American Bentley

Subsidiary of American Hospital Supply Corporation P.O. Box 19522 Irvine CA USA 92713-9522 17502 Armstrong Avenue Irvine CA USA 92714 Telephone 714 261-8363 Telex 68-5503 BENT LAB IRIN

....

October 4, 1985

Mr. Earl White U.S. Nuclear Regulatory Commission, Region II Material Radiation Protection System 101 Marietta St., Suite 2900 Atlanta, GA 30323

Dear Mr. White:

Here is the information that you requested for our material license.

- 1) LIXI Scope Model # LS-82-102.
- 2) Leak Test Procedure (see enclosure).
- Please send the license to the attention of Luis Maldonado, Quality Assurance Supervisor, at our Puerto Rico address.

Sincerely, Jack Nowin Jack Sowin Quality Assurance Engineer

JS:po

Pre'd 10/1/85

8602270115 851010 REG2 LIC30 52-23106-01 PDR Supplemental Information American Bentley

## Leak Test Kit and Certificate File

Every LIXI source head will be accompanied by a Leak Test Certificate. A leak test kit is provided with the original LIXI Scope. The certificate and kit will be placed in this leak test file. A leak test will be performed on the I-125 source head within 6 months of the date on the original leak test certificate. Leak test kits are normally provided by the testing company when a leak test certificate is returned. Maintaining the leak tests on the required schedule is the responsibility of American Bentley.

Iodine-125 source heads exchanged at intervals of less than 6 months, do not require leak testing. A sample of the Leak Test kit instructions and a sample Leak Test Certificate are attached.

	MODEL LT-2
	LEAK TEST KIT
REMARKS	FACILITY
	CITYSTATE
	FEDERAL NRC LICENSE NO.
	AGREEMENT STATE LICENSE NO.
	RADIONUCLIDE
	ACTIVITY ON ORIGINAL CALIBRATION DATE
	ORIGINAL CALIBRATION DATE
	MANUFACTURER
	MODEL NUMBER
	SERIAL NUMBER
	ANY OTHER DESCRIPTION
	TEST DATE
	SOURCES WIPED BY
	NEXT TEST DUE
	Sohci STAN A. HUBER CONSULTANTS. IN
	235 ESSEX LANE IN NEW LENOX, ILLINOIS 60451
	(815) 722-8009

• •

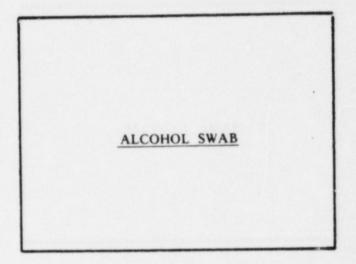
Note any special billing or other instructions in the "Remarks" section on the back of this kit.

#### PREREQUISITES

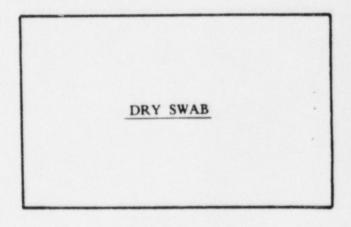
- a) Follow any manufacturer instructions or specific license conditions for proper access and wipe testing of the sources.
- b) Use time, distance and shielding to reduce radiation exposure as low as reasonably achievable.
- c) Use rubber gloves & remote handling devices in handling or working near radiation source containers, or when working with any potentially contaminated materials.
- d) Wipe tests should only be performed by the licensed users, Radiation Safety Officer or their trained designates.

#### PROCEDURE

- Place source behind shielding (if applicable) or check that direct radiation exposure is not possible.
- Remove alcohol swab from packet to soak the "wet swab" cotton applicator.
- Wipe all accessible surfaces of the source with wet swab. (Or nearest the source container, as applicable.)
- 4) Place wet swab cotton applicator in plastic sleeve marked "WET SWAB", seal open end. (Tape or staple)
- Remove the "dry swab" cotton applicator and wipe all accessible surfaces of the source or container.
- 6) Place the "dry swab" cotton applicator in plastic sleeve marked "DRY SWAB" and seal open end.
- Return source to storage (if applicable) or check that device is in proper safeguard mode.
- 8) Survey each swab with G-M survey meter. If reading is above normal background note this on back of kit and call Stan A. Huber Consultants, Inc. for further instructions.
- Assuming the survey meter reading indicates no detectable activity, return kit to Stan A. Huber Consultants, Inc. in a standard size envelope.
- 10) You should receive the leak test certificate within 2 weeks after the sample kit is received by SAHCI. If not, please call our office.







# - LEAK TEST CERTIFICATE CERTIFICAT D'ESSAIS D'ETANCHEITE

CUSTOMER-CLIENT/E

LIXIE INC.

DATE 1982 AUGUST 13

ORDER NO. NO. DE COMMANDE P.S. 86253

DESCRIPTION OF SOURCE(S) TESTED DESCRIPTION DE(S) SOURCE(S) VÉRIFIÉE(S) IODINE 125 POINT SOURCE NOMINAL 500 mCi IN A WELDED A.E.C.L. C324 CAPSULE.

