Certificate in Diagnostic Radiology
3. Letter of Diagnostic Radiology Certification
4. Medical School Diploma
5. USNRC Form 313A (Preceptor Statement)
6. USNRC License 13-12367-01



DEPARTMENT OF THE ARMY
HEADQUARTERS, US ARMY MEDICAL DEPARTMENT ACTIVITY
FORT KNOX, KENTUCKY 40121-5000



MCXM-PMR


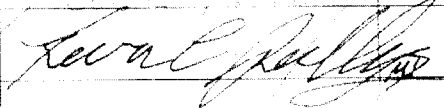
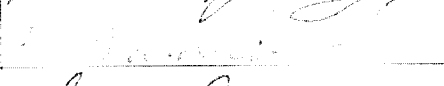
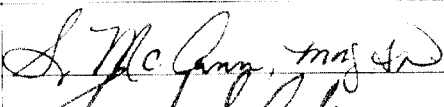

18 November 2008

MEMORANDUM FOR RCC

SUBJECT: RCC Approval of CPT Eva Smietana, M.D. and Michael M. Tate, M.D. as Authorized Users for Medical Use on IACH's NRC License

1. CPT Eva Smietana, M.D. is currently assigned to IACH's Department of Radiology and Michael M. Tate, M.D. is under contract to IACH's Department of Radiology and they are requesting RCC approval as Authorized Users for medical use. Their approval and addition to IACH's US NRC License will authorize them to practice Nuclear Medicine studies using radiopharmaceuticals and radioactive materials covered under 10 CFR Parts 35.100, 35.200, 35.300, 35.500 and 31.11 for uptake, dilution, excretion studies and diagnostic imaging purposes on the MEDDAC NRC License and DARA. Their credentials are attached. For CPT Smietana it is her letter of Nuclear Medicine Training Verification, letter of Diagnostic Radiology Certification, Medical School Diploma, and USNRC Form 313A (Preceptor Statement) and for Dr. Tate it is a copy of the USNRC license that he is currently on.

2. Please indicate your approval or disapproval by signing in the appropriate column below:

	Approval	Disapproval
LTC Raney, DCCS, RCC Chairperson		
LTC Reilly, Chief, NMS and Radiology		
MAJ Gardiner, Chief, Preventive Medicine		
MAJ McCann, Representative DON		
1LT Sublett, Health Physics/RPO		

3. Upon RCC approval, an amendment request will be submitted to the US Nuclear Regulatory Commission.

4. POC for this memorandum is the undersigned at (502)624-0589.



SARAH M. SUBLETT
1LT, MS
Chief, Health Physics Office



Diagnostic Radiology: James P. Bergsiede, M.D.
Radiation Oncology: Larry E. Kun, M.D.
Radiologic Physics: G. Donald Frey, Ph.D.

(3-2007)

AUTHORIZED USER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)

3. Training and Experience for Proposed Authorized User (continued)

b. Supervised Work Experience. (continued)

Description of Experience Must Include	Location of Experience/License or Permit Number of Facility	Confirm	Dates of Experience*
Calculating, measuring, and safely preparing patient or human research subject dosages		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Using administrative controls to prevent a medical event involving the use of unsealed byproduct material		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Using procedures to contain spilled byproduct material safely and using proper decontamination procedures		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Administering dosages of radioactive drugs to patients or human research subjects		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Eluting generator systems appropriate for the preparation of radioactive drugs for imaging and localization studies, measuring and testing the eluate for radionuclidic purity and processing the eluate with reagent kits to prepare labeled radioactive drugs		<input type="checkbox"/> Yes <input type="checkbox"/> No	

Supervising Individual

License/Permit Number listing supervising individual as an
authorized user

Supervisor meets the requirements below, or equivalent Agreement State requirements (check one).

35.190

35.290

35.390

35.390 + generator experience in 35.290(c)(1)(ii)(G)

c. For 35.590 only, provide documentation of training on use of the device.

Device	Type of Training	Location and Dates

d. For 35.500 uses only, stop here. For 35.100 and 35.200 uses skip to and complete Part II Preceptor Attestation

AUTHORIZED USER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)

PART II - PRECEPTOR ATTESTATION

Note: This part must be completed by the individual's preceptor. The preceptor does not have to be the supervising individual as long as the preceptor provides, directs, or verifies training and experience required. If more than one preceptor is necessary to document experience, obtain a separate preceptor statement from each. (Not required to meet training requirements in 35.590)

By checking the boxes below, the preceptor is attesting that the individual has knowledge to fulfill the duties of the position sought and not attesting to the individual's "general clinical competency."

