

APPLICATION FOR MATERIAL LICENSE

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 20555

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, PENNSYLVANIA, 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
MATERIALS LICENSING SECTION
799 ROOSEVELT ROAD
GLEN ELLYN, IL 60137

ARKANSAS, COLORADO, IDAHO, KANSAS, LOUISIANA, MONTANA, NEBRASKA, NEW MEXICO, NORTH DAKOTA, OKLAHOMA, SOUTH DAKOTA, TEXAS, UTAH, 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 18-15127-01

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

Millinocket Regional Hospital
200 Somerset Street
Millinocket, ME 04462

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

SAME

4. NAME OF PERSON TO BE CONTACTED ABOUT THIS APPLICATION

Beverly Mingo, NMT

TELEPHONE NUMBER

(207) 723-5161

SUBMIT ITEMS 5 THROUGH 11 ON 8 1/2 x 11" 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.

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

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

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

9. FACILITIES AND EQUIPMENT.

10. RADIATION SAFETY PROGRAM.

11. WASTE MANAGEMENT.

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

FEE CATEGORY 7 C AMOUNT ENCLOSED \$ 580.00

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 1501 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

Joseph Roach

Chief Executive Officer

15 OCT 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 (Dollar and/or 1001 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 <u>REN</u>	FEE LOG <u>Nov 13</u>	FEE CATEGORY <u>NC</u>
AMOUNT RECEIVED <u>\$580</u>	CHECK NUMBER <u>3992</u>	

COMMENTS
8903140849 880226
REG1 LIC30
18-15127-01 PNU

APPROVED BY

DATE

22 OCT 1987 107969

ITEMS 5 AND 6 (RADIOACTIVE MATERIAL AND PURPOSE)

<u>Byproduct Material</u>	<u>Amount</u>	<u>Purpose</u>
5a. Material in 35.100	As Needed	6a. Medical Use
5b. Material in 35.200	As Needed	6b. Medical Use
5c. I-131 as iodide	As Needed	6c. Treatment of hyperthyroidism and cardiac dysfunction

ITEM 7 (INDIVIDUALS RESPONSIBLE FOR RADIATION SAFETY)

7.1 AUTHORIZED USERS

<u>Physician</u>	<u>Proposed Uses</u>	<u>Documentation</u>
John Y. Connolly, M.D.	5a, 5b	Previously authorized on current license
John Y. Connolly, M.D.	5c	Preceptor statements attached (*).
Rufus Head, M.D.	5a, 5b, 5c	Previously authorized on current license

7.2 NON-MEDICAL USERS

NONE

7.3 RADIATION SAFETY OFFICER

John Y. Connolly, M.D. (Curriculum vitae on file with the NRC under license 18-15127-01)

(*) It should be noted that Dr. Head practices at both the Millinocket Regional Hospital and the Penobscot Valley Hospital. His preceptor statement has the latter address, but all cases were done at the Millinocket Regional Hospital. Additional information concerning Dr. Connolly's training and experience has been filed previously with the Commission under license 18-15127-01.

ITEM 8 (TRAINING)

8.1 TRAINING PROGRAM

We will establish and implement the model training program that was published in Appendix A to Regulatory Guide 10.8, Revision 2, and show below table ATT. 8.1 that identifies the groups of workers who will receive training and the method of training. The frequency of training will be as specified in Appendix A.

TABLE ATT 8.1

<u>Group</u>	<u>Method</u>
Nuclear Medicine Technologists	Lecture by RSO or designee
Housekeeping	Videotape, slide-tape or lecture by RSO or designee
Nursing	Videotape, slide-tape or lecture by RSO or designee
Clerical	Videotape, slide-tape or lecture by RSO or designee

8.2 OTHER TRAINING PROGRAM

NOT APPLICABLE

ITEM 9 (FACILITIES AND EQUIPMENT)

9.1 ANNOTATED DRAWING

See enclosed attachments ATT 9.1 and ATT 9.1a

9.2 SURVEY INSTRUMENT CALIBRATION

We will establish and implement the model procedure for calibrating survey instruments that was published in Appendix B to Regulatory Guide 10.2, Revision 2

9.3 DOSE CALIBRATOR CALIBRATION

We will establish and implement the model procedures for calibrating our dose calibrator that were published in Appendix C to Regulatory Guide 10.8, Revision 2.

9.4 PERSONNEL MONITOR PROGRAM

We will establish and implement the model personnel external exposure monitoring program published in Appendix D to Regulatory Guide 10.8, Revision 2.