SERIAL NO(S). DE SERIE 1669

LEAK TEST(S) PERFORMED ESSAI(S) D'ÉTANCHÉITÉ EFFECTUÉ(S)

- 1. Hot liquid test, Procedure DG-0050. Essai au liquide chaud, procédure DG-0050.
- 2. Vacuum liquid leak test. Procedure DG-0052. Essai d'étanchéité au liquide sous vide, procédure DG-0052.
- 3. Helium pressurization test, Procedure DG-0056 Essai de mise sous pression d'hélium, procédure DG-0056.
- 4. Wet wipe test, Procedure DG-0063. Essai au frottement humide, procédure DG-0063.
- 5. The immersion test, Procedure DG-0064. Essai d'immersion, procédure DG-0064.
- 6. Essai au frottement à sec, procédure DG-0065.
- 7. Dry wipe test 'ACTIVE' inner/'INACTIVE' outer encapsulation, Procedure DG-0161. Encapsulation 'ACTIVE' interieure/'INACTIVE' extérieure, procédure DG-0161.
- 8. Removable contamination test on equipment utilizing depleted uranium alloy. Procedure DG-0070. Essai de contamination amovible sur appareillage utilisant un alliage d'uranium appauvri, procédure DG-0070.
- 9. Other test(s) as described below. Autre(s) essai(s) decrit(s) ci-dessous.

Note: All tests performed meet specified requirements À noter: Tous les essets effectués répondent aux exigences DATE OF COMPLETION OF TEST(S): ESSAI(S) COMPLÉTÉ(S) LE:

1982 AUGUST 13



Atomic Energy of Canada Limited

Commercial Products

P.O. Box 6300 Postal Station J Ottawa, Canada K2A 3W3 FOR THE COMPANY

SPECIAL PRODUCTS GROUP

PRODUCTION L'Énergie Atomique du Canada, Limitée

**Produits Commerciaux** 

C.P. 6300 Succursale Postale J Ottawa, Canada K2A 3W3

AECL-CP 1975 1 18 06

RESULTS OF TESTS RÉSULTATS DES ESSAIS

### ACCEPTABLE

NEGATIVE

NRC FORM 218 U.S. NUCLEAR REGULATORY COMMISSION DATE 10/4/85 (4 76) NRCM 0240 A.M. TIME **TELEPHONE OR VERBAL CONVERSATION RECORD** P.M. U VISIT INCOMING CALL DOUTGOING CALL PHONE NUMBER EXTENSION PERSON CALLING OFFICE/ADDRESS Earl Stright Jack P. Sowin Bentley Irvine Ca PERSON CALLED PHONE NUMBER EXTENSION 714-261-8363 CONVERSATION SUBJECT Control 50749 SUMMARY Called + Ask him for model # of device and leak test procedures. E Wright Notified his Maldonado that lic and 10/8/85 this date & unight REFERRED TO: ADVISE ME OF ACTION TAKEN. ACTION REQUESTED INITIALS DATE INITIALS ACTION TAKEN DATE NRC FORM 218 (4 76)

American Bentley

Subsidiary of American Hospital Supply Corporation

PO Box 19522 Invine CA USA 92713-9522 17502 Armstrong Avenue Invine CA USA 92714

Telephone 714 261-8363 Telex 68-5503 BENT LAB IRIN

Received 10:302 10/3/85- EXLL

October 2, 1985

Mr. Earl White U.S. Nuclear Regulatory Commission, Region II Material Radiation Protection System 101 Marietta St., Suite 2900 Atlanta, GA 30323

Dear Mr. White:

This letter is a follow up to our phone conversation on Wednesday, October 2, 1985.

Because of the incorrect information that we received from LIXI inc., we assumed that we could operate LIXI Scopes at our manufacturing plant in Puerto Rico prior to obtaining our industrial material license. Our production line for several medical products is presently shut down until we get approval of our license application. I appreciate your efforts in expediting the processing of our application.

When we do receive our license, only American Bentley personnel who have passed the LIXI training course will be allowed to use the LIXI Scope. This will be done under the supervision of the RSO. A complete list of Puerto Rican employees that pass the test, including a permanent RSO, will be added to our license at a later time.

If at all possible, please notify me or our Quality Assurance Supervisor in Puerto Rico, Luis Maldonado by phone as soon as our license is approved. The phone number is (809)826-3131.

If you have any questions or problems regarding this application, please call me. I will be at our Irvine California location until Wednesday, October 16.

Thank you for your assistance.

