

FORM NRC-313M (8-78) 10 CFR 35	U.S. NUCLEAR REGULATORY COMMISSION APPLICATION FOR MATERIALS LICENSE – MEDICAL	Approved: GAO R0557
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INSTRUCTIONS – Complete Items 1 through 26 if this is an initial application or an application for renewal of a license. Use supplemental sheets where necessary. Item 26 must be completed on all applications and signed. Retain one copy. Submit original and one copy of entire application to: Director, Office of Nuclear Materials Safety and Safeguards, U.S. Nuclear Regulatory Commission, Washington, D.C. 20555. Upon approval of this application, the applicant will receive a Materials License. An NRC Materials License is issued in accordance with the general requirements contained in Title 10, Code of Federal Regulations, Part 30, and the Licensee is subject to Title 10, Code of Federal Regulations, Parts 19, 20 and 35 and the license fee provision of Title 10, Code of Federal Regulations, Part 170. The license fee category should be stated in Item 26 and the appropriate fee enclosed.

1.a. NAME AND MAILING ADDRESS OF APPLICANT (institution, firm, clinic, physician, etc.) INCLUDE ZIP CODE Donald S. Pritt, DPM 4542 Emerson Avenue Parkersburg, WV 26101 TELEPHONE NO.: AREA CODE 800 624 1005	1.b. STREET ADDRESS(ES) AT WHICH RADIOACTIVE MATERIAL WILL BE USED (If different from 1.a.) INCLUDE ZIP CODE Donald S. Pritt, DPM #4 Columbia Avenue Charleston, WV 25302
2. PERSON TO CONTACT REGARDING THIS APPLICATION Donald S. Pritt, DPM TELEPHONE NO.: AREA CODE 800 624 1005	3. THIS IS AN APPLICATION FOR: (Check appropriate item) a. <input checked="" type="checkbox"/> NEW LICENSE b. <input type="checkbox"/> AMENDMENT TO LICENSE NO. _____ c. <input type="checkbox"/> RENEWAL OF LICENSE NO. _____
4. INDIVIDUAL USERS (Name individuals who will use or directly supervise use of radioactive material. Complete Supplements A and B for each individual.) Donald S. Pritt, DPM	5. RADIATION SAFETY OFFICER (RSO) (Name of person designated as radiation safety officer. If other than individual user, complete resume of training and experience as in Supplement A.) Donald S. Pritt, DPM

6.a. RADIOACTIVE MATERIAL FOR MEDICAL USE					
RADIOACTIVE MATERIAL LISTED IN:	ITEMS DESIRED "X"	MAXIMUM POSSESSION LIMITS (In millicuries)	ADDITIONAL ITEMS:	MARK ITEMS DESIRED "X"	MAXIMUM POSSESSION LIMITS (In millicuries)
10 CFR 31.11 FOR IN VITRO STUDIES			IODINE-131 AS IODIDE FOR TREATMENT OF HYPERTHYROIDISM		
10 CFR 35.100, SCHEDULE A, GROUP I		AS NEEDED	PHOSPHORUS-32 AS SOLUBLE PHOSPHATE FOR TREATMENT OF POLYCYTHEMIA VERA, LEUKEMIA AND BONE METASTASES		
10 CFR 35.100, SCHEDULE A, GROUP II		AS NEEDED	PHOSPHORUS-32 AS COLLOIDAL CHROMIC PHOSPHATE FOR INTRACAVITARY TREATMENT OF MALIGNANT EFFUSIONS.		
10 CFR 35.100, SCHEDULE A, GROUP III			GOLD-198 AS COLLOID FOR INTRACAVITARY TREATMENT OF MALIGNANT EFFUSIONS.		
10 CFR 35.100, SCHEDULE A, GROUP IV		AS NEEDED	IODINE-131 AS IODIDE FOR TREATMENT OF THYROID CARCINOMA		
10 CFR 35.100, SCHEDULE A, GROUP V		AS NEEDED	XENON-133 AS GAS OR GAS IN SALINE FOR BLOOD FLOW STUDIES AND PULMONARY FUNCTION STUDIES.		
10 CFR 35.100, SCHEDULE A, GROUP VI					

6.b. RADIOACTIVE MATERIAL FOR USES NOT LISTED IN ITEM 6.a. (Sealed sources up to 3 mCi used for calibration and reference standards are authorized under Section 35.14(d), 10 CFR Part 35, and NEED NOT BE LISTED.)

