

U. S. Nuclear Regulatory Commission Region III Materials Licensing Section 2443 Warrenville Road, Suite 210 Lisle, Illinois 60532-4352

License Number 24-16275-01

Dear Materials Licensing Section:

We would like to amend our license to add the following list of authorized users. Evidence of appropriate qualifications are attached.

| NAME | USES |
|------------------------------|--|
| Patrick M, O'Toole, M.D. | 10 CFR 35.100, 35.200 & 35.300 |
| Ronald R. Weis, M.D. | 10 CFR 35.100, 35.200 & 35.300 |
| Milton R. Wolf, M.D. | 10 CFR 35.100, 35.200 & 35.300 limited to oral administration of sodium lodine in quantities less than or equal to 33 mCi. |
| John S. Yungmeyer, M.D. | 10 CFR 35.100, 35.200 & 35.300 |
| Richard D. Miller, M.D. | 10 CFR 35.100, 35.200 & 35.300 |
| Marco S. Mazzella, M.D. | 10 CFR 35.200 |
| Terry s. Lee, M.D. | 10 CFR 35.100, 35.200 & 35.300 |
| Francisco J. Lammoglla, M.D. | 10 CFR 35.100 & 35.200 |
| Kenneth L. Koontz, M.D. | 10 CFR 35.100, 35.200 & 35.300 |
| Jeffery A Hicklin, M.D. | 10 CFR 35.100, 35.200 & 35.300 |
| Corey W. Chopra, M.D. | 10 CFR 35.100 & 35.200 |
| David J. Burkart, M.D. | 10 CFR 35.100, 35.200 & 35.300 |
| James R. Bergh, M.D. | 10 CFR 35.100, 35.200 & 35.300 and 31.11. |

RECEIVED DEC 0 2 2020

GET WELL, STAY WELL, BOTHWELL,

601 East Fourteenth Street | Scdalia, MO 65301 | PHONE: 660-826-8833 | WEB: WWW.brhc.org

Nov. 25. 2020 9:50AM BRHC RADIOLOGY

P. 3 No. 4873

If you have any question on this request, please contact me at (660) 826-8833.

Sincerely,

<u>Jan H Multon</u> Signature <u>David H Rochus</u> Name

R90 Title

11-24-2020

Date

Enclosure

| NRC FORM 374 | | U.S. NUCLEAR REGU | LATORY COMMISSION | | PAGE 1 OF 3 PAGES Amendment No. 74 |
|---|---|---|---|--|---|
| | | MATERIAL | S LICENSE | | |
| Parts 30, 31, 32, 33, 34, 35, 36, 3 authorizing the licensee to receive, and at the place(s) designated belo | 7, 39, 40, 70 and 71, and in reacquire, possess, and transfer b w; to deliver or transfer such ma the conditions specified in Section | ellance on statement yproduct, source, ar terial to persons aut on 183 of the Atomia | ts and representations here nd special nuclear material of horized to receive it in acco c Energy Act of 1954, as an | tofore made tesignated k rdance with | a 10, Code of Federal Regulations, Chapter I, a by the licensee, a license is hereby issued below; to use such material for the purpose(s) the regulations of the applicable Part(s). This I is subject to all applicable rules, regulations, |
| Licensee 1. Prime Healthcare Services - Kansas City, LLC d/b/a St. Joseph Medical Center 2. 1000 Carondelet Dr. Kansas City, MO 64114 | | In accordance with letter dated October 16, 2019. | | 4. Expiration Date: May 31, 2026 | |
| | | | nber: 24-02704-01 is its entirety to read as | | et No.: 030-02310 rence No.: |
| Byproduct, source, and/or special nuclear material | 7. Chemical and/or physical f | orm 8, | Maximum amount that lice may possess at any one til under this license | | Authorized use |
| Any byproduct material permitted by 10 CFR 35.100 | A. Any | Α. | As Needed | A | For use in uptake, dilution and excretion studies permitted by 10 CFR 35.100. |
| Any byproduct material permitted by 10 CFR 35.200 | B. Any | B. | As Needed | В. | For use in imaging and localization studies permitted by 10 CFR 35.200. |
| C. Any byproduct material permitted by 10 CFR 35.300 | C. Any | C . | 1 curie total | C. | For any use permitted by 10 CFR 35.300. |
| D. Any byproduct material permitted by 10 CFR 31,11 | D. Prepackaged Kits | D. | 3 millicuries total | D. | For use in in-vitro studies. |
| | | COND | TIONS | | |

