APR 1 1986

Mercy-Memorial Medical Center, Inc.
Radiation Oncology Department
ATTN: Dandala S. Reddy, Ph.D.
960 Agard Street
Benton Harbor, MI 49022

License No. 21-03280-01
License No. 21-03280-02

Dear Dr. Reddy:

We have received your response dated March 18, 1986 and have the following comments:

The documents you have forwarded to us describing Dr. Iqbal's training appear to be approvals by the Mount Sinai Medical Center Radiation Safety/Radionuclides Committee. Be advised that this licensee is not a type A broad scope facility as defined in 10 CFR Part 33 (enclosed) and as such must have its authorized users specifically named on its NRC licenses. Dr. Iqbal is not so named. Moreover, we are uncertain as to whether Dr. Iqbal is board certified. As you may know, NRC's Advisory Committee on the Medical Uses of Isotopes (ACMUI) has advised us that certification by the American Board of Radiology (ABR) in Radiology or Therapeutic Radiology is evidence of adequate training and experience. It appears that Dr. Iqbal is not so certified; thus, we will need additional documentation of his training and experience. Specifically, we need the following:

a. Please submit evidence that Dr. Iqbal is a physician as defined in 10 CFR 35.3(b), copy enclosed.

b. Please submit a completed Supplement A, Form NRC-313M, documenting Dr. Iqbal's training in basic radioisotope handling techniques and experience handling radioactive materials.

c. Please submit a completed, Supplement B, Form NRC-313M, documenting at least 3 years of full-time experience in therapeutic radiology. Separate Supplement B forms should be submitted to document training and/or experience received at different institutions or under the supervision of different preceptor-physicians. Be sure to document training and experience with all types of teletherapy treatment and with brachytherapy treatment as well.

d. Please submit letters of reference from each physician under whom Dr. Iqbal received training and/or experience. Each letter should describe the scope and extent of Dr. Iqbal's training and experience (as known by the preceptor-physician) and should provide the preceptor-physician's evaluation of Dr. Iqbal's competency to use, independently, brachytherapy and/or teletherapy sources for treatment of patients.

e. Please describe Dr. Iqbal's status with ABR, including such information as whether the examination process has been started, whether the written and/or oral examinations have been taken, the results of these examinations, and the date by which the examination process is expected to have been completed.

We will continue our review of your application upon receipt of this information. Please reply in duplicate, within 30 days, and refer to Control Numbers 19480 and 19491.

Sincerely,

Original Signed By
William J. Adam, Ph.D.
Materials Licensing Section

Enclosures:
1. Preceptor Package
2. 10 CFR Parts 33 and 35

RIII
WJG
Adam/cm
4/1/86

RIII
BSM
4/1