First Section

Check one of the following for each use requested:

For 35.190

Board Certification

☒ I attest that **Eva M. Smietana, MD** has satisfactorily completed the requirements in
Name of Proposed Authorized User

10 CFR 35.190(a)(1) and has achieved a level of competency sufficient to function independently as an authorized user for the medical uses authorized under 10 CFR 35.100

OR

Training and Experience

I attest that _____ has satisfactorily completed the 60 hours of training and
Name of Proposed Authorized User

experience, including a minimum of 8 hours of classroom and laboratory training, required by 10 CFR 35.190(c)(1), and has achieved a level of competency sufficient to function independently as an authorized user for the medical uses authorized under 10 CFR 35.100

For 35.290

Board Certification

☒ I attest that **Eva M. Smietana, MD** has satisfactorily completed the requirements in
Name of Proposed Authorized User

10 CFR 35.290(a)(1) and has achieved a level of competency sufficient to function independently as an authorized user for the medical uses authorized under 10 CFR 35.100 and 35.200.

OR

Training and Experience

I attest that _____ has satisfactorily completed the 700 hours of training
Name of Proposed Authorized User

and experience, including a minimum of 80 hours of classroom and laboratory training, required by 10 CFR 35.290(c)(1), and has achieved a level of competency sufficient to function independently as an authorized user for the medical uses authorized under 10 CFR 35.100 and 35.200.

Second Section

Complete the following for preceptor attestation and signature:

☒ I meet the requirements below, or equivalent Agreement State requirements, as an authorized user for:

35.190 35.290 35.390 ☒ 35.390 + generator experience

Name of Preceptor

Signature

Telephone Number

Date

Sidney R. Hinds II, MD

(202) 782-5299

12/05/2008

License/Permit Number/Facility Name

License #08-01738-02 / Walter Reed Army Medical Center

**AUTHORIZED USER TRAINING AND EXPERIENCE
AND PRECEPTOR ATTESTATION**
(for uses defined under 35.300)
[10 CFR 35.390, 35.392, 35.394, and 35.396]APPROVED BY OMB: NO. 3150-0120
EXPIRES: 10/31/2008

Name of Proposed Authorized User

State or Territory Where Licensed

Eva M. Smietana, MD

Kentucky

Requested Authorization(s) (check all that apply)

- ☒ 35.300 Use of unsealed byproduct material for which a written directive is required

OR

- 35.300 Oral administration of sodium iodide I-131 requiring a written directive in quantities less than or equal to 1.22 gigabecquerels (33 millicuries)
- 35.300 Oral administration of sodium iodide I-131 requiring a written directive in quantities greater than 1.22 gigabecquerels (33 millicuries)
- 35.300 Parenteral administration of any beta emitter, or photon-emitting radionuclide with a photon energy less than 150 keV for which a written directive is required
- 35.300 Parenteral administration of any other radionuclide for which a written directive is required

PART I -- TRAINING AND EXPERIENCE
(Select one of the three methods below)

- * Training and Experience, including board certification, must have been obtained within the 7 years preceding the date of application or the individual must have related continuing education and experience since the required training and experience was completed. Provide dates, duration, and description of continuing education and experience related to the uses checked above.

☒ 1. Board Certification

- a. Provide a copy of the board certification
- b. For 35.390, provide documentation on supervised clinical case experience. The table in section 3.c. may be used to document this experience
- c. For 35.396, provide documentation on classroom and laboratory training, supervised work experience, and supervised clinical case experience. The tables in sections 3.a., 3.b., and 3.c. may be used to document this experience
- d. Skip to and complete Part II Preceptor Attestation

2. Current 35.300, 35.400, or 35.600 Authorized User Seeking Additional Authorization

- a. Authorized User on Materials License _____ under the requirements below or equivalent Agreement State requirements (check all that apply)

35.390	35.392	35.394	35.490	35.690
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- b. If currently authorized for a subset of clinical uses under 35.300, provide documentation on additional required supervised case experience. The table in section 3.c. may be used to document this experience. Also provide completed Part II Preceptor Attestation.
- c. If currently authorized under 35.490 or 35.690 and requesting authorization for 35.396, provide documentation on classroom and laboratory training, supervised work experience, and supervised clinical case experience. The tables in sections 3.a., 3.b., and 3.c. may be used to document this experience. Also provide completed Part II Preceptor Attestation.