Sincerely yours, Jack Dowin

Jack Sowin Engineer

50749 231028943

85-12+365+1 -P

JS/js

NRC FORM 313 (1-84) 10 CFR 30, 32, 33, 34, 35 and 40 APPLICATION	U.S. NUCLEAR REGULATORY COMMISSION APPROVED BY OMB 3150-0120 Expire: 5-31-87
INSTRUCTIONS: SEE THE APPROPRIATE LICENSE APPLICATION GUID OF THE ENTIRE COMPLETED APPLICATION TO THE NRC OFFICE SPEC	DE FOR DETAILED INSTRUCTIONS FOR COMPLETING APPLICATION. SEND TWO COPIES CIFIED BELOW.
FEDERAL AGENCIES FILE APPLICATIONS WITH:	IF YOU ARE LOCATED IN:
U.S. NUCLEAR REGULATORY COMMISSION DIVISION OF FUEL CYCLE AND MATERIAL SAFETY, NMSS WASHINGTON, DC 20555	ILLINOIS, INDIANA, IOWA, MICHIGAN, MINNESOTA, MISSOURI, OHIO, OR WISCONSIN, SEND APPLICATIONS TO:
ALL OTHER PERSONS FILE APPLICATIONS AS FOLLOWS, IF YOU ARE LOCATED IN:	U.S. NUCLEAR REGULATORY COMMISSION, REGION III MATERIALS LICENSING SECTION 799 ROOSEVELT ROAD GLEN ELLYN, IL 60137
CONNECTICUT, DELAWARE, DISTRICT OF COLUMBIA, MAINE, MARYLAND, MASSACHUSETTS, NEW JERSEY, NEW YORK, PENNSYLVANIA, RHODE ISLAND, OR VERMONT, SEND APPLICATIONS TO:	ARKANSAS, COLORADO, IDAHO, KANSAS, LOUISIANA, MONTANA, NEBRASKA, NEW MEXICO, NORTH DAKOTA, OKLAHOMA, SOUTH DAKOTA, TEXAS, UTAH,
U.S. NUCLEAR REGULATORY COMMISSION, REGION I NUCLEAR MATERIAL SECTION B 631 PARK AVENUE KING OF PRUSSIA, PA 19406	OR WYOMING, SEND APPLICATIONS TO: U.S. NUCLEAR REGULATORY COMMISSION, REGION IV MATERIAL RADIATION PROTECTION SECTION 611 RYAN PLAZA DRIVE, SUITE 1300 ARLINGTON, TX. 76011
ALABAMA, FLORIDA, GEORGIA, KENTUCKY, MISSISSIPPI, NORTH CAROLINA, PUERTO RICO, SOUTH CAROLINA, TENNESSEE, VIRGINIA, VIRGIN ISLANDS, OR WEST VIRGINIA, SEND APPLICATIONS TO:	ALASKA, ARIZONA, CALIFORNIA, HAWAII, NEVADA, OREGON, WASHINGTON, AND U.S. TERRITORIES AND POSSESSIONS IN THE PACIFIC, SEND APPLICATIONS
U.S. NUCLEAR REGULATORY COMMISSION, REGION II MATERIAL RADIATION PROTECTION SECTION 101 MARIETTA STREET, SUITE 2900 ATLANTA, GA 30323	TO: U.S. NUCLEAR REGULATORY COMMISSION, REGION V MATERIAL RADIATION PROTECTION SECTION 1450 MARIA LANE, SUITE 210 WALNUT CREEK, CA. 94596
PERSONS LOCATED IN AGREEMENT STATES SEND APPLICATIONS TO THE U.S. A IN STATES SUBJECT TO U.S. NUCLEAR REGULATORY COMMISSION JURISDICTIC	I NUCLEAR REGULATORY COMMISSION ONLY IF THEY WISH TO POSSESS AND USE LICENSED MATERIAL ON.
1. THIS IS AN APPLICATION FOR (Check appropriate item)	2. NAME AND MAILING ADDRESS OF APPLICANT (Include Zip Code)
X A. NEW LICENSE	American Bentley
B. AMENDMENT TO LICENSE NUMBER	17502 Armstrong Ave.
C. RENEWAL OF LICENSE NUMBER	Irvine, CA 92714
3. ADDRESSIESI WHERE LICENSED MATERIAL WILL BE USED OR POSSESSED.	
Bentley AHS Del Caribe Km. 1.4, State Road 402 Anasco, Puerto Rico 00610	P.O. Box 1577 Phone (809) 826-3131
4. NAME OF PERSON TO BE CONTACTED ABOUT THIS APPLICATION	TELEPHONE NUMBER
Jack P. Sowin Quality Assura	ance Engineer (714) 261-8363
SUBMIT ITEMS 5 THROUGH 11 ON 8% x 11" PAPER. THE TYPE AND SCOPE OF IN	FORMATION TO BE PROVIDED IS DESCRIBED IN THE LICENSE APPLICATION GUIDE.
<ol> <li>RADIOACTIVE MATERIAL         a. Element and mass number, b. chemical and/or physical form, and c. maximum am which will be possessed at any one time.     </li> </ol>	nount 6. PURPOSEISI FOR WHICH LICENSED MATERIAL WILL BE USED.
7. INDIVIDUAL(S) RESPONSIBLE FOR RADIATION SAFETY PROGRAM AND THEI TRAINING AND EXPERIENCE.	IR 8. TRAINING FOR INDIVIDUALS WORKING IN OR FREQUENTING RESTRICTED AREAS.
9. FACILITIES AND EQUIPMENT.	10. RADIATION SAFETY PROGRAM
11. WASTE MANAGEMENT.	12. LICENSEE FEES IS IN CFR 170 and Section 170.31
BINDING UPON THE APPLICANT THE APPLICANT AND ANY OFFICIAL EXECUTING THIS CERTIFICATION ON I PREPARED IN CONFORMITY WITH TITLE 10, CODE OF FEDERAL REGULATION IS TRUE AND CORRECT TO THE BEST OF THEIR KNOWLEDGE AND BELIEF	ANDS THAT ALL STATEMENTS AND REPRESENTATIONS MADE IN THIS APPLICATION ARE BEHALF OF THE APPLICANT, NAMED IN ITEM 2, CERTIFY THAT THIS APPLICATION IS ONS. PARTS 30, 32, 33, 34, 35, AND 40 AND THAT ALL INFORMATION CONTAINED HEREIN, KES IT A CRIMINAL OFFENSE TO MAKE A WILLFULLY FALSE STATEMENT OR REPRESENTATION ITTER WITHIN ITS JURISDICTION.
SIGNATURE-CERTIFYING OFFICER TYPED/PRINTED NAME Jack P. SO	
s. ANNUAL RECEIPTS b. NUMBER OF EMPLOYEES (Tota) for <\$250K \$1M-3.5M entire facility excluding outside contr \$250K 500K \$3.5M-7M	
\$500K - 750K \$7M - 10M C. NUMBER OF BEDS	
\$750K-1M >\$10M	
TYPE OF FEE FEE LOG FEE CATEGORY COMMENTS	
AMOUNT RECEIVED CHECK NUMBER R 2 3 0 0 (9989	10/8/85

