NRC FORM 374
(7-94)

U.S. NUCLEAR REGULATORY COMMISSION

MATERIALS LICENSE

Amendment No. 24

Pursuant to the Atomic Energy Act of 1954, as amended, the Energy Reorganization Act of 1974 (Public Law 93-438), and Title 10, Code of Federal Regulations, Chapter I, Parts 30, 31, 32, 33, 34, 35, 36, 39, 40, and 70, and in reliance on statements and representations heretofore made by the licensee, a license is hereby issued authorizing the licensee to receive, acquire, possess, and transfer byproduct, source, and special nuclear material designated below; to use such material for the purpose(s) and at the place(s) designated below; to deliver or transfer such material to persons authorized to receive it in accordance with the regulations of the applicable Part(s). This license shall be deemed to contain the conditions specified in Section 183 of the Atomic Energy Act of 1954, as amended, and is subject to all applicable rules, regulations, and orders of the Nuclear Regulatory Commission now or hereafter in effect and to any conditions specified below.

301832

Licensee	
1. Heartland Hospital East	In accordance with letter dated September 9, 1996
2. 5325 Faraon Street St. Joseph, MO 64506	3. License Number 24-18287-01 is amended in its entirety to read as follows:
	4. Expiration Date July 31, 2004
	5. Docket or Reference No. 030-14791

6. Byproduct, Source, and/or Special Nuclear Material	7. Chemical and/or Physical Form	8. Maximum Amount that Licensee May Possess at Any One Time Under This License
A. Any byproduct material identified in 10 CFR 35.100	A. Any radiopharmaceutical identified in 10 CFR 35.100	A. As needed
B. Any byproduct material identified in 10 CFR 35.200	B. Any radiopharmaceutical identified in 10 CFR 35.200	B. As needed
C. Any byproduct material identified in 10 CFR 35.300	C. Any radiopharmaceutical identified in 10 CFR 35.300	C. As needed
D. Any byproduct material identified in 10 CFR 35.400	D. Any brachytherapy sources identified in 10 CFR 35.400	D. As needed
E. Any byproduct material identified in 10 CFR 35.500	E. Sealed sources identified in 10 CFR 35.500	E. As needed
F. Any byproduct material identified in 10 CFR 31.11	F. Prepackaged Kits	F. As needed
G. Iridium-192 190030	G. Brachytherapy source wire (RADS, Inc. Model SL-771)	G. Not to exceed 200 millicuries per wire source

9612190242 961127
PDR ADOCK 03014791
C PDR

COPY

Printed on recycled paper

License Number
24-18287-01

Docket or Reference Number
030-14791

Amendment No. 24

MATERIALS LICENSE
SUPPLEMENTARY SHEET

9. Authorized Use:

A. Medical use described in 10 CFR 35.100.

B. Medical use described in 10 CFR 35.200.

C. Medical use described in 10 CFR 35.300.

D. Medical use described in 10 CFR 35.400.

E. Medical use described in 10 CFR 35.500 in devices which have been evaluated and approved for licensing purposes by the U.S. Nuclear Regulatory Commission or an Agreement State.