ELEMENT AND MASS NUMBER	CHEMICAL AND/OR PHYSICAL FORM	MAXIMUM NUMBER OF MILLICURIES OF EACH FORM	DESCRIBE PURPOSE OF USE
Iodine 125	Absorbed on solid sealed source AECL-C-324 or Amersham IMC P2 Lixiscope Mod LSM82-209	500mCi per source (1 curie 2 sources not to exceed 500mCi each)	As a source of ionizing radiation for the purpose of diagnostic x-ray of extremities of sick or injured patients.

8505310482 850516
 REG2 LIC30
 47-23078-01 PDR

License Fee Information
 on Next Page - 3

50523

INFORMATION REQUIRED FOR ITEMS 7 THROUGH 23

For Items 7 through 23, check the appropriate box(es) and submit a detailed description of all the requested information. Begin each item on a separate sheet. Identify the item number and the date of the application in the lower right corner of each page. If you indicate that an appendix to the medical licensing guide will be followed, do not submit the pages, but specify the revision number and date of the referenced guide: Regulatory Guide 10.8 , Rev. _____ Date: _____

7. MEDICAL ISOTOPES COMMITTEE		15. GENERAL RULES FOR THE SAFE USE OF RADIOACTIVE MATERIAL (Check One)	
<input type="checkbox"/>	Names and Specialties Attached; and	<input type="checkbox"/>	Appendix G Rules Followed; or
<input type="checkbox"/>	Duties as in Appendix B; or _____ (Check One)	<input checked="" type="checkbox"/>	Equivalent Rules Attached
<input type="checkbox"/>	Equivalent Duties Attached	16. EMERGENCY PROCEDURES (Check One)	
8. TRAINING AND EXPERIENCE		<input type="checkbox"/>	Appendix H Procedures Followed; or
<input type="checkbox"/>	Supplements A & B Attached for Each Individual User; and	<input checked="" type="checkbox"/>	Equivalent Procedures Attached
<input checked="" type="checkbox"/>	Supplement A Attached for RSO.	17. AREA SURVEY PROCEDURES (Check One)	
9. INSTRUMENTATION (Check One)		<input type="checkbox"/>	Appendix I Procedures Followed; or
<input type="checkbox"/>	Appendix C Form Attached; or	<input type="checkbox"/>	Equivalent Procedures Attached
<input type="checkbox"/>	List by Name and Model Number	18. WASTE DISPOSAL (Check One)	
10. CALIBRATION OF INSTRUMENTS		<input type="checkbox"/>	Appendix J Form Attached; or
<input type="checkbox"/>	Appendix D Procedures Followed for Survey Instruments; or _____ (Check One)	<input checked="" type="checkbox"/>	Equivalent Information Attached
<input type="checkbox"/>	Equivalent Procedures Attached; and	19. THERAPEUTIC USE OF RADIOPHARMACEUTICALS (Check One)	
<input type="checkbox"/>	Appendix D Procedures Followed for Dose Calibrator; or _____ (Check One)	<input type="checkbox"/>	Appendix K Procedures Followed; or
<input type="checkbox"/>	Equivalent Procedures Attached	<input type="checkbox"/>	Equivalent Procedures Attached
11. FACILITIES AND EQUIPMENT		20. THERAPEUTIC USE OF SEALED SOURCES	
<input checked="" type="checkbox"/>	Description and Diagram Attached	<input type="checkbox"/>	Detailed Information Attached; and
12. PERSONNEL TRAINING PROGRAM		<input type="checkbox"/>	Appendix L Procedures Followed; or _____ (Check One)
<input checked="" type="checkbox"/>	Description of Training Attached	<input type="checkbox"/>	Equivalent Procedures Attached
13. PROCEDURES FOR ORDERING AND RECEIVING RADIOACTIVE MATERIAL		21. PROCEDURES AND PRECAUTIONS FOR USE OF RADIOACTIVE GASES (e.g., Xenon - 133)	
<input checked="" type="checkbox"/>	Detailed Information Attached	<input type="checkbox"/>	Detailed Information Attached
14. PROCEDURES FOR SAFELY OPENING PACKAGES CONTAINING RADIOACTIVE MATERIALS (Check One)		22. PROCEDURES AND PRECAUTIONS FOR USE OF RADIOACTIVE MATERIAL IN ANIMALS	
<input type="checkbox"/>	Appendix F Procedures Followed; or	<input type="checkbox"/>	Detailed Information Attached
<input checked="" type="checkbox"/>	Equivalent Procedures Attached	23. PROCEDURES AND PRECAUTIONS FOR USE OF RADIOACTIVE MATERIAL SPECIFIED IN ITEM 6.b	
<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/>	Detailed Information Attached