Oct. 5. 2020 1:59PM BRHC RADIOLOGY

RECEIVED 10/05/2020 02:35PM No. 3830 P. 1/16

| NRC FORM 374A | U.S. NUCLEAR REGULATO | RY COMMISSION PAGE 2 OF 3 PAGES |
|---|---|--|
| MATERIALS LICENSE | License Number 24-02704-01 | Docket ar Reference Number 030-02310 |
| SUPPLEMENTARY SHEET | Amendment No. 74 | |
| 10. Licensed material may be used or sto | red only at the licensee's facilities k | ocated at 1000 Carondelet Dr., Kansas City, Missouri, 64114. |
| 11. The Radiation Safety Officer (RSO) fo | r this license is Patrick M. O'Toole, | M.D. |
| 12. Licensed material shall only be used to | by, or under the supervision of: | |
| A. Individuals permitted to work as a | n authorized user in accordance wit | th 10 CFR 35.13 and 10 CFR 35.14. |
| B. The following individuals are auth | prized users for the material and me | edical uses as indicated: |
| Authorized User(M.D.,D.O.,etc.) | Material and Use | |
| James R. Bergh, M.D. | 10 CFR 35.100, 35.200, 35. | 300, and 31.11 |
| David J. Burkart, M.D. | 10 CFR 35.100, 35.200, and | 35.300 |
| Corey W. Chopra, M.D. | 10 CFR 35.100 and 35.200 | |
| Jeffrey A. Hicklin, M.D. | 10 CFR 35.100, 35.200 and | 35.300 |
| Kenneth L. Koontz, M.D. | 10 CFR 35 100, 35 200, and | 35,300 |
| Francisco J. Lammoglia, M.D. | 10 CFR 35.100 and 35.200 | |
| Terry S. Lee, M.D. | 10 CFR 35.100, 35.200 and | 35.300 |
| Marco S. Mazzella, M.D. | 10 CFR 35.200 | |
| Richard D. Miller, M.D. | 10 CFR 35,100, 35,200 and | 35,300 |
| Patrick M. O'Toole, M.D. | 10 CFR 35.100, 35.200, and | 35.300 |
| Ronald R. Weis, M.D. | 10 CFR.35.100, 35.200, and | 35.300 |
| Milton R. Wolf, M.D. | quantities less than or equal | |
| John S. Yungmeyer, M.D. | 10 CFR 35.100, 35.200 and | 35.300 |

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| NRC FORM 374A | U.S. NUCLEAR REGULA | TORY COMMISSION PAGE 3 OF 3 PAGE |
|--|--|---|
| MATERIALS LICENSE | License Number 24-02704-01 | Docket or Reference Number 030-02310 |
| SUPPLEMENTARY SHEET | Amendment No. 74 | |
| representations, and procedures cont those procedures that are required to licensee's ability to make changes to t | ained in the documents, including be submitted in accordance with the radiation protection program a n unless the statements, represen han the regulations. 2015 (ML15323A045) (ML16123A194) 5082A518) (123A197) L17031A412) 17269A188) L19301D380) | hall conduct its program in accordance with the statements, g any enclosures, listed below. This license condition applies only to the regulations. Additionally, this license condition does not limit th as provided for in 10 CFR 35.26. The U.S. Nuclear Regulatory intations, and procedures in the licensee's application and |
| Date: | | FOR THE U.S. NUCLEAR REGULATORY COMMISSION By: Magdalena R. Gryglak Region 3 |

Missouri Division of Professional Registration

PR Home (https://pr.mo.gov/)

Detail

Primary Source Verification

The licensee search function of this website provides data extracted from our database and constitutes a Primary Source Verification.