AUTHORIZED USER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)

3. Training and Experience for Proposed Authorized User

a. Classroom and Laboratory Training ☐ 35.390 ☐ 35.392 ☐ 35.394 ☐ 35.396

Description of Training	Location of Training	Clock Hours	Dates of Training*
Radiation physics and instrumentation			
Radiation protection			
Mathematics pertaining to the use and measurement of radioactivity			
Chemistry of byproduct material for medical use			
Radiation biology			

Total Hours of Training:

b. Supervised Work Experience ☐ 35.390 ☐ 35.392 ☐ 35.394 ☐ 35.396

If more than one supervising individual is necessary to document supervised training, provide multiple copies of this page.

Supervised Work Experience

Total Hours of Experience:

Description of Experience Must Include	Location of Experience/License or Permit Number of Facility	Confirm	Dates of Experience*
Ordering, receiving, and unpacking radioactive materials safely and performing the related radiation surveys		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Performing quality control procedures on instruments used to determine the activity of dosages and performing checks for proper operation of survey meters		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Calculating, measuring, and safely preparing patient or human research subject dosages		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Using administrative controls to prevent a medical event involving the use of unsealed byproduct material		<input type="checkbox"/> Yes <input type="checkbox"/> No	
Using procedures to contain spilled byproduct material safely and using proper decontamination procedures		<input type="checkbox"/> Yes <input type="checkbox"/> No	

AUTHORIZED USER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)

3. Training and Experience for Proposed Authorized User (continued)

b. Supervised Work Experience (continued)

Supervising Individual

License/Permit Number listing supervising individual as an authorized user

Supervising individual meets the requirements below, or equivalent Agreement State requirements (check all that apply)**

- 35.390 With experience administering dosages of:
- 35.392 Oral NaI-131 requiring a written directive in quantities less than or equal to 1.22 gigabecquerels (33 millicuries)
- 35.394 Oral NaI-131 in quantities greater than 1.22 gigabecquerels (33 millicuries)
- 35.396 Parenteral administration of beta-emitter, or photon-emitting radionuclide with a photon energy less than 150 keV requiring a written directive is required
- Parenteral administration of any other radionuclide requiring a written directive

** Supervising Authorized User must have experience in administering dosages in the same dosage category or categories as the individual requesting authorized user status.

c. Supervised Clinical Case Experience

If more than one supervising individual is necessary to document supervised work experience, provide multiple copies of this page.

Description of Experience	Number of Cases Involving Personal Participation	Location of Experience/License or Permit Number of Facility	Dates of Experience*
Oral administration of sodium iodide I-131 requiring a written directive in quantities less than or equal to 1.22 gigabecquerels (33 millicuries)			
Oral administration of sodium iodide I-131 requiring a written directive in quantities greater than 1.22 gigabecquerels (33 millicuries)			
Parenteral administration of any beta-emitter, or photon-emitting radionuclide with a photon energy less than 150 keV for which a written directive is required			
Parenteral administration of any other radionuclide for which a written directive is required			
(List radionuclides)			

AUTHORIZED USER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)

3. Training and Experience for Proposed Authorized User (continued)

c. Supervised Clinical Case Experience (continued)

Supervising Individual

License/Permit Number listing supervising individual as an authorized user

Supervising individual meets the requirements below, or equivalent Agreement State requirements (check all that apply)**

35.390 With experience administering dosages of:

35.392 Oral NaI-131 requiring a written directive in quantities less than or equal to 1.22 gigabecquerels (33 millicuries)

35.394

35.396 Oral NaI-131 in quantities greater than 1.22 gigabecquerels (33 millicuries)

Parenteral administration of beta-emitter, or photon-emitting radionuclide with a photon energy less than 150 keV requiring a written directive is required

Parenteral administration of any other radionuclide requiring a written directive

** Supervising Authorized User must have experience in administering dosages in the same dosage category or categories as the individual requesting authorized user status

d. Provide completed Part II Preceptor Attestation

PART II - PRECEPTOR ATTESTATION

Note This part must be completed by the individual's preceptor. The preceptor does not have to be the supervising individual as long as the preceptor provides, directs, or verifies training and experience required. If more than one preceptor is necessary to document experience, obtain a separate preceptor statement from each.