STREET OF STREET, STRE	and the second	Concernance of the local division of the loc	the second s	Contraction of the local division of	NUMBER OF TAXABLE PARTY.
PRIVACY	ACT	STAT	EMENT	ON THE	REVERSE

### SUPPLEMENTAL INFORMATION American Bentley

- 5. a) Iodine 125
  - b) Solid, Sealed Source LIXI Scope Model LS- with AECL C-324 or Amersham IMC P2.
  - c) 500 mci per source, maximum possession will be two sources per LIXI Scope. We presently have two LIXI Scopes.
- 6. The LIXI Scope will be used for non-destructive x-ray inspection of manufactured medical products. It will be the responsibility of the RSO or the Assistant RSO to train the inspectors or assemblers in the safe handling procedures of the LIXI Scope which will be used under the supervision of the RSO or the Assistant.
- Jack Sowin RSO, Quality Assurance Engineer. Kathleen Shaw - Assistant RSO, Inspector. Kathleen Monday - Inspector. Francis Roustan - Inspector.

All of the above individuals have completed the LIXI Radiation Safety Training Course. Their certificates are attached along with a resume of their education and work experience.

- Not applicable there are no restricted areas with the use of the LIXI Scope.
- 9. Facility sketch and equipment description are attached.
- 10. The Radiation Protection Program is attached.
- 11. All spent or depleted radiation sources will be returned to the manufacturer (LIXI) for disposal.

#### FACILITIES AND EQUIPMENT

#### Ref: NRC 313

Item 9

#### Storage Facilities

The LIXI scope(s) defined in this application will be kept locked in their individual carrying cases (marked with "Caution Radioactive Material" labels), when not in use and stored in the area as shown on the attached sketch. This is a locked and secured area at the licensee's address. When the LIXI scope is in transit to temporary job sites, in the main plant area of our building, the LIXI scope will be kept locked in its individual carrying case and under the supervision of the licensed users listed herein, until it is returned to the above designated storage area. LIXI scopes must be signed out and in by each licensed user so the location of the device(s) is accounted for at all times. The Radiation Safety Officer is responsible for these records being maintained on a current and complete basis and available for inspection at any time.