| Licensee Name: | O'Toole, Patrick M |
|---------------------------|--|
| Profession Name: | Medical Physician & Surgeon |
| Licensee Number: | R3L15 |
| Expiration Date: | 1/31/2021 |
| Original Issue Date: | 3/22/1990 |
| Primary Business Address: | 8000 W 110th St Ste 150 |
| Address Con't: | |
| City, State Zip: | Overland Park, KS 66210 |
| County: | Unknown/Out of State |
| Other Business Addresses: | View addresses (licensee-search-detail-branch.asp? passkey=1226767) |
| Board Certification: | Diagnostic Radiology, |
| | Board certification is provided by the licensee. It has not been verified by the Board of Registration for the Healing Arts. To verify visit ABMS (http://www.abms.org/About_ABMS/member_boards.aspx) and AOA (http://www.osteopathic.org/osteopathic- health/about-dos/do-certification/Pages/default.aspx). |
| Professional School: | Missouri, University of - Kansas City |
| Other Actions: | |

Current Discipline Status: None

Missouri Division of Professional Registration

PR Home (https://pr.mo.gov/)

Detail

Primary Source Verification

The licensee search function of this website provides data extracted from our database and constitutes a Primary Source Verification.

| Licensee Name: | Wolf, Milton Rue | |
|---------------------------|--|--|
| Profession Name: | Medical Physician & Surgeon | |
| Licensee Number: | 2007008011 | |
| Expiration Date: | 1/31/2021 | |
| Original Issue Date: | 3/20/2007 | |
| Primary Business Address: | 8000 W. 110th St. Ste. 150 | |
| Address Con't: | | |
| City, State Zip: | Shawnee Mission, KS 66210 | |
| County: | Unknown/Out of State | |
| Other Business Addresses: | View addresses (licensee-search-detail-branch.asp? passkey=2007543) | |
| Board Certification: | Radiology, | |
| | Board certification is provided by the licensee. It has not been verified by the Board of Registration for the Healing Arts. To verify visit ABMS (http://www.abms.org/About_ABMS/member_boards.aspx) and AOA (http://www.osteopathic.org/osteopathic- health/about-dos/do-certification/Pages/default.aspx). | |
| Professional School: | University of Kansas | |
| Other Actions: | | |

Current Discipline Status: None

Missouri Division of Professional Registration

PR Home (https://pr.mo.gov/)

Detail

Primary Source Verification

The licensee search function of this website provides data extracted from our database and constitutes a Primary Source Verification.

| Licensee Name: | Weis, Ronald Ray |
|---------------------------|--|
| Profession Name: | Medical Physician & Surgeon |
| Licensee Number: | R6J40 |
| Expiration Date: | 1/31/2021 |
| Original Issue Date: | 5/26/1989 |
| Primary Business Address: | 8000 W 110th St Ste 150 |
| Address Con't: | |
| City, State Zip: | Overland Park, KS 66210 |
| County: | Unknown/Out of State |
| Other Business Addresses: | View addresses (licensee-search-detail-branch.asp? passkey=1232323) |
| Board Certification: | Diagnostic Radiology, |
| | Board certification is provided by the licensee. It has not been verified by the Board of Registration for the Healing Arts. To verify visit ABMS (http://www.abms.org/About_ABMS/member_boards.aspx) and AOA (http://www.osteopathic.org/osteopathic- health/about-dos/do-certification/Pages/default.aspx). |
| Professional School: | Iowa, University of |
| Other Actions: | |

Current Discipline Status: None

Missouri Division of Professional Registration

PR Home (https://pr.mo.gov/)

Detail

Primary Source Verification

The licensee search function of this website provides data extracted from our database and constitutes a Primary Source Verification.