9.5 IMAGING EQUIPMENT (MOBILE SERVICE)

NOT APPLICABLE

9.6 OTHER EQUIPMENT AND FACILITIES

ITEM 10 (RADIATION SAFETY PROGRAM)

10.1 RADIATION SAFETY COMMITTEE

We will issue the model Radiation Safety Committee Charter and Radiation Safety Officer Delegation of Authority that was published in Appendix F to Regulatory Guide 10.8, Revision 2.

10.2 ALARA PROGRAM

We will establish and implement the model ALARA program that was published in Appendix G to Regulatory Guide 10.8, Revision 2.

10.3 LEAK TEST

We will establish and implement the model procedure for leak-testing sealed sources that was published in Appendix H of Regulatory Guide 10.8, Revision 2.

10.4 SAFE USE OF RADIOPHARMACEUTICALS

We will establish and implement the model safety rules published in Appendix I to Regulatory Guide 10.8, Revision 2.

10.5 SPILL PROCEDURES

We will establish and implement the model spill procedures published in Appendix J to Regulatory Guide 10.8, Revision 2.

10.6 ORDERING AND RECEIVING

We will establish and implement the model guidance for ordering and receiving radioactive material that was published in Appendix K to Regulatory Guide 10.8, Revision 2.

10.7 OPENING PACKAGES

We will establish and implement the model guidance for opening packages that was published in Appendix L to Regulatory Guide 10.8, Revision 2.

10.8 UNIT DOSAGE RECORDS

We will establish and implement the model procedure for a unit dosage record system that was published in Appendix M.1 to Regulatory Guide 10.8, Revision 2.

10.9 MULTIDOSE VIAL RECORDS

We will establish and implement the model procedure for a multidose vial record system that was published in Appendix M.2 to Regulatory Guide 10.8, Revision 2.

10.10 MOLYBDENUM CONCENTRATION RECORDS

We will establish and implement the model procedure for measuring and recording molybdenum concentration that was published in Appendix M.3 to Regulatory Guide 10.8, Revision 2.

10.11 IMPLANT SOURCE USE RECORDS

NOT APPLICABLE

10.12 AREA SURVEY PROCEDURES

We will establish and implement the model procedure for area surveys that was published in Appendix N to Regulatory Guide 10.8, Revision 2.

10.13 AIR CONCENTRATION CONTROL

NOT APPLICABLE

10.14 RADIOPHARMACEUTICAL THERAPY (OVER 30 mCi)

NOT APPLICABLE

10.15 IMPLANT THERAPY

NOT APPLICABLE

10.16 OTHER SAFETY PROCEDURES

NOT APPLICABLE

ITEM 11 (WASTE MANAGEMENT)

11.1 WASTE DISPOSAL

We will establish and implement the general guidance and model procedure for waste disposal that were published in Appendix R to Regulatory Guide 10.8, Revision 2.

11.2 OTHER WASTE DISPOSAL

NOT APPLICABLE

TRAINING AND EXPERIENCE
AUTHORIZED USER OR RADIATION SAFETY OFFICER

1. NAME OF AUTHORIZED USER OR RADIATION SAFETY OFFICER John Yahner Connolly, M.D.	2. STATE OR TERRITORY IN WHICH LICENSED TO PRACTICE MEDICINE Maine/Connecticut
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3. CERTIFICATION

SPECIALTY BOARD A	CATEGORY B	MONTH AND YEAR CERTIFIED C
Radiology	Diagnostic Radiology	June 1985

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	St. Vincent's Medical Ctr. 2800 Main Street Bridgeport, CT 06606	100 hours	
b. RADIATION PROTECTION	Same as above	30 hours	
c. MATHEMATICS PERTAINING TO THE USE AND MEASUREMENT OF RADIOACTIVITY	Same as Above	20 hours	
d. RADIATION BIOLOGY	Same as above	20 hours	
e. RADIOPHARMACEUTICAL CHEMISTRY	Same as above	30 hours	

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

ISOTOPE	MAXIMUM AMOUNT	WHERE EXPERIENCE WAS GAINED	DURATION OF EXPERIENCE	TYPE OF USE
99mTc	200mCi	St. Vincent's Med. Ctr.	4 months	Diagnostic
I-131	8mCi	Same	4 months	Therapeutic
Xe-133	200mCi	Same	4 months	Diagnostic
Gallium		Same	4 months	Diagnostic

PRECEPTOR STATEMENT

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.