By checking the boxes below, the preceptor is attesting that the individual has knowledge to fulfill the duties of the position sought and not attesting to the individual's "general clinical competency."

First Section

Check one of the following for each requested authorization:

For 35.390:Board CertificationI attest that **Eva M. Smietana, MD**

Name of Proposed Authorized User

has satisfactorily completed the training and experience

requirements in 35.390(a)(1)

OR

Training and Experience

I attest that

Name of Proposed Authorized User

has satisfactorily completed the 700 hours of training

and experience, including a minimum of 200 hours of classroom and laboratory training, as required by 10 CFR 35.390 (b)(1)

AUTHORIZED USER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)

Preceptor Attestation (continued)

First Section (continued)

For 35.392 (Identical Attestation Statement Regardless of Training and Experience Pathway):

I attest that _____ has satisfactorily completed the 80 hours of classroom
Name of Proposed Authorized User
and laboratory training, as required by 10 CFR 35.392(c)(1), and the supervised work and clinical case
experience required in 35.392(c)(2)

For 35.394 (Identical Attestation Statement Regardless of Training and Experience Pathway):

I attest that _____ has satisfactorily completed the 80 hours of classroom
Name of Proposed Authorized User
and laboratory training, as required by 10 CFR 35.394 (c)(1), and the supervised work and clinical case
experience required in 35.394(c)(2)

Second Section

I attest that _____ has satisfactorily completed the required clinical case
Name of Proposed Authorized User
experience required in 35.390(b)(1)(ii)G listed below:

Oral NaI-131 requiring a written directive in quantities less than or equal to 1.22
gigabecquerels (33 millicuries)

Oral NaI-131 in quantities greater than 1.22 gigabecquerels (33 millicuries)

Parenteral administration of beta-emitter, or photon-emitting radionuclide with a photon
energy less than 150 keV requiring a written directive is required

Parenteral administration of any other radionuclide requiring a written directive

Third Section

I attest that _____ has satisfactorily achieved a level of competency to
Name of Proposed Authorized User
function independently as an authorized user for:

Oral NaI-131 requiring a written directive in quantities less than or equal to 1.22
gigabecquerels (33 millicuries)

Oral NaI-131 in quantities greater than 1.22 gigabecquerels (33 millicuries)

Parenteral administration of beta-emitter, or photon-emitting radionuclide with a photon
energy less than 150 keV requiring a written directive is required

Parenteral administration of any other radionuclide requiring a written directive

10-20-11

AUTHORIZED USER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)

Fourth Section

For 35.396:

Current 35.490 or 35.690 authorized user:

I attest that _____ is an authorized user under 10 CFR 35.490 or 35.690

Name of Proposed Authorized User

or equivalent Agreement State requirements, has satisfactorily completed the 80 hours of classroom and laboratory training, as required by 10 CFR 35.396 (d)(1), and the supervised work and clinical case experience required by 35.396(d)(2), and has achieved a level of competency sufficient to function independently as an authorized user for

Parenteral administration of any beta-emitter, or photon-emitting radionuclide with a photon energy less than 150 keV for which a written directive is required

Parenteral administration of any other radionuclide for which a written directive is required

OR

Board Certification:

I attest that _____ has satisfactorily completed the board certification

Name of Proposed Authorized User

requirements of 35.396(c), has satisfactorily completed the 80 hours of classroom and laboratory training required by 10 CFR 35.396 (d)(1) and the supervised work and clinical case experience required by 35.396(d)(2), and has achieved a level of competency sufficient to function independently as an authorized user for

Parenteral administration of any beta-emitter, or photon-emitting radionuclide with a photon energy less than 150 keV for which a written directive is required

Parenteral administration of any other radionuclide for which a written directive is required

Fifth Section

Complete the following for preceptor attestation and signature:

- ☒ I meet the requirements below, or equivalent Agreement State requirements, as an authorized user for:
- ☒ 35.390 ☒ 35.392 ☒ 35.394 ☒ 35.396
- ☒ I have experience administering dosages in the following categories for which the proposed Authorized User is requesting authorization
- ☒ Oral NaI-131 requiring a written directive in quantities less than or equal to 1.22 gigabecquerels (33 millicuries)
- ☒ Oral NaI-131 in quantities greater than 1.22 gigabecquerels (33 millicuries)
- ☒ Parenteral administration of beta-emitter, or photon-emitting radionuclide with a photon energy less than 150 keV requiring a written directive is required
- ☒ Parenteral administration of any other radionuclide requiring a written directive

Name of Preceptor

Sidney R. Hinds II, MD

Signature



Telephone Number

(202) 782-5299

Date

12/05/2008

License/Permit Number/Facility Name

License #08-01738-02 / Walter Reed Army Medical Center

301-6811

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 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 loan or transfer such material to persons authorized to receive it in accordance with the regulations of the applicable Part(s). This license is 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.

Licensee

Clark Memorial Hospital

1220 Missouri Avenue
Jeffersonville, IN 47130

In accordance with letter dated

February 5, 2007,

3. License number 13-12367-01 is amended
in its entirety as follows:

4. Expiration date October 31, 2014

5. Docket No. 030-01658
Reference No.6. Byproduct, source, and/or special
nuclear material

7. Chemical and/or physical form

8. Maximum amount that licensee may
possess at any one time under this
licenseA. Any byproduct material
permitted by 10 CFR 35.100

A. Any

A. As needed

B. Any byproduct material
permitted by 10 CFR 35.200

B. Any

B. As needed

C. Any byproduct material
permitted by 10 CFR 35.300

C. Any

C. Not to exceed 1 curie

D. Any byproduct material
permitted by 10 CFR 35.400D. Sealed sources (Bard
Brachytherapy Model No.
STM-1251 and Theragenics
Model No. 200)

D. Not to exceed 2 curies

E. Any byproduct material
permitted by 10 CFR 31.11

E. Prepackaged kits

E. As needed

F. Strontium-90

F. Sealed source (Tracerlab
Model RA-2A)F. One source not to exceed
100 millicuries

Authorized Use:

A. Any uptake, dilution and excretion study permitted by 10 CFR 35.100.

B. Any imaging or localization study permitted by 10 CFR 35.200.

C. Any therapy procedure permitted by 10 CFR 35.300.

**MATERIALS LICENSE
SUPPLEMENTARY SHEET**License Number
13-12367-01Docket or Reference Number
030-01658

Amendment No. 32

- D. Any manual brachytherapy procedure permitted by 10 CFR 35.400.
- E. In vitro studies.
- F. For possession only, incident to disposal.

CONDITIONS

10. Licensed material shall be used only at the licensee's facilities located at 1220 Missouri Avenue, Jeffersonville, Indiana.

11. Radiation Safety Officer: Michael M. Tate, M.D.

12. Licensed material is only authorized for use by, or under the supervision of:

- A. Individuals permitted to work as an authorized user in accordance with 10 CFR 35.13 and 35.14.
- B. The following individuals are authorized users for medical uses:

Authorized UsersMaterial and Use

H. David Heideman, M.D.	10 CFR 35.100, 35.200, 35.300 and 31.11.
David R. Cannon, M.D.	10 CFR 35.100, 35.200 and 31.11.
Mohammed Hussain, M.D.	10 CFR 35.100 and 35.200.
Dolph Martel Denny, M.D.	10 CFR 35.100 and 35.200.
William R. Fortner, M.D.	10 CFR 35.100, 35.200, 35.300 and 31.11.
Stephen R. Regan, M.D.	10 CFR 35.100, 35.200, 35.300 and 31.11.
Edsel S. Reed, M.D.	10 CFR 35.100, 35.200, 35.300 and 31.11.
Anthony Duncan, M.D.	10 CFR 35.100, 35.200, 35.300 and 31.11.
Kelly J. Colomb, M.D.	10 CFR 35.100, 35.200, 35.300 and 31.11.