#### Containers and Special Shielding

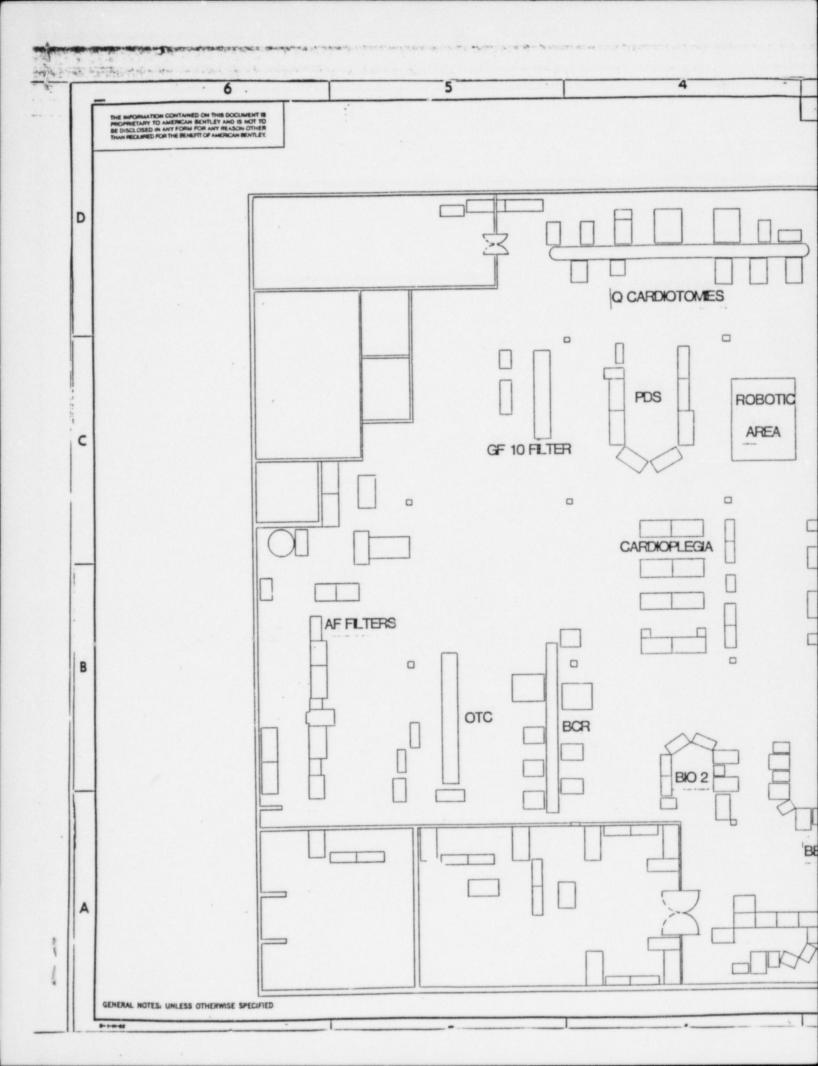
The LIXI scope is a self shielded device and there is no radiation above normal background (about 0.05 mR/hr when the LIXI scope is in its carrying case. The primary concerns are that the device must only be used by, or under the direct supervision of, trained and licensed users and that the LIXI scope be accounted for and <u>secured at all times to prevent any unautn-</u> orized use, loss or theft of the device.

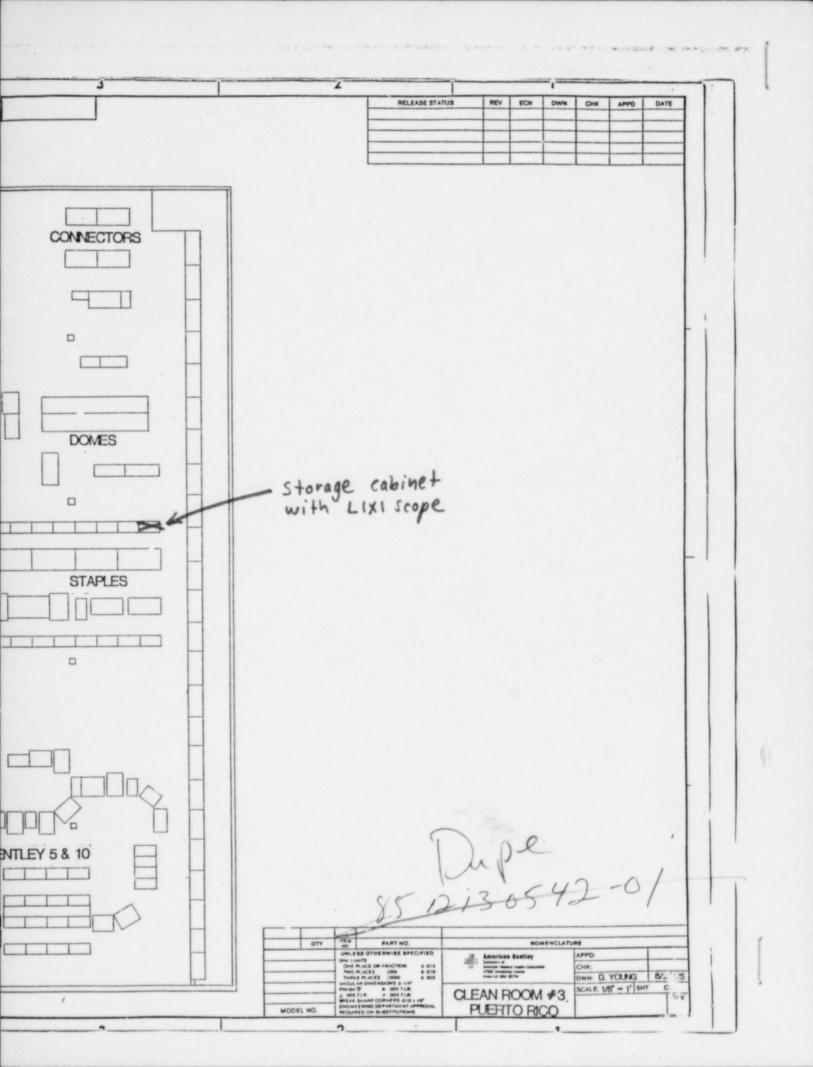
#### Remote Handling Equipment and Safety Procedures

The LIXI scope Instruction Manual directions will be followed. Remote handling devices, such as tongs or forceps, will be used when indicated to avoid any licensed user from ever placing their hands in the LIXI scope radiation beam.