1. APPLICANT PHYSICIAN'S NAME AND ADDRESS

FULL NAME

JOHN Y. CONNOLLY, M.D.

STREET ADDRESS

Millinocket Regional Hospital
200 Somerset Street

CITY

Millinocket

STATE

Maine

ZIP CODE

04462

KEY TO COLUMN C

PERSONAL PARTICIPATION SHOULD CONSIST OF:

- 1-Supervised examination of patients to determine the suitability for radioisotope diagnosis and/or treatment and recommendation for prescribed dosage.
- 2-Collaboration in dose calibration and actual administration of dose to the patient including calculation of the radiation dose, related measurements and plotting of data.
- 3-Adequate period of training to enable physician to manage radioactive patients and follow patients through diagnosis and/or course of treatment.

2. CLINICAL TRAINING AND EXPERIENCE OF ABOVE NAMED PHYSICIAN

ISOTOPE A	CONDITIONS DIAGNOSED OR TREATED B	NUMBER OF CASES INVOLVING PERSONAL PARTICIPATION C	COMMENTS (Additional information or comments may be submitted in duplicate on separate sheets.) D
I-131 or I-125	DIAGNOSIS OF THYROID FUNCTION		
	DETERMINATION OF BLOOD AND BLOOD PLASMA VOLUME		
	LIVER FUNCTION STUDIES		
	FAT ABSORPTION STUDIES		
	KIDNEY FUNCTION STUDIES		
	IN VITRO STUDIES		
OTHER			
I-125	DETECTION OF THROMBOSIS		
I-131	THYROID IMAGING		
P-32	EYE TUMOR LOCALIZATION		
Sr-75	PANCREAS IMAGING		
Yb-169	CISTERNOGRAPHY		
Xe-133	BLOOD FLOW STUDIES AND PULMONARY FUNCTION STUDIES		
OTHER			
Tc-99m	BRAIN IMAGING		
	CARDIAC IMAGING		
	THYROID IMAGING		
	SALIVARY GLAND IMAGING		
	BLOOD POOL IMAGING		
	PLACENTA LOCALIZATION		
	LIVER AND SPLEEN IMAGING		
	LUNG IMAGING		
	BONE IMAGING		
OTHER			

PRECEPTOR STATEMENT (Continued)

2. CLINICAL TRAINING AND EXPERIENCE OF ABOVE NAMED PHYSICIAN (Continued)

ISOTOPE	CONDITIONS DIAGNOSED OR TREATED	NUMBER OF CASES INVOLVING PERSONAL PARTICIPATION	COMMENTS (Additional information or comments may be submitted in duplicate on separate sheets.)
A	B	C	D
P-32 (Soluble)	TREATMENT OF POLYCYTHEMIA VERA, LEUKEMIA, AND BONE METASTASES		
P-32 (Colloidal)	INTRACAVITARY TREATMENT		
I-131	TREATMENT OF THYROID CARCINOMA		
	TREATMENT OF HYPERTHYROIDISM	5	
Au-198	INTRACAVITARY TREATMENT		
Co-60 or Cs-137	INTERSTITIAL TREATMENT		
	INTRACAVITARY TREATMENT		
I-125 or Ir-192	INTERSTITIAL TREATMENT		
Co-60 or Cs-137	TELETHERAPY TREATMENT		
Sr-90	TREATMENT OF EYE DISEASE		
	RADIOPHARMACEUTICAL PREPARATION		
Mo-99/ Tc-99m	GENERATOR		
Sn-113/ In-113m	GENERATOR		
Tc-99m	REAGENT KITS		
Other			

3. DATES AND TOTAL NUMBER OF HOURS RECEIVED IN CLINICAL RADIOISOTOPE TRAINING

4. THE TRAINING AND EXPERIENCE INDICATED ABOVE WAS OBTAINED UNDER THE SUPERVISION OF:

a. NAME OF SUPERVISOR

RUFUS Head, M.D.