**MATERIALS LICENSE
SUPPLEMENTARY SHEET**License Number
13-12367-01Docket or Reference Number
030-01658

Amendment No. 32

Bapineedu Gondi, M.D.	10 CFR 35.100 and 35.200.
Gary Yurow, M.D.	10 CFR 35.100 and 35.200.
Stephen J. Matthews, M.D.	10 CFR 35.100, 35.200 and 35.300 excluding thyroid carcinoma therapy.
→ Michael M. Tate, M.D.	10 CFR 35.100, 35.200, 35.300 and 31.11.
Koduvathara James, M.D.	10 CFR 35.100 and 35.200.
Carl E. Dillman, M.D.	10 CFR 35.100 and 35.200.
D. Mark Bickers, M.D.	10 CFR 35.100 and 35.200.
Wayne Shugoll, M.D.	10 CFR 35.100 and 35.200.
Armand Rothschild, M.D.	10 CFR 35.100 and 35.200.
Gurbachan Sohi, M.D.	10 CFR 35.100 and 35.200.
Sohail Ikram, M.D.	10 CFR 35.100 and 35.200.
Thomas Matthew Sweat, M.D.	10 CFR 35.100 and 35.200.
William J. Schoen, M.D.	10 CFR 35.100 and 35.200.
John Terrence Kenny, M.D.	10 CFR 35.100 and 35.200.
Frederick Albrink, M.D.	10 CFR 35.300 and materials listed in Subitem 6.D.
Zaka Ur Rahman, M.D.	10 CFR 35.100 and 35.200.
Craig S. Kamen, M.D.	10 CFR 35.100, 35.200 and 35.300.
F. Baby Jose, M.D.	For materials listed in Subitem 6.D.
Mark Cornett, M.D.	For materials listed in Subitem 6.D.
Mark Jones, M.D.	For materials listed in Subitem 6.D.
Zulfiquar Bhatti, M.D.	10 CFR 35.100 and 35.200.
Brian Worm, M.D.	10 CFR 35.100, 35.200 and 35.300.

**MATERIALS LICENSE
SUPPLEMENTARY SHEET**

License Number

13-12367-01

Docket or Reference Number

030-01658

Amendment No. 32

Ali Nawab Risvi, M.D.	10 CFR 35.100 and 35.200.
Geoffrey Peters, M.D.	10 CFR 35.100 and 35.200.
Srinivasarao Manchikalapudi, M.D.	10 CFR 35.100 and 35.200.
Kendall Goldschmidt, M.D.	10 CFR 35.100 and 35.200 and 35.300.
Christopher J. Day, M.D.	10 CFR 35.100 and 35.200 and 35.300 (excluding iodine-131 for thyroid carcinoma).
Kevin E. Burton, M.D.	10 CFR 35.100 and 35.200.
Thomas C. Passo, M.D.	10 CFR 35.100 and 35.200.
Naresh Solankhi, M.D.	10 CFR 35.100 and 35.200.
Naveen Devabhaktuni, M.D.	10 CFR 35.100 and 35.200.
Mitchell Jay Kline, M.D.	10 CFR 35.100 and 35.200.
Jerome Schrodtt, M.D.	10 CFR 35.100, 35.200 and oral administration of sodium iodide-131 in quantities less than or equal to 33 millicuries.
Richard Eickler, M.D.	10 CFR 35.100 and 35.200.
Kevin P. Serey, M.D.	10 CFR 35.100, 35.200 and 35.300 limited to oral administration of sodium iodide-131.
David P. Musich, M.D.	10 CFR 35.300, 35.400 and 31.11.

The licensee is authorized to transport licensed material only in accordance with the provisions of 10 CFR Part 71, "Packaging and Transportation of Radioactive Material."

In addition to the possession limits in Item 8, the licensee shall further restrict the possession of licensed material to quantities below the minimum limit specified in 10 CFR 30.35(d) for establishing decommissioning financial assurance.

**MATERIALS LICENSE
SUPPLEMENTARY SHEET**

License Number

13-12367-01

Docket or Reference Number

030-01658

Amendment No. 32

- 15 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. This license condition applies only to those procedures that are required to be submitted in accordance with the regulations. Additionally, this license condition does not limit the licensee's ability to make changes to the radiation protection program as provided for in 10 CFR 35.26. 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 April 22, 2004, and,

B Letter received October 21, 2004.

FOR THE U.S. NUCLEAR REGULATORY COMMISSION

Date

APR 16 2007

By

Toye L. Simmons

Materials Licensing Branch

Region III