Survey measurements are taken by the manufacturer (Lixi, Inc.) prior to shipment. When shipped by the manufacturer, NO UNIT EXCEEDS 0.5 mR/hr at surface, therefore no radiation detection instruments are necessary. Also personnel monitoring devices (ring badges) are not necessary. In spite of this, for additional safety, we will be implementing a monitoring system with badges in the near future.

The LIXI scope is classified as Radioactive Material Instrument and Articles UN2911 per 49 CFR 173.422, 173.424. It is therefore exempt from labeling and marking requirements. We will follow the manufacturers instructions for recurn shipments of isotopes.





This is to certify that \_\_\_\_\_ Jack Sowin

has completed the LIXITM Radiation Safety Training Course on file with the U.S. Nuclear Regulatory Commission.

This training was completed on: \_\_\_\_ August 28, 1985

This training course was developed by Lixi, Inc. and S.A. Huber Consultants Inc. for the purpose of providing the necessary training in radiation safety and experience for LIXITM scope users. The training was given as approved by the NRC under License Nos. 12-17503-01 and 12-18215-01.

This also certifies that the trainee has personally operated a working LIXITM scope, under supervision, in the aforementioned course.

A copy of this certificate is to be provided to the NRC or Agreement State as proof that the trainee has the necessary experience to make a specific application for a Byproduct Material License to possess and use a LIXITM scope.

This document was prepared in conformity with Title 10, Code of Federal Regulations, and all information contained herein is true and correct to the best of our knowledge and belief.

Certified by:	Lixi, Inc.
Instructor:	Jeff Gipe
Signature: Under License No: _	Bipe
Under License No: _	12-18215-01
Date:	August 29, 1985

P.01

Radiologic Health Branch 744 P Street Sacramento, California 95814

# STATEMENT OF TRAINING AND EXPERIENCE

(Use additional sheets as necessary)

Instruction: Every individual proposing to use radioactive material is required to submit a Statement of Training and Experience in duplicate to the address given above. Physicians should request Form RH 2000 A when applying for human use authorizations.

1.	Name of proposed user: Jack Sowin	Position title: QA Engineer
	Address: 89 Greenfield	City: Irvine CA Zip: 92714
	To be included on Lic. No in name of	American Bentley

2. Description of proposed use

Use the LIXI Scope (model # LS-82-102) for non-destructive x-ray inspection of medical products.

- 3. Training:
  - a. High School Graduate: Yes V No\_\_\_\_
  - b. College or University: Name and location <u>California State Polytechnic Univ.</u>, <u>Pomona</u> Years completed <u>4</u> Degree <u>BS</u> Course of study <u>Electronic & Computer Engr</u>.
  - c. Education specifically applicable to use of radioactive material Completed the LIXI training course.

4 Experience

to Pres will Use	the equipment to inspect
and line	the equipment to inspect
will use	the equipment to inspect
inspectors	on its use for inspection,
leyAdd	ress: 17502 Armstrong Ave.
to	on its use for inspection, ress: 17502 Armstrong Ave. Irvine, CA 92714 (714)261-836
Add	tess:
to	
	Add to

b. Radioactive materials previously used. Cite typical radioisotopes in appropriate box and key t Part 4.a above:

	Microcuries	Millicuries	Curies	Kilocuries
Sealed sources		Iodiue 125		
Unsealed alpha emitters				
Unsealed beta- gamma emitters				
Neutron sources				

### Quantities Handled

c. Describe procedures similar to those proposed in Part 2 with which you have had experience. Indicate months or years for each and key to Part 4.a above.

d. Indicate which types of facilities you have used and key to Part 4.a.

- () Ordinary Chemical laboratories
- () "Controlled Area" (Type B) laboratories
- () Glove boxes
- () Shielded glove boxes
- () Caves with remote manipulators
- Field operations with portable equipment In House
- 5. Certificate:

I hereby certify that all information contained in this Statement is true and correct.

Signature of proposed user 10/2/85

This is to certify that \_\_\_\_\_Kathleen Shaw

has completed the LIXITE Radiation Safety Training Course on file with the U.S. Nuclear Regulatory Commission.