| Licensee Name: | Yungmeyer, John S |
|---------------------------|--|
| Profession Name: | Medical Physician & Surgeon |
| Licensee Number: | 116774 |
| Expiration Date: | 1/31/2021 |
| Original Issue Date: | 8/27/1998 |
| Primary Business Address: | 8000 W. 110th St. Ste 150 |
| Address Con't: | |
| City, State Zip: | Shawnee Mission, KS 66210 |
| County: | Unknown/Out of State |
| Other Business Addresses: | View addresses (licensee-search-detail-branch.asp? passkey=1251327) |
| Board Certification: | Diagnostic Radiology, |
| | Board certification is provided by the licensee. It has not been verified by the Board of Registration for the Healing Arts. To verify visit ABMS (http://www.abms.org/About_ABMS/member_boards.aspx) and AOA (http://www.osteopathic.org/osteopathic- health/about-dos/do-certification/Pages/default.aspx). |
| Professional School: | Univ Of Tennessee-memphis |
| Other Actions: | |

Current Discipline Status: None

Missouri Division of Professional Registration

PR Home (https://pr.mo.gov/)

Detail

Primary Source Verification

The licensee search function of this website provides data extracted from our database and constitutes a Primary Source Verification.

| Licensee Name: | Miller, Richard David, Jr. | | |
|---------------------------|--|--|--|
| Profession Name: | Medical Physician & Surgeon | | |
| Licensee Number: | 2005017781 | | |
| Expiration Date: | 1/31/2021 | | |
| Original Issue Date: | 6/10/2005 | | |
| Primary Business Address: | 8000 W 110th St Ste 150 | | |
| Address Con't: | | | |
| City, State Zip: | Overland Park, KS 66210 | | |
| County: | Unknown/Out of State | | |
| Other Business Addresses: | View addresses (licensee-search-detail-branch.asp? passkey=1962333) | | |
| Board Certification: | Radiology, | | |
| | Board certification is provided by the licensee. It has not been verified by the Board of Registration for the Healing Arts. To verify visit ABMS (http://www.abms.org/About_ABMS/member_boards.aspx) and AOA (http://www.osteopathic.org/osteopathic- health/about-dos/do-certification/Pages/default.aspx). | | |
| Professional School: | University of Kansas | | |
| Other Actions: | | | |

Current Discipline Status: None

Missouri Division of Professional Registration

PR Home (https://pr.mo.gov/)

Detail

Primary Source Verification

The licensee search function of this website provides data extracted from our database and constitutes a Primary Source Verification.

| Licensee Name: | Mazzella, Marco S | |
|---------------------------|--|--|
| Profession Name: | Medical Physician & Surgeon | |
| Licensee Number: | 2004017280 | |
| Expiration Date: | 1/31/2021 | |
| Original Issue Date: | 6/29/2004 | |
| Primary Business Address: | 3200 NE Ralph Powell Rd | |
| Address Con't: | | |
| City, State Zip: | Lees Summit, MO 64064 | |
| County: | Jackson | |
| Other Business Addresses: | View addresses (licensee-search-detail-branch.asp? | |
| | passkey=1915241) | |
| Board Certification: | Internal Medicine, Cardiovascular Disease, | |
| | Board certification is provided by the licensee. It has not been verified by the Board of Registration for the Healing Arts. To verify visit ABMS (http://www.abms.org/About_ABMS/member_boards.aspx) and AOA (http://www.osteopathic.org/osteopathic- based to be a stification (Bases (default aspr)) | |
| Professional School: | health/about-dos/do-certification/Pages/default.aspx). University of Missouri - Kansas City | |
| Other Actions: | | |

Current Discipline Status: None

Missouri Division of Professional Registration

PR Home (https://pr.mo.gov/)

Detail

Primary Source Verification

The licensee search function of this website provides data extracted from our database and constitutes a Primary Source Verification.

| Licensee Name: | Lee, Terry S |
|---------------------------|--|
| Profession Name: | Medical Physician & Surgeon |
| Licensee Number: | 2000153508 |
| Expiration Date; | 1/31/2021 |
| Original Issue Date: | 4/19/2000 |
| Primary Business Address: | 8000 W 110th St Ste 150 |
| Address Con't: | |
| City, State Zip: | Overland Park, KS 66210 |
| County: | Unknown/Out of State |
| Other Business Addresses: | View addresses (licensee-search-detail-branch.asp? |
| | passkey=1725519) |
| Board Certification: | Dlagnostic Radiology, |
| | Board certification is provided by the licensee. It has not been verified by the Board of Registration for the Healing Arts. To verify visit ABMS (http://www.abms.org/About_ABMS/member_boards.aspx) and AOA (http://www.osteopathic.org/osteopathic- health/about-dos/do-certification/Pages/default.aspx). |
| Professional School: | Missouri, University of - Kansas City |
| Other Actions: | |