b. NAME OF INSTITUTION

Penobscot Valley Hospital

c. MAILING ADDRESS

Transalpine Rd

d. CITY

Lincoln, Maine 04457

5. MATERIALS LICENSE NUMBER(S)

6. PRECEPTOR'S SIGNATURE

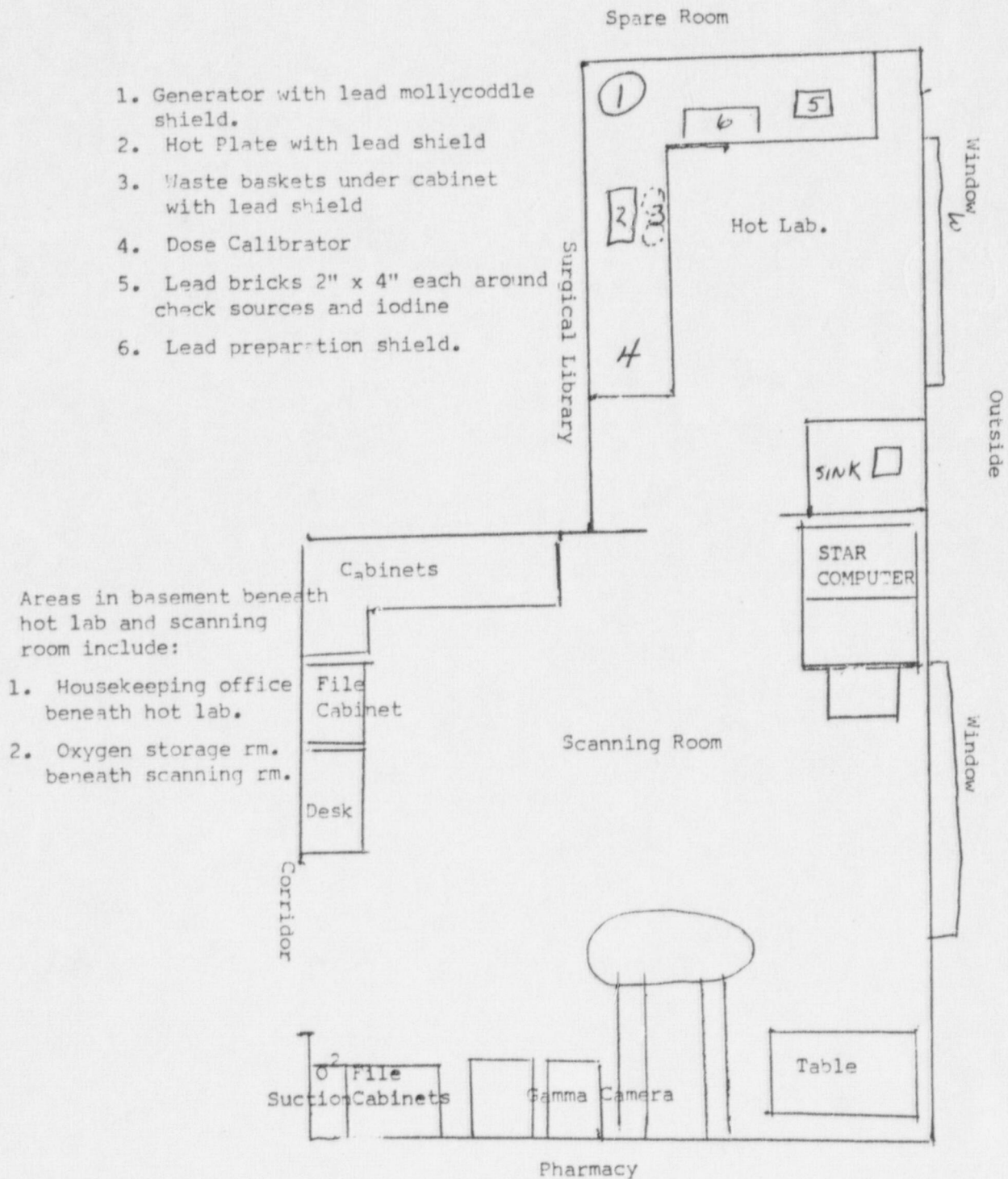
7. PRECEPTOR'S NAME (Please type or print)

RUFUS HEAD, M.D.