This training was completed on: August 12, 1985

This training course was developed by Lixi, Inc. and S.A. Huber Consultants Inc. for the purpose of providing the necessary training in radiation safety and experience for LIXI<sup>TM</sup> scope users. The training was given as approved by the NRC under License Nos. 12-17503-01 and 12-18215-01.

This also certifies that the trainee has personally operated a working LIXI<sup>TM</sup> scope, under supervision, in the aforementioned course.

A copy of this certificate is to be provided to the NRC or Agreement State as proof that the trainee has the necessary experience to make a specific application for a Byproduct Material License to possess and use a LIXI<sup>TM</sup> scope.

This document was prepared in conformity with Title 10, Code of Federal Regulations, and all information contained herein is true and correct to the best of our knowledge and belief.

Certified by:	Lixi, Inc.	
Instructor:	Jeff Gipe	
Signature:	4 Min 12-18215-01	
Under License N	0:	
Date:	August 29, 1985	

P.02

Radiologic Health Branch 744 P Street Sacramento, California 95814

# STATEMENT OF TRAINING AND EXPERIENCE

(Use additional sheets as necessary)

Instruction: Every individual proposing to use radioactive material is required to submit a Statement of Training and Experience in duplicate to the address given above. Physicians should request Form RH 2000 A when applying for human use authorizations.

- 1. Name of proposed user: <u>KAH Leen A Shaw</u> Position title: QA Inspector Address: <u>2080 Newport Blud # 106</u> City: <u>Costa Mesa CA Zip</u>: <u>926</u> To be included on Lic. No.\_\_\_\_\_ in name of <u>American Bertley</u>
- 2. Description of proposed use Use the Lixi scope (mater + 15-82-102) FOR NON-distructive X-RAY Inspection of medical products
- 3. Training:
  - a. High School Graduate: Yes No\_\_\_\_\_
  - b. College or University: Name and location\_\_\_\_\_ Years completed\_\_\_\_\_ Degree\_\_\_\_ Course of study\_\_\_\_\_
  - c. Education specifically applicable to use of radioactive material Completed the Lixi training Course

Experience: 4.

a. List experience with radioactivity beginning with most recent

(1) Dates: From <u>2185</u>	D. I will use the equiptoient to inspect
product and thein	inspectors units use for Inspector
Employer: American P	Entley Address: 17202 Almstrong Indian CA 92
(2) Dates: From	to
Title and duties:	
	Address:
Employer:	
Employer: (3) Dates: From	Address:

Radioactive materials previously used. Cite typical radioisotopes in appropriate box and key to b. Part 4.a above:

	Microcuries	Millicuries	Curies	Kilocuries
Sealed sources		Icdine		
Unsealed alpha emitters				
Unsealed beta- gamma emitters				
Neutron sources				

Quantities Handled

Describe procedures similar to those proposed in Part 2 with which you have had experience. C. Indicate months or years for each and key to Part 4.a above.

d. Indicate which types of facilities you have used and key to Part 4.a.

- () Ordinary Chemical laboratories
- () "Controlled Area" (Type B) laboratories
- () Glove boxes
- () Shielded glove boxes
- () Caves with remote manipulators
- (>) Field operations with portable equipment Inlicuse

# 5. Certificate:

I hereby certify that all information contained in this Statement is true and correct.

Signature of proposed user Date

- 2 -

This is to certify that \_\_\_\_\_ Kathy Monday

has completed the LIXI<sup>12</sup> Radiation Safety Training Course on file with the U.S. Nuclear Regulatory Commission.

This training was completed on: \_\_\_\_\_ August 12, 1985

This training course was developed by Lixi, Inc. and S.A. Huber Consultants Inc. for the purpose of providing the necessary training in radiation safety and experience for LIXI™ scope users. The training was given as approved by the NRC under License Nos. 12-17503-01 and 12-18215-01.

This also certifies that the trainee has personally operated a working LIXI<sup>TM</sup> scope, under supervision, in the aforementioned course.

A copy of this certificate is to be provided to the NRC or Agreement State as proof that the trainee has the necessary experience to make a specific application for a Byproduct Material License to possess and use a LIXI<sup>TM</sup> scope.

This document was prepared in conformity with Title 10, Code of Federal Regulations, and all information contained herein is true and correct to the best of our knowledge and belief.

Certified by:	Lixi, Inc.	
Instructor:	Jeff Gipe	
	12-18215-01	
Under License N	No: 12-18215-01	
Data	August 29, 1985	

Radiologic Fealth Branch 744 P Street Sacramento, California 95814

# STATEMENT OF TRAINING AND EXPERIENCE

(Use additional sheets as necessary)

Instruction: Every individual proposing to use radioactive material is required to submit a Statement of Training and Experience in duplicate to the address given above. Physicians should request Form RH 2000 A when applying for human use authorizations.

1.	Name of proposed user: Batch	* Monic	ka z	_ Position title:	A. INSPector
	Address: 1.5529 (2).1110	2m5 # 110	City:	TUSTIN	Zip: 22647
	To be included on Lic. No	in name of	AMe.rica	N Bentley	

2. Description of proposed use

Use the Lixi Scope (model # LS-82-102) for NON-destructive X-ray inspection of medical products.

