



CONVERSATION RECORD

04/11/2018

NAME OF PERSON(S) CONTACTED OR IN CONTACT WITH YOU Triston W. Dougall		DATE OF CONTACT 04/11/2018	TYPE OF CONVERSATION <input type="checkbox"/> E-MAIL <input checked="" type="checkbox"/> TELEPHONE <input type="checkbox"/> INCOMING <input checked="" type="checkbox"/> OUTGOING
E-MAIL ADDRESS Triston.W.Dougall@mercyhealth.com		TELEPHONE NUMBER (616) 685-6744	

ORGANIZATION Mercy Health Saint Mary's	DOCKET NUMBER(S) 030-08291
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LICENSE NUMBER(S) 21-01078-01	CONTROL NUMBER(S) 602314
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SUBJECT  
Additional Information Requested

SUMMARY  
We have reviewed the amendment request dated January 23, 2018, to add several authorized users to your NRC license. In order to complete our review, we will need to the following additional information:

1. For Dr. Skrtic, you have requested to Y-90 microspheres as an additional authorized use. In your request, you did not provide documentation that he has either a board certification in interventional radiology or 1 year of supervised clinical experience in interventional radiology.

Please provide the following:

- a. Board certification in diagnostic radiology and subspecialty certification in interventional radiology by either the American Board of Radiology or the American Osteopathic Board of Radiology; or
- b. Three years supervised clinical experience in diagnostic radiology and one additional year of supervised clinical experience in interventional radiology.

In addition, please provide a more updated copy of his board certificate, if one is available.

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ACTION REQUIRED (IF ANY)  
Please submit your response by April 20, 2018, and reference it to my attention as "additional information to control number 602314" to facilitate proper handling in our office. Your response must be currently dated and signed. If you have any questions or require clarification of any of the information stated above, please do not hesitate to contact me at 630-829-9607

In accordance with 10 CFR 2.390 of the NRC's "Rules of Practice," a copy of this letter and its enclosure will be available electronically for public inspection in the NRC Public Document Room or from the NRC's Agencywide Documents Access and Management System (ADAMS), accessible from the NRC Web site at <http://www.nrc.gov/reading-rm/adams.html>.

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NAME OF PERSON DOCUMENTING CONVERSATION  
Jennifer L. Bishop

SIGNATURE

CONVERSATION RECORD (continued)

SUMMARY: (Continued from page 1)

2. For Dr. Rapoport, you have you have requested to add Y-90 microspheres and 35.300 parenteral administration as additional authorized uses.

For the request to add Y-90 uses, the following information will be needed:

a. In the preceptor form, in section 3.a. you state that 8 hours of classroom and laboratory training had been provided. However, per the guidance, 80 hours of classroom and laboratory are required. Please provide additional documentation of training received in radiation physics and instrumentation, radiation protection, mathematics pertaining to the use and measurement of radioactivity and radiation biology.

For the request for uses under 10 CFR 35.300, specifically the training covered under 35.396, you will need to provide the following information:

- a. You will need to complete section 3.a. documenting the classroom and laboratory training.
- b. You will need to complete section 3.b. documenting the supervised work experience.

3. For Dr. Lenger, you have you have requested to add 35.300 parenteral administration as additional authorized uses. For the request for uses under 10 CFR 35.300, specifically the training covered under 35.396, you will need to provide the following information:

- a. You will need to complete section 3.a. documenting the classroom and laboratory training.
- b. You will need to complete section 3.b. documenting the supervised work experience.

4. For Dr. Spear, it appears that you have you have requested to add 35.300 parenteral administration as an additional authorized use, although this is not clear in your request. Please confirm what additional uses you are requesting to add for Dr. Spear.

If your request is for uses under 10 CFR 35.300, specifically the training covered under 35.396, you will need to provide the following information:

- a. The number of cases he has participated in as part of his supervised clinical case experience.
- b. In Part II - Preceptor Attestation, the Second and Third sections have not been completed, as required.