24. PERSONNEL MONITORING DEVICES			
TYPE (Check appropriate box)		SUPPLIER	EXCHANGE FREQUENCY
a. WHOLE BODY	<input type="checkbox"/> FILM		
	<input type="checkbox"/> TLD		
	<input type="checkbox"/> OTHER (Specify)		
b. FINGER	<input type="checkbox"/> FILM		
	<input type="checkbox"/> TLD		
	<input type="checkbox"/> OTHER (Specify)		
c. WRIST	<input type="checkbox"/> FILM		
	<input type="checkbox"/> TLD		
	<input type="checkbox"/> OTHER (Specify)		

d. OTHER (Specify)

RECEIVED	
Date..	5/1/85
Leg..	Appl TH
By.....	Brown
Orig. To.....	
Action Compl.	5/3/85

Applicant..	6305
Check No..	6305
Amount/Fee Category	#580/K
Type of Fee	Application
Date Check Recd.	5/1/85
Received By.....	Brown

25. FOR PRIVATE PRACTICE APPLICANTS ONLY

a. HOSPITAL AGREEING TO ACCEPT PATIENTS CONTAINING RADIOACTIVE MATERIAL

NAME OF HOSPITAL

MAILING ADDRESS

CITY

STATE ZIP CODE

b. ATTACH A COPY OF THE AGREEMENT LETTER SIGNED BY THE HOSPITAL ADMINISTRATOR.

c. WHEN REQUESTING THERAPY PROCEDURES, ATTACH A COPY OF RADIATION SAFETY PRECAUTIONS TO BE TAKEN AND LIST AVAILABLE RADIATION DETECTION INSTRUMENTS.

26. CERTIFICATE

(This item must be completed by applicant)

The applicant and any official executing this certificate on behalf of the applicant named in Item 1a certify that this application is prepared in conformity with Title 10, Code of Federal Regulations, Parts 30 and 35, and that all information contained herein, including any supplements attached hereto, is true and correct to the best of our knowledge and belief.

a. LICENSE FEE REQUIRED
(See Section 170.31, 10 CFR 170)

b. APPLICANT OR CERTIFYING OFFICIAL (Signature)

(1) NAME (Type of Print)

