

**Parkview Hospital**  
An osteopathic institution

1920 Parkwood Ave./Toledo, Ohio 43624 / (419) 242-8471

March 26, 1987

United States Nuclear Regulatory Commission  
Region III  
Materials Licensing Branch  
799 Roosevelt  
Glen Ellyn, IL 60137

Gentlemen:

Please amend our by-product materials license 34-13273-01 to allow Bob F. Klingelheber, D.O., to be an authorized user of the following materials:

- Groups I, II, and III
- Zenon-133
- Iodine-131 as sodium iodide for treatment of hyperthyroidism.

Enclosed please find his NRC Form 313M Supplements A and B, and payment of \$120 for the amendment.

If you have any questions concerning this amendment request, please contact our consultant, Jim Tomlinson, at (313) 662-3197.

Sincerely,

*James C. Gwyn*

James C. Gwyn  
Administrator  
Parkview Hospital

JCG/clw

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TRAINING AND EXPERIENCE  
AUTHORIZED USER OR RADIATION SAFETY OFFICER

1. NAME OF AUTHORIZED USER OR RADIATION SAFETY OFFICER Bob F. Klingelheber, D.O.		2. STATE OR TERRITORY IN WHICH LICENSED TO PRACTICE MEDICINE Ohio	
3. CERTIFICATION			
SPECIALTY BOARD A	CATEGORY B	MONTH AND YEAR CERTIFIED C	
American Osteopathic Board of Radiology	Radiology	July 1986	
4. TRAINING RECEIVED IN BASIC RADIOISOTOPE HANDLING TECHNIQUES			
FIELD OF TRAINING A	LOCATION AND DATE(S) OF TRAINING B	TYPE AND LENGTH OF TRAINING	
		LECTURE/ LABORATORY COURSES (Hours) C	SUPERVISED LABORATORY EXPERIENCE (Hours) D
a. RADIATION PHYSICS AND INSTRUMENTATION	Lect: Wm. Beaumont Hosp. Royal Oak, Mi. 9/83-8/84 Lab: Wm. Beaumont Hosp. 10/19/83-10/21/83	100	16
b. RADIATION PROTECTION	Lect: Wm. Beaumont Hosp. 9/83-8/84 Lab: Wm. Beaumont Hosp. 10/19/83-10/21/83	26	4
c. MATHEMATICS PERTAINING TO THE USE AND MEASUREMENT OF RADIOACTIVITY	Lect: Wm. Beaumont Hosp. Royal Oak, Mich. 1/84-6/84	24	
d. RADIATION BIOLOGY	Lect: Wm. Beaumont Hosp. Royal Oak, Mich. 10/83-11/83	20	
e. RADIOPHARMACEUTICAL CHEMISTRY	Lect&Lab: Wm. Beaumont Hosp Royal Oak, Mich. Lect: 10/83-11/83 Lab: 10/26/83-11/27/83	32	15

## 5. EXPERIENCE WITH RADIATION. (Actual use of Radioisotopes or Equivalent Experience)

ISOTOPE	MAXIMUM AMOUNT	WHERE EXPERIENCE WAS GAINED	DURATION OF EXPERIENCE	TYPE OF USE
Cs-137	250uCi	Botsford Gen Hosp	8/2/82-8/1/85	calibration
Ba-133	250uCi	Botsford Gen Hosp	8/2/82-8/1/85	calibration
Co-57	5mCi	Botsford Gen Hosp	8/2/82-8/2/85	calibration
I- 123	100 uCi	Botsford Gen Hosp	8/2/82-8/1/85	diagnostic
I-125	20 uCi	Botsford Gen Hosp	8/2/82-8/1/85	diagnostic
I-131	100 uCi	Botsford Gen Hosp	8/2/82-8/1/85	diagnostic
Xe-133	10mci	Botsford Gen Hosp	8/2/82-8/1/85	diagnostic
Ga 67	4mCi	Botsford Gen Hosp	8/2/82-8/1/85	diagnostic
Tl-201	2mCi	Botsford Gen Hosp	8/2/82-8/1/85	diagnostic

Supplement B must be completed by the applicant physician's preceptor. If more than one preceptor is necessary to document experience, obtain a separate statement from each.

FORM NRC-313M-SUPPLEMENT B  
(8-78)