F. In vitro studies.

G. To be used for interstitial and intercavitary treatment of cancer.

CONDITIONS

10. Locations of Use:
A. Heartland Hospital East
5325 Faraon Street
St. Joseph, Missouri

B. Heartland Medical Plaza
5325 Faraon Street
St. Joseph, MO 64506

11. Radiation Safety Officer: John H. Bartow, D.O.

12. Authorized Users:

A. Edward M. Stevens, M.D., for material in 10 CFR 35.100, 35.200, 35.300, 35.400, 35.500, 31.11 and Subitem 6.G.

B. R. Phillip Acuff, M.D., for material in 10 CFR 35.100, 35.200, 35.300, 35.500 and 31.11.

C. Robert C. Johnson, M.D., for material in 10 CFR 35.300, 35.400, 35.500 and Subitem 6.G.

D. Eshwar K. Reddy, M.D., for material in 10 CFR 35.400, 35.500 and Subitem 6.G.

E. Arthur Elman, M.D., for material in 10 CFR 35.400, 35.500 and Subitem 6.G.

F. Bruce Hoskins, M.D., for material in 10 CFR 35.400, 35.500 and Subitem 6.G.

COPY

MATERIALS LICENSE
SUPPLEMENTARY SHEET

License Number
24-18287-01

Docket or Reference Number
030-14791

Amendment No. 24

G. Robert Jon LacKamp, M.D., for material in 10 CFR 35.100, 35.200, 35.300, 35.500 and 31.11.

H. S. Chris Looney, M.D., for material in 10 CFR 35.100, 35.200, 35.300, 35.500 and 31.11.

I. Houman Sabahi, M.D., for material in 10 CFR 35.100, 35.200, 35.300, 35.500, and 31.11.

J. Jack L. Bridges, M.D., for material in 10 CFR 35.100, 35.200, 35.300, 35.500, and 31.11.

K. Stephen N. Blatt, M.D., for material in 10 CFR 35.100, 35.200, 35.500, and 31.11.

L. John H. Bartow, D.O., for material in 35.100, 35.200, 35.300 and 31.11.

M. Francisco Jesus Lammoglia, M.D., for material in 10 CFR 35.200 limited to cardiovascular clinical procedures.

N. Bonnie K. Goins, M.D., for material in 10 CFR 35.400 and 35.500.

13. A. The licensee may use the Lineator device for doing linearity tests of its dose calibrator provided it follows the procedures in the Atomic Products Corporation Lineator Instructions Manual dated June 20, 1983.

B. The licensee may use the Calicheck device for doing linearity tests of its dose calibrator provided it follows the procedures in the Calcorp, Inc., Manual dated March 2, 1982.

14. The licensee is authorized to transport licensed material only in accordance with the provisions of 10 CFR Part 71, "Packaging and Transportation of Radioactive Material."

15. In addition to the possession limits in Condition 8, the licensee shall further restrict the possession of licensed material to quantities below the minimum limit specified in 10 CFR 30.35(d) for establishing decommissioning financial assurance.

COPY

License Number
24-18287-01

Docket or Reference Number
030-14791

Amendment No. 24

MATERIALS LICENSE
SUPPLEMENTARY SHEET

16. Except as specifically provided otherwise in this license, the licensee shall conduct its program in accordance with the statements, representations, and procedures contained in the documents, including any enclosures, listed below, except for minor changes in the medical use radiation safety procedures as provided in 10 CFR 35.31. The U.S. Nuclear Regulatory Commission's regulations shall govern unless the statements, representations, and procedures in the licensee's application and correspondence are more restrictive than the regulations.

    A. Application dated May 19, 1994; and

    B. Letter dated September 8, 1994, January 17, 1995, January 25, 1995 and November 20, 1996.

FOR THE U.S. NUCLEAR REGULATORY COMMISSION

Date November 27, 1996

By [signature]
Nuclear Materials Licensing Branch, Region III

COPY

BETWEEN:

License Fee Management Branch, ARM
and
Regional Licensing Sections

(FOR LFMS USE)
INFORMATION FROM LTS

Program Code: 02120
Status Code: 0
Fee Category: 7C
Exp. Date: 20040731
Fee Comments: CODE 23
Decom Fin Assur Reqd: N

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED
Applicant/Licensee: HEARTLAND HOSPITAL EAST
Received Date: 960916
Docket No: 3014791
Control No.: 301832
License No.: 24-18287-01
Action Type: Amendment

2. FEE ATTACHED
Amount: 0
Check No.: 0

3. COMMENTS

Signed D. Hersey
Date 9-11-96

B. LICENSE FEE MANAGEMENT BRANCH (Check when milestone 03 is entered /✓/)

1. Fee Category and Amount: 7C $440

2. Correct Fee Paid. Application may be processed for:
Amendment ✓
Renewal
License

3. OTHER

Signed SC
Date 11/14/96

1996 SEP 20 AM 11:56

Log Sep 8 III
Remitter
Check No. 242504
Amount $440
Fee Category 7C
Type of Fee AMD
Date Check Rec'd
Date Completed 11/14/96
By: SC

NOV 21 1996

Heartland
Health System

September 9, 1996

U.S. Nuclear Regulatory Commission
Licensing Division Region III
801 Warrenville Road
Lisle, IL 60532-4351

Dear Sirs:

Please amend our radioactive materials license No. 24-18287-01 as follows:

Add to item 12 the following physicians as authorized users:

Jack L. Bridges, M.D. and *Stephen N. Blatt,* M.D. for material in 35.100, 35.200, 35.300, 35.500, and 31.11. Both of these physicians are Board Certified in Radiology by the American Board of Radiology and copies of their certificates are enclosed.

If you have any questions concerning the documentation or if we can be of any further assistance, please do not hesitate to call.