- 3. Training:
  - High School Graduate: Yes \_ No \_\_\_\_ a.
  - b. College or University: Name and location Rancho Santiago, SANTA ANG Years completed\_2\_ Degree\_\_\_\_ Course of study AJ. Corrections
  - c. Education specifically applicable to use of radioactive material

Completed the Lix: training course

#### 4. Experience:

a. List experience with radioactivity beginning with most recent

(3) Dates: From	to	-
	to	
Title and duties: USCF	I will use the Bentley Address: 17502	Almstrony Truine, Ca (714) 261-8363

b. Radioactive materials previously used. Cite typical radioisotopes in appropriate box and key t Part 4.a above:

	Microcuries	Millicuries	Curies	Kilocuries
Sealed sources		Icoine 125		
Unsealed alpha emitters				
Unsealed beta- gamma emitters				
Neutron sources				

### Quantities Handled

c. Describe procedures similar to those proposed in Part 2 with which you have had experience. Indicate months or years for each and key to Part 4.a above.

- d. Indicate which types of facilities you have used and key to Part 4.a.
  - () Ordinary Chemical laboratories
  - () "Controlled Area" (Type B) laboratories
  - () Glove boxes
  - () Shielded glove boxes
  - () Caves with remote manipulators
  - S Field operations with portable equipment
- 5. Certificate:

I hereby certify that all information contained in this Statement is true and correct.

Kathy Monday Signature of proposed user Date

This is to certify that \_\_\_\_\_ Frances Roustan

has completed the LIXIT Radiation Safety Training Course on file with the U.S. Nuclear Regulatory Commission.

This training was completed on: August 28, 1985

This training course was developed by Lixi, Inc. and S.A. Huber Consultants Inc. for the purpose of providing the necessary training in radiation safety and experience for LIXI<sup>TM</sup> scope users. The training was given as approved by the NRC under License Nos. 12-17503-01 and 12-18215-01.

This also certifies that the trainee has personally operated a working LIXITE scope, under supervision, in the aforementioned course.

A copy of this certificate is to be provided to the NRC or Agreement State as proof that the trainee has the necessary experience to make a specific application for a Byproduct Material License to possess and use a LIXI<sup>TM</sup> scope.

This document was prepared in conformity with Title 10, Code of Federal Regulations, and all information contained herein is true and correct to the best of our knowledge and belief.

Certified by:	Lixi, Inc.	
Instructor:	Jeff Gipe	
Signature:	12-18215-01	
Under License No	12-18215-01	
Date:	August 29, 1985	

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Radiologic Health Branch 744 F Street Sacramento, California 95814

# STATEMENT OF TRAINING AND EXPERIENCE

(Use additional sheets as necessary)

Instruction: Every individual proposing to use radioactive material is required to submit a Statement of Training and Experience in duplicate to the address given above. Physicians should request Form RH 2000 A when applying for human use authorizations.

1.	Name of proposed user: <u>hances &amp; Roustan</u> Position title: <u>Q.A. Inspector</u> Address: <u>2318 Irangen</u> City: <u>Sinta ana, Calip.</u> Zip: <u>92705</u> To be included on Lic. No in name of <u>American Bentley</u>
2.	Description of proposed use Use the LIXI Scope for X. Ray inspection of medical Croduct
3.	Training: a. High School Graduate: Yes <u>No</u> b. College or University: Name and location Years completed <u>Degree</u> Course of study c. Education specifically applicable to use of radioactive material Completed ATXJ training Course
4.	Experience: a. List experience with radioactivity beginning with most recent (1) Dates: From <u>8/85</u> to <u>present</u> Title duties: <u>Inspector</u> , <u>Inspect medical product</u> . Employer <u>Generican Bentley</u> Address: <u>17502</u> <u>Armstrong</u> , <u>Instead</u> , <u>Lak</u> (2) Dates: From <u>8-2-74</u> to <u>present</u> . Title and duties: <u>Inspector</u> (3) Dates: From to
	Employer:Address:

b. Radioactive materials previously used. Cite typical radioisotopes in appropriate box and key t. Part 4.a above:

	Microcuries	Millicuries	Curies	Kilocuries
Sealed sources		Indine		
Unsealed alpha emitters				
Unsealed beta- gamma emitters				
Neutron sources				

# Quantities Handled

c. Describe procedures similar to those proposed in Part 2 with which you have had experience. Indicate months or years for each and key to Part 4.a above.

d. Indicate which types of facilities you have used and key to Part 4.a.

- () Ordinary Chemical laboratories
- () "Controlled Area" (Type B) laboratories
- () Glove boxes
- () Shielded glove boxes
- () Caves with remote manipulators
- Field operations with portable equipment
- 5. Certificate:

I hereby certify that all information contained in this Statement is true and correct.

Trances 10/2 Signature of proposed user