Current Discipline Status: None

Missouri Division of Professional Registration

PR Home (https://pr.mo.gov/)

Detail

Primary Source Verification

The licensee search function of this website provides data extracted from our database and constitutes a Primary Source Verification.

| Licensee Name: | Lammoglia, Francisco J | |
|---------------------------|--|--|
| Profession Name: | Medical Physician & Surgeon | |
| Licensee Number: | 101824 | |
| Expiration Date: | 1/31/2021 | |
| Original Issue Date: | 7/31/1992 | |
| Primary Business Address: | 4801 College Blvd | |
| Address Con't: | | |
| City, State Zip: | Leawood, KS 66211 | |
| County: | Unknown/Out of State | |
| Other Business Addresses: | View addresses (licensee-search-detail-branch.asp? | |
| | passkey=1242560) | |
| Board Certification: | Cardiovascular Disease, | |
| | Board certification is provided by the licensee. It has not been verified by the Board of Registration for the Healing Arts. To verify visit ABMS (http://www.abms.org/About_ABMS/member_boards.aspx) and AOA (http://www.osteopathic.org/osteopathic- health/about-dos/do-certification/Pages/default.aspx). | |
| Professional School: | University of Kansas | |
| Other Actions: | | |

Current Discipline Status: None

Missouri Division of Professional Registration

PR Home (https://pr.mo.gov/)

Detail

Primary Source Verification

The licensee search function of this website provides data extracted from our database and constitutes a Primary Source Verification.

| Licensee Name: | Koontz, Kenneth L |
|---------------------------|--|
| Profession Name: | Medical Physician & Surgeon |
| Licensee Number: | R3M47 |
| Expiration Date: | 1/31/2021 |
| Original Issue Date: | 5/10/1990 |
| Primary Business Address: | 8000 W 110th St Ste 150 |
| Address Con't: | |
| City, State Zip: | Overland Park, KS 66210 |
| County: | Unknown/Out of State |
| Other Business Addresses: | View addresses (licensee-search-detail-branch.asp? passkey=1226890) |
| Board Certification: | Diagnostic Radiology, |
| | Board certification is provided by the licensee. It has not been verified by the Board of Registration for the Healing Arts. To verify visit ABMS (http://www.abms.org/About_ABMS/member_boards.aspx) and AOA (http://www.osteopathic.org/osteopathic- health/about-dos/do-certification/Pages/default.aspx). |
| Professional School: | University of Kansas |
| Other Actions: | |

Current Discipline Status: None

Missouri Division of Professional Registration

PR Home (https://pr.mo.gov/)

Detail

Primary Source Verification

The licensee search function of this website provides data extracted from our database and constitutes a Primary Source Verification.

| Professional School: | Nebraska, University of |
|---------------------------|--|
| | verify visit ABMS (http://www.abms.org/About_ABMS/member_boards.aspx) and AOA (http://www.osteopathic.org/osteopathic- health/about-dos/do-certification/Pages/default.aspx). |
| | Board certification is provided by the licensee. It has not been verified by the Board of Registration for the Healing Arts. To |
| Board Certification: | Radiology, |
| Other Business Addresses: | View addresses (licensee-search-detail-branch.asp? passkey=1250393) |
| County: | Unknown/Out of State |
| City, State Zip: | Overland Park, KS 66210 |
| Address Con't: | |
| Primary Business Address: | 8000 W 110th Ste 150 |
| Original Issue Date: | 5/7/1998 |
| Expiration Date: | 1/31/2021 |
| Licensee Number: | 114745 |
| Profession Name: | Medical Physician & Surgeon |
| Licensee Name: | Hicklin, Jeffrey A |