8. DATE

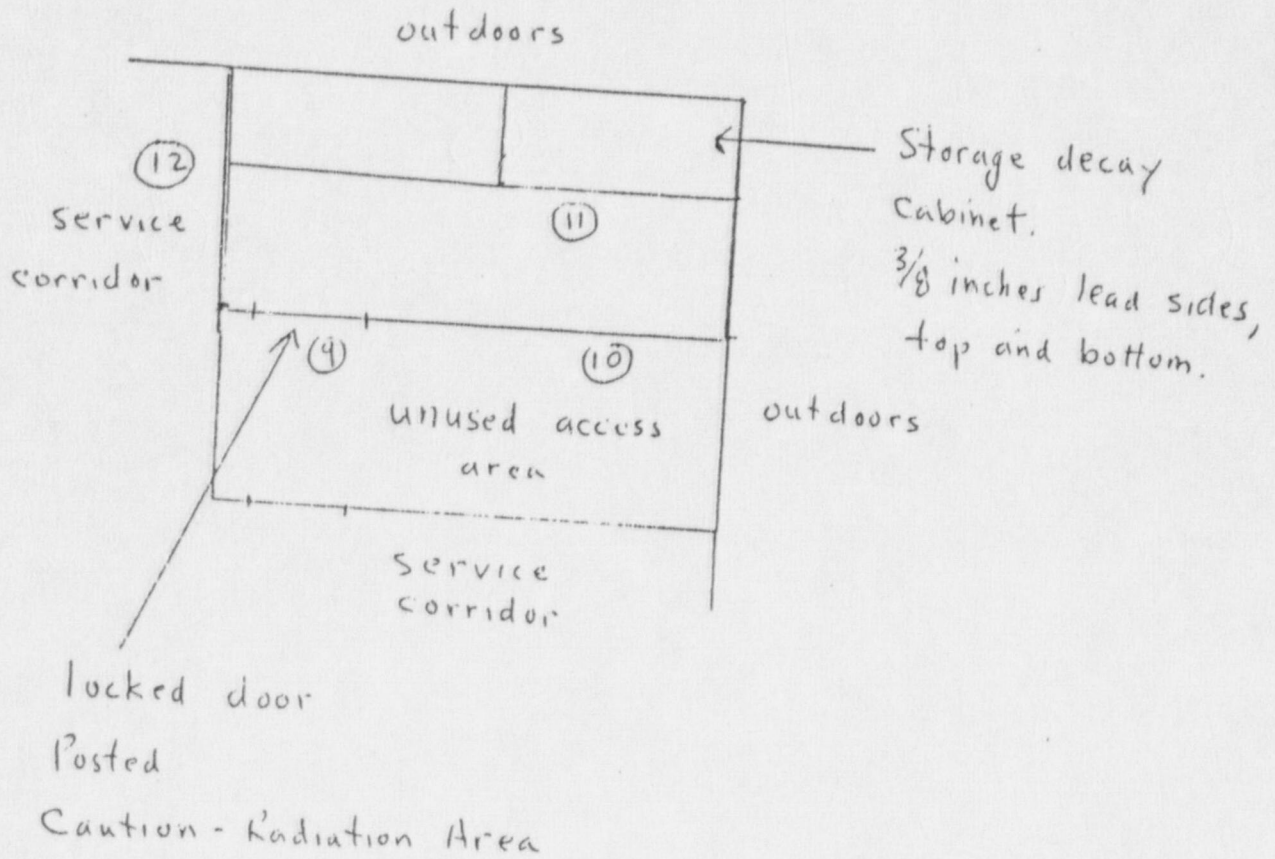
3/9/87

Item 11



Reviewed 7-25-84

Isotope Storage Area 8 x 4 Feet
On Ground Floor - Basement Area



- A.) (9) = monitoring areas
- B.) Storage decay cabinet has Caution - Radioactive Labels attached

Reviewed 7-25-86

BETWEEN:

LICENSE FEE MANAGEMENT BRANCH, ARM
AND
REGIONAL LICENSING SECTIONS

(FOR LFMS USE)
INFORMATION FROM LMS

PROGRAM CODE: 02120
STATUS CODE: 2
FEE CATEGORY: 7C
EXP. DATE: 19871130
FEE COMMENTS: _____

Code 23

LICENSE FEE TRANSMITTAL

03 008615

A. REGION I

1. APPLICATION ATTACHED

APPLICANT/LICENSEE: MILLINOCKET REGIONAL HOSPITAL
RECEIVED DATE: 871022
DOCKET NO: 3008615
CONTROL NO.: 107969
LICENSE NO.: 18-15127-01
ACTION TYPE: RENEWAL

2. FEE ATTACHED

AMOUNT: \$580
CHECK NO.: 3992

3. COMMENTS

SIGNED
DATE

[Signature]
12/29/87

B. LICENSE FEE MANAGEMENT BRANCH (CHECK WHEN MILESTONE 03 IS ENTERED 1__1)

1. FEE CATEGORY AND AMOUNT: 7C \$580

2. CORRECT FEE PAID. APPLICATION MAY BE PROCESSED FOR:

AMENDMENT _____
RENEWAL / _____
LICENSE _____

3. OTHER _____

SIGNED
DATE

[Signature]
1/2/88