D. S. Pritt, DPM

(2) TITLE

(1) LICENSE FEE CATEGORY

(2) LICENSE FEE ENCLOSED \$ 580.00

c. DATE

February 19, 1985

**TRAINING AND EXPERIENCE
AUTHORIZED USER OR RADIATION SAFETY OFFICER**

1. NAME OF AUTHORIZED USER OR RADIATION SAFETY OFFICER

2. STATE OR TERRITORY IN
WHICH LICENSED TO
PRACTICE MEDICINE

3. CERTIFICATION

SPECIALTY BOARD
A

CATEGORY
B

MONTH AND YEAR CERTIFIED
C

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

Davis & Elkins College
Illinois College of
Pod Medicine '55

3 credit
hours

b. RADIATION PROTECTION

Lixi Training Course
Course outline attached

2 hours

c. MATHEMATICS PERTAINING TO
THE USE AND MEASUREMENT
OF RADIOACTIVITY

d. RADIATION BIOLOGY

Davis & Elkins College
Illinois College of
Pod Medicine '55

3 credit
hours

e. RADIOPHARMACEUTICAL
CHEMISTRY

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

ISOTOPE

MAXIMUM AMOUNT

WHERE EXPERIENCE WAS GAINED

DURATION OF EXPERIENCE

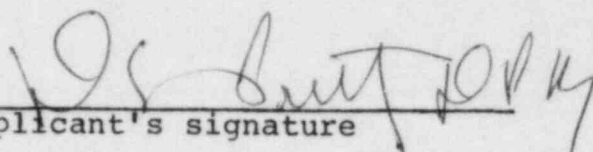
TYPE OF USE

SUPPLEMENTAL INFORMATION

DONALD S. PRITT, DPM

11. Sketch of facility attached.
12. Qualified personnel will be trained by licensee using the S.A. Huber training course and Lixiscope instruction manual. Outline of course attached (Supplement A, 4b). Such persons may only use the device under the direct supervision and presence of licensee.
13. Orders for material will be placed using Lixi, Inc., catalog numbers and specifications. When received, packages will be inspected for damage. Contents will be inspected and operational checks performed. Receiving records will be maintained and material will be logged into accountability system. Device will be placed in secured storage until utilized.
14. Licensee will observe the following general rules:
 1. Device will be kept in secure storage when not in use. Locks will be kept in place.
 2. Licensee will not permit anyone to place fingers, hands or feet into beam to test device for operation.
 3. The device will not be used to experiment on patients. Use will be limited to diagnostic examination of patients with specific applicable medical problems.
 4. Source holder will be left attached to device except for leak testing and source exchange.
 5. Device will be returned to secure storage after use.
15. Lost or stolen material will be reported immediately to the NRC.
16. Disposal of material will be by return of source holders to Lixi, Inc.
17. All precautions and procedures as described in item 15 plus the following:
 1. Licensee will not remove the sealed source from the source holder.
 2. Leak test will be performed at six month intervals.
 3. Transport of materials will be in accordance with D.O.T. regulations.
 4. Source exchange will be through the manufacturer.
 5. All procedures covered by the Lixiscope instruction manual will be followed.
 6. During transport and at temporary job sites, the licensee will insure that the device is attended and secured at all times by the licensee, or locked in secure storage.
 7. In the event of an accident wherein damage to the Lixiscope occurs, NRC will be notified immediately.

8. Leak test will be performed every six months using the Stan A. Huber Consultants leak test kit, LT-2.


Applicant's signature

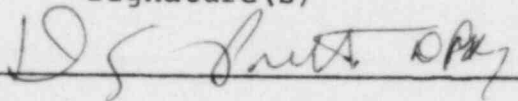
TRAINING CERTIFICATE

RADIATION SAFETY AND EXPERIENCE

Ref: NRC 3131 - Items 16 & 17

Item 16-Training

This certifies that the following individual(s) have taken the Lixi, Inc., Radiation Safety Course on file with the Nuclear Regulatory Commission:

Names (Type or Print)	Signature(s)
<u>Donald S. Pritt, DPM</u>	<u></u>
<u> </u>	<u> </u>
<u> </u>	<u> </u>
<u> </u>	<u> </u>
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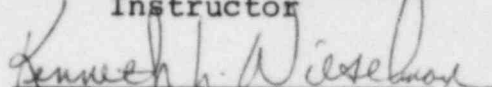
Item 17 - Experience

The applicant(s) and the instructor signing this certificate hereby attest that this document is executed in conformance to Title 10, Code of Federal Regulations and to the best of our belief, is true and correct. The applicant(s) has/have received instruction in the operation of the Lixiscope, and has operated a working model under the supervision of the instructor.

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.