Sincerely,

DeWayne Bishop CNMT

Dewayne Bishop, CNMT
Nuclear Medicine Department
Radiology Services

RECEIVED
SEP 16 1996
REGION III

PM: 9-12-96

NOV 20 1996
SEP 16 1996
301832

5325 Faraon Street • St. Joseph, Missouri 64506-3398
Phone: 816-271-6000 FAX: 271-6569

PROPOSED PHYSICIAN USER

Jack L. Bridges M.D.

PRECEPTOR STATEMENT *(Continued)*

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

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
P-32 (Soluble)	TREATMENT OF POLYCYTHEMIA VERA, LEUKEMIA, AND BONE METASTASES	1	#1. A 99mTc generator was eluted 10 times and on each eluation the eluation was measured for 99mTc activity and 99Mo contamination.
P-32 (Colloidal)	INTRACAVITARY TREATMENT	Ø	
I-131	TREATMENT OF THYROID CARCINOMA	3	
	TREATMENT OF HYPERTHYROIDISM	12	
Au-198	INTRACAVITARY TREATMENT		
Co-60 or Cs-137	INTERSTITIAL TREATMENT		#2. Five types of kits were prepared including MDP Tc2-S7, MAA, Prophaspate and DTPA. For each kit the amount of activity was measured and the Q.C. for each preparation was evaluated.
	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	see #1	
Sn-113/ In-113m	GENERATOR		
Tc-99m	REAGENT KITS	see #2	
Other			

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

LOCATION — DATES — CLOCK HOURS OF EXPERIENCE

Diagnostic Radiology Residency July 1, 1988-June 30, 1992, Diagnostic Imaging which includes 6 months of Nuclear Medicine from Nov. 1, 1991 -June 30, 1992. Total Nuclear Medicien training greater than 1000 hours.

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

a. NAME OF SUPERVISOR

E. W. Allen, M.D.

b. NAME OF INSTITUTION

University of OK HSC

c. MAILING ADDRESS

P.O. Box 26901

d. CITY

OKC, OK 73190

5. MATERIALS LICENSE NUMBER(S)

35-21395-01 OK Teaching Hospitals

6. PRECEPTOR'S SIGNATURE

E W Allen

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

E. W. Allen, M.D.

8. DATE

6/15/93

EXHIBIT 3

SUPPLEMENT B

SUPPLEMENT **U. S. NUCLEAR REGULATORY COMMISSION**

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. PROPOSED PHYSICIAN USER'S NAME AND ADDRESS

FULL NAME: Jack L. Bridges M.D.

STREET ADDRESS: 9905 Memory Lane

CITY: Lebanon STATE: ILL ZIP CODE: 62254

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
	Thyroid scan	48	
	Thyroid uptake	29	
	Lung perfusion scan	52	
	Xenon ventilation study	Ø	
	Aerosol ventilation scan	12	
	Renal flow scan	108	
	Brain scan	6	
	Liver/spleen scan	22	
	Bone scan	251	
	Gastroesophageal study	5	
	LeVeen shunt study	1	
	Cystogram	43	
	Dacryocystogram	Ø	
	Cardiac perfusion scan.	198	
	Cardiac stress ventriculogram	68	
	Cardiac rest ventriculogram	175	
	Gallium scan	6	

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

U.S. NUCLEAR REGULATORY COMMISSION

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
Jack, Bridges, M.D.	Oklahoma

3. CERTIFICATION

SPECIALTY BOARD A	CATEGORY B	MONTH AND YEAR CERTIFIED C
American Board of Radiology	Diagnostic Radiology	6-1992

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	TYPE AND LENGTH OF TRAINING: SUPERVISED LABORATORY EXPERIENCE (Hours) D
Six months training program nuclear medicine approved by Accrediation Council for Graduate Medicine Education as identified in 10CFR35.920.b.			
a. RADIATION PHYSICS AND INSTRUMENTATION	University of Oklahoma Health Sciences Center Dept. of Radiology Sciences	60	50
b. RADIATION PROTECTION	" "	8	30
c. MATHEMATICS PERTAINING TO THE USE AND MEASUREMENT OF RADIOACTIVITY	" "	10	10
d. RADIATION BIOLOGY	" "	12	20
e. RADIOPHARMACEUTICAL CHEMISTRY	" "	10	20

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	1.7 Ci	University of OK Health Sciences Ctr. OK Teaching Hospital & Nuclear Pharmacy	Six months	Diagnostic & Therapeutic
99Mo	2.0 Ci			
131I	200 mCi			
201Tl	3 mCi			
133Xe	200mCi			
32P	15mCi			
169Y	0.5mCi			
67Ga	5 mCi			