Current Discipline Status: None

Missouri Division of Professional Registration

PR Home (https://pr.mo.gov/)

Detail

Primary Source Verification

The licensee search function of this website provides data extracted from our database and constitutes a Primary Source Verification.

| Licensee Name: | Chopra, Corey William |
|---------------------------|--|
| Profession Name: | Medical Physician & Surgeon |
| Licensee Number: | 2007013155 |
| Expiration Date: | 1/31/2021 |
| Original Issue Date: | 5/14/2007 |
| Primary Business Address: | 8000 W 110th St Ste 150 |
| Address Con't: | |
| City, State Zip: | Overland Park, KS 66210 |
| County: | Unknown/Out of State |
| Other Business Addresses: | View addresses (licensee-search-detail-branch.asp? passkey=2053192) |
| Board Certification: | Radiology, |
| | Board certification is provided by the licensee. It has not been verified by the Board of Registration for the Healing Arts. To verify visit ABMS (http://www.abms.org/About_ABMS/member_boards.aspx) and AOA (http://www.osteopathic.org/osteopathic- health/about-dos/do-certification/Pages/default.aspx). |
| Professional School: | University of Kansas |
| Other Actions: | |

Current Discipline Status: None

Missouri Division of Professional Registration

PR Home (https://pr.mo.gov/)

Detail

Primary Source Verification

The licensee search function of this website provides data extracted from our database and constitutes a Primary Source Verification.

| Licensee Name: | Burkart, David J |
|---------------------------|--|
| Profession Name: | Medical Physician & Surgeon |
| Licensee Number: | 114297 |
| Expiration Date: | 1/31/2021 |
| Original Issue Date: | 2/1/1998 |
| Primary Business Address: | 4801 College Blvd |
| Address Con't: | |
| City, State Zip: | Leawood, KS 66211 |
| County: | Unknown/Out of State |
| Other Business Addresses: | View addresses (licensee-search-detail-branch.asp? |
| | passkey=1250172) |
| Board Certification: | Diagnostic Radiology, Vascular & Interventional Radiology, |
| | Board certification is provided by the licensee. It has not been |
| | verified by the Board of Registration for the Healing Arts. To |
| | verify visit ABMS |
| | (http://www.abms.org/About_ABMS/member_boards.aspx) |
| | and AOA (http://www.osteopathic.org/osteopathic- |
| | health/about-dos/do-certification/Pages/default.aspx). |
| Professional School: | Missouri, University of - Kansas City |
| Other Actions: | |

Current Discipline Status: None

Missouri Division of Professional Registration

PR Home (https://pr.mo.gov/)

Detail

Primary Source Verification

The licensee search function of this website provides data extracted from our database and constitutes a Primary Source Verification.

| Licensee Name: | Bergh, James R |
|---------------------------|--|
| Profession Name: | Medical Physician & Surgeon |
| Licensee Number: | 100271 |
| Expiration Date: | 1/31/2021 |
| Original Issue Date: | 3/17/1992 |
| Primary Business Address: | 8000 W 110th St Ste 150 |
| Address Con't: | |
| City, State Zip: | Overland Park, KS 66210 |
| County: | Unknown/Out of State |
| Other Business Addresses: | View addresses (licensee-search-detail-branch.asp? |
| | passkey=1241467) |
| Board Certification: | Nuclear Medicine, Internal Medicine, Diagnostic Radiology, |
| | Board certification is provided by the licensee. It has not been verified by the Board of Registration for the Healing Arts. To verify visit ABMS (http://www.abms.org/About_ABMS/member_boards.aspx) and AOA (http://www.osteopathic.org/osteopathic- health/about-dos/do-certification/Pages/default.aspx). |
| Professional School: | University of Kansas |
| Other Actions: | |

Current Discipline Status: None

65301 \$ 001.60° 40 0367165 NOV 12 2020 U.S. Nuclear Begulatory Compission Resion III 2443 Wardonville Road Swite 210 Lisla, I Hinuis 61532-4352 RECEIVED NOV 1 9 2020