Training completed: February 19, 1985
date

Certified by: Kenneth L. Wieselmann
Instructor

Signed: 
Instructor

Date: February 19, 1985

Under license #: 12-19730-01

DONALD S. PRITT, SURGEON PODIATRIST

Dr. Donald S. Pritt has practiced podiatric medicine in the States of West Virginia and Ohio for twenty eight years. He is active in the American Academy of Ambulatory Foot Surgery and is a graduate of the Illinois College of Podiatric Medicine. He has written and has been published in podiatric journals - nearly one hundred articles on various phases of foot treatment, diagnosis, testing procedures, patient relations, and professional relations. His special interest lies in corrective methods for complete foot rehabilitation. Additionally, Dr. Pritt has brought this information to the public in lectures, magazine and newspaper articles, and in personal presentations to his patients. For his efforts in scientific writing, he is a three-time recipient of the annual Maxwell N. Cupshan Memorial Award for professional excellence, the silver award, bestowed on him in April, 1975, and also the Bronze Award in April, 1978, by the Current Podiatry magazine. He has been Man-on-the-Cover of Current Podiatry magazine for his contributions to that magazine and the field of Podiatry. He served as trustee of the New York College of Podiatry and also is a contributing editor of Current Podiatry, inventor and holder of patents for running shoes and heel shock absorbers being distributed nationally and internationally.

Entrance

Waiting
Room

Up stairs

Steps to

Exam
Room

Locked * Storage for
Storage Scope

Front
Office

Storage

Hallway

Hallway

Storage

Exam Room

Bath Room

4 Rooms, Lab,
Bathrooms

Exam Room

Exam
Room

Kitchen

Dining
Area

Exam
Room

Back
Office

Storage

Storage

Charleston Office
#4 Columbia Ave
Charleston, W. Va

25302

Rear Entrance

11

Lixiscope - Training Course Outline

(Registration of Attendees and Introduction to Course)

1. Overview of federal NRC and Agreement State Regulations for Radiation Protection. (Special emphasis on 10CFR Parts 19 & 20)
2. General Radiation Safety Instructions to Workers.
NRC Regulation Guide
NRC Prenatal Exposure Instructions for any female worker
3. Need for Specific Radiation Safety Program for each Lixiscope Licensee (Regulations and License conditions)

(Question - Answer Session and Break)

4. Elements of an Effective Radiation Management Program
 - a) Restricted Users (only trained personnel can use Lixiscope).
 - b) Security against theft or loss of radioactive material (includes receiving procedures, key controls and return or disposal procedures).
 - c) Thorough familiarity of licensed users with individual facility application to NRC for licensure, as well as the license itself.
 - d) Accountability and specific secure storage area for the Lixiscope(s).
 - e) Quarterly inventory and source exchange or transfer or disposal records.
 - f) Semi-annual leak test records and how to use leak test kits.
 - g) Discussion of radiation surveys - if required by NRC.
 - h) Personnel exposure monitoring systems - film and TLD badges.
 - i) Maximum permissible doses (MPD) and how to read film badge reports.
 - j) "ALARA" philosophy - to keep radiation exposures as low as reasonably achievable.
 - k) NRC posting and labeling requirements and DOT requirements in any transportation.
 - l) Reason for R.S.O. and duties of this individual.
 - m) Advantages of centralized record system (recommended type).
 - n) Review of required reports and sample forms and "year at a glance" management chart.
 - o) Audits, annual safety reviews and preparation for inspections.
 - p) New users personnel orientation and license amendments.

(Question - Answer Session and Break)

5. Elements of an NRC license application.
 - a) Discuss licensing checklist resumes and individual or special needs.
 - b) Review licensing services or consultation available.

6. Review of the Lixiscope Instruction Manual and specific safety instructions.

- a) Characteristics of I-125 source and discussion of half-life.
- b) Inverse square law and basic radiation safety principles of time, distance and shielding.
- d) Demonstrate Lixiscope operation.
- e) Final Question and Answer Session.
- f) Test.
- g) Certification of Attendance or Completion.

Total Course Time = Approximately $4\frac{1}{2}$ to $5\frac{1}{2}$ hours with 3 ten minute breaks = 5 to 6 hours total time (not counting 15 minute test).

NOTE: These are very rough time estimates. With smaller classes it may be possible to complete the course in 2 or 3 hours total time.