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U.S. NUCLEAR REGULATORY COMMISSION  
APPROVED BY OMB  
3150-0120  
Expires: 5-31-87

NRC FORM 313  
(9-85)  
10 CFR 30, 32, 33, 34  
35 and 40

APPLICATION FOR MATERIAL LICENSE

(Grandfathered human use 10 CFR 35.31 general license that expired March 31, 1987)

INSTRUCTIONS: SEE THE APPROPRIATE LICENSE APPLICATION GUIDE FOR DETAILED INSTRUCTIONS FOR COMPLETING APPLICATION. SEND TWO COPIES OF THE ENTIRE COMPLETED APPLICATION TO THE NRC OFFICE SPECIFIED BELOW.

FEDERAL AGENCIES FILE APPLICATIONS WITH:

U.S. NUCLEAR REGULATORY COMMISSION  
DIVISION OF FUEL CYCLE AND MATERIAL SAFETY, NMSS  
WASHINGTON, DC 20545

ALL OTHER PERSONS FILE APPLICATIONS AS FOLLOWS, IF YOU ARE LOCATED IN:

CONNECTICUT, DELAWARE, DISTRICT OF COLUMBIA, MAINE, MARYLAND, MASSACHUSETTS, NEW HAMPSHIRE, NEW JERSEY, NEW YORK, PENNELVANIA, RHODE ISLAND, OR VERMONT. SEND APPLICATIONS TO:

U.S. NUCLEAR REGULATORY COMMISSION, REGION I  
NUCLEAR MATERIAL SECTION B  
631 PARK AVENUE  
KING OF PRUSSIA, PA 19406

ALABAMA, FLORIDA, GEORGIA, KENTUCKY, MISSISSIPPI, NORTH CAROLINA, PUERTO RICO, SOUTH CAROLINA, TENNESSEE, VIRGINIA, VIRGIN ISLANDS, OR WEST VIRGINIA, SEND APPLICATIONS TO:

U.S. NUCLEAR REGULATORY COMMISSION, REGION II  
MATERIAL RADIATION PROTECTION SECTION  
101 MARIETTA STREET, SUITE 2900  
ATLANTA, GA 30323

IF YOU ARE LOCATED IN:

ILLINOIS, INDIANA, IOWA, MICHIGAN, MINNESOTA, MISSOURI, OHIO, OR WISCONSIN, SEND APPLICATIONS TO:

U.S. NUCLEAR REGULATORY COMMISSION, REGION III  
MATERIAL LICENSING SECTION  
799 ROOSEVELT ROAD  
GLEN ELLYN, IL 60137

ARKANSAS, COLORADO, IDAHO, KANSAS, LOUISIANA, MONTANA, NEBRASKA, NEW MEXICO, NORTH DAKOTA, OKLAHOMA, SOUTH DAKOTA, TEXAS, UT/ H, OR WYOMING, SEND APPLICATIONS TO:

U.S. NUCLEAR REGULATORY COMMISSION, REGION IV  
MATERIAL RADIATION PROTECTION SECTION  
611 RYAN PLAZA DRIVE, SUITE 1000  
ARLINGTON, TX 76011

ALASKA, ARIZONA, CALIFORNIA, HAWAII, NEVADA, OREGON, WASHINGTON, AND U.S. TERRITORIES AND POSSESSIONS IN THE PACIFIC, SEND APPLICATIONS 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. NUCLEAR REGULATORY COMMISSION ONLY IF THEY WISH TO POSSESS AND USE LICENSED MATERIAL IN STATES SUBJECT TO U.S. NUCLEAR REGULATORY COMMISSION JURISDICTION.

1. THIS IS AN APPLICATION FOR (Check appropriate item)

- A. NEW LICENSE  
 B. AMENDMENT TO LICENSE NUMBER \_\_\_\_\_  
 C. RENEWAL OF LICENSE NUMBER \_\_\_\_\_

2. NAME AND MAILING ADDRESS OF APPLICANT (Include Zip Code)

John M. GRZYBOWSKI M.D.  
PATHOLOGY IOWA LUTHERAN HOSP  
DES MOINES, IA 50316

3. ADDRESS(ES) WHERE LICENSED MATERIAL WILL BE USED OR POSSESSED

IA. LUTHERAN HOSP. PATHOLOGY LAB  
UNIV. AT PENN. AVES  
DES MOINES IA 50316

4. NAME OF PERSON TO BE CONTACTED ABOUT THIS APPLICATION

John M. GRZYBOWSKI M.D.

TELEPHONE NUMBER

515-263-5606

SUBMIT ITEMS 5 THROUGH 11 ON 8 1/2" PAPER. THE TYPE AND SCOPE OF INFORMATION TO BE PROVIDED IS DESCRIBED IN THE LICENSE APPLICATION GUIDE.

5. RADIOACTIVE MATERIAL

a. Element and mass number, b. chemical and/or physical form, and c. maximum amount which will be possessed at any one time see ATT 5.

6. PURPOSE(S) FOR WHICH LICENSED MATERIAL WILL BE USED see ATT 6.

7. INDIVIDUAL(S) RESPONSIBLE FOR RADIATION SAFETY PROGRAM AND THEIR TRAINING AND EXPERIENCE see ATT 7.

8. TRAINING FOR INDIVIDUALS WORKING IN OR FREQUENTING RESTRICTED AREAS see ATT 8.

9. FACILITIES AND EQUIPMENT see ATT 9.

10. RADIATION SAFETY PROGRAM see ATT 10.

11. WASTE MANAGEMENT see ATT 11.

12. LICENSEE FEES (See 10 CFR 170 and Section 170.31)

FEE CATEGORY exempt AMOUNT ENCLOSED \$0.00

13. CERTIFICATION (Must be completed by applicant) THE APPLICANT UNDERSTANDS THAT ALL STATEMENTS AND REPRESENTATIONS MADE IN THIS APPLICATION ARE BINDING UPON THE APPLICANT.

THE APPLICANT AND ANY OFFICIAL EXECUTING THIS CERTIFICATION ON BEHALF OF THE APPLICANT, NAMED IN ITEM 2, CERTIFY THAT THIS APPLICATION IS PREPARED IN CONFORMITY WITH TITLE 10, CODE OF FEDERAL REGULATIONS, PARTS 30, 32, 33, 34, 35, AND 40 AND THAT ALL INFORMATION CONTAINED HEREIN, IS TRUE AND CORRECT TO THE BEST OF THEIR KNOWLEDGE AND BELIEF.

WARNING: 18 U.S.C. SECTION 1001 ACT OF JUNE 25, 1948, 62 STAT. 749 MAKES IT A CRIMINAL OFFENSE TO MAKE A WILLFULLY FALSE STATEMENT OR REPRESENTATION TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES AS TO ANY MATTER WITHIN ITS JURISDICTION.

SIGNATURE—CERTIFYING OFFICER

TYPED/PRINTED NAME

TITLE

DATE

J M Grzybowski

J.M. GRZYBOWSKI

PATHOLOGIST

5-6-87

14. VOLUNTARY ECONOMIC DATA

a. ANNUAL RECEIPTS

< \$250K	\$1M-3.5M
\$250K-500K	\$3.5M-7M
\$500K-750K	\$7M-10M
\$750K-1M	> \$10M

b. NUMBER OF EMPLOYEES (Total for entire facility excluding outside contractors)

c. NUMBER OF BEDS

d. WOULD YOU BE WILLING TO FURNISH COST INFORMATION (Salary and/or staff hours) ON THE ECONOMIC IMPACT OF CURRENT NRC REGULATIONS OR ANY FUTURE PROPOSED NRC REGULATIONS THAT MAY AFFECT YOU? (NRC regulations permit it to protect confidential commercial or financial—proprietary—information furnished to the agency in confidence)

YES

NO

FOR NRC USE ONLY

TYPE OF FEE

FEE LOG

FEE CATEGORY

COMMENTS

APPROVED BY

AMOUNT RECEIVED

CHECK NUMBER

DATE

RECEIVED

MAY 11 1987

MAY 11 1987

8706050058 870528  
REG3 LIC30

PDR

REGION III

ATT 5.

A. Iodine-131	A. Sodium iodide	A. and B. 200 microcuries:	:
B. Iodine-131	B. Iodinated human serum albumin		:
C. Iodine-125	C. Iodinated human serum albumin	C. 200 microcuries	:
D. Cobalt-58	D. Cyanocobalamin	D. 5 microcuries	:
E. Cobalt-60	E. Cyanocobalamin	E. 5 microcuries	:
F. Chromium-51	F. Sodium chromate	F. 200 microcuries	:

ATT 6.

A. Measurement of thyroid uptake	:
B. Determinations of blood and blood plasma volume	:
C. Determinations of blood and blood plasma volume	:
D. Measurement of intestinal absorption of cyanocobalamin	:
E. Measurement of intestinal absorption of cyanocobalamin	:
F. Determination of red blood cell volumes and studies of red blood cell survival time.	:

ATT 7. I will be personally responsible for the radiation safety program. I am a licensed physician authorized to dispense drugs in the practice of medicine, and have had training and experience in the use of the instruments that will be used to perform clinical procedures.

ATT 8. Not applicable

ATT 9. I have on hand the appropriate radiation measuring instruments needed to carry out the clinical procedures that will be performed under this license.

ATT 10. Not applicable

ATT 11. Not applicable.