EXHIBIT 3

SUPPLEMENT B

SUPPLEMENT

U. S. NUCLEAR REGULATORY COMMISSION

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. PROPOSED PHYSICIAN USER'S NAME AND ADDRESS

FULL NAME: Stephen N. Blatt

STREET ADDRESS: 10216 W. 80th apt 321

CITY: Overland Park | STATE: KS | ZIP CODE: 66204

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 planning 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
	Thyroid scan		All Board certification also licensed of Kansas City VA Medical center. Reference No. 030-02277 also NV License 03-12-0137-01 EXP 1986
	Thyroid uptake		
	Lung perfusion scan		
	Xenon ventilation study		
	Aerosol ventilation scan		
	Renal flow scan		
	Brain scan		
	Liver/spleen scan		
	Bone scan		
	Gastroesophageal study		
	LeVeen shunt study		
	Cystogram		
	Dacryocystogram		
	Cardiac perfusion scan.		
	Cardiac stress ventriculogram		
	Cardiac rest ventriculogram		
	Gallium scan		

Aug. 14 1996 08:46AM P3
PHONE NO. : 913 642 1222
FROM : Stephen N. Blatt

UNIVERSITY OF CALIFORNIA
SCHOOL OF MEDICINE
SAN FRANCISCO

THIS CERTIFIES THAT

Stephen N. Blatt, M.D.

HAS SERVED AS RESIDENT IN

Nuclear Medicine

August 1, 1977 - July 31, 1978

CHAIRMAN OF DEPARTMENT

DEAN, SCHOOL OF MEDICINE

The American Board of Radiology

Organized through the cooperation of the American College of Radiology, the American Roentgen Ray Society, the American Radium Society, the Radiological Society of North America, the Section on Radiology of the American Medical Association and the American Society of Therapeutic Radiologists

Hereby certifies that

Stephen N. Blatt, M.D.

Has pursued an accepted course of graduate study and clinical work, has met certain standards and qualifications and has passed the examination conducted under the authority of

The American Board of Radiology

Thereby demonstrating to the satisfaction of the Board that he is qualified to practice the specialty of

Diagnostic Radiology

And, further, the American Board of Radiology, acting in conjunction and cooperation with

The American Board of Nuclear Medicine

A conjoint board formed with the sponsorship of the American Board of Internal Medicine, the American Board of Pathology, The American Board of Radiology and the Society of Nuclear Medicine

On this the ninth day of June, 1978

acknowledges Special Competence in

Nuclear Radiology

THE AMERICAN BOARD OF RADIOLOGY INCORPORATED IN THE DISTRICT OF COLUMBIA 1934

Sidney W. Nelson
President
American Board of Radiology

F J Bonte MD
President
American Board of Nuclear Medicine

C. Allen Good
Secretary
American Board of Radiology

S. James Adelstein
Secretary
American Board of Nuclear Medicine

AMERICAN BOARD MEDICAL SPECIALTIES EXCELLENCE

EXHIBIT 3 (Continued)

PROPOSED PHYSICIAN USER
Stephen N. Blatt

PRECEPTOR STATEMENT *(Continued)*

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

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
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		
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

LOCATION	DATES	CLOCK HOURS OF EXPERIENCE
following for one year in Nuclear Medicine University of California San Francisco	1977-78	

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

a. NAME OF SUPERVISOR

b. NAME OF INSTITUTION

c. MAILING ADDRESS

d. CITY

e. MATERIALS LICENSE NUMBER(S)

5. PRECEPTOR'S SIGNATURE

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

8. DATE

DATE: 9-16-96

CORRESPONDENCE CLARIFICATION SHEET

REVIEWER: John Madera

LICENSEE: Heartland Hosp.

LICENSE NUMBER: 24-18287-01

The following correspondence has been received from the above licensee and it is not clear what action(s) is(are) required: Please review this correspondence and indicate which of the following applies, and please return to Debbie Hersey, as soon as possible.

- [ ] Additional Information to Control No. _____. Process in as a new action, additional information, and no fee required.
- [ ] Process as new licensing action. Review has already been started on Control No._____ and this information cannot be combined with current in-house action.
- [ ] Can be combined with Control No. _____. Review has not been started.
- [x] Appears to be a(n) Amend. please Process.
- [ ] Appears to be information for the license file - file it.
- [ ] Licensee is adding Nuclear Pharmacists.
  Amendment is necessary _____. Amendment is not necessary _____. (Information for license file)
- [x] Licensee is adding authorized users.
  A check is included _____. No check is included ✓.
  Amendment is necessary _____. Amendment is not necessary _____. (Information for the license file)
- [ ] Other:_____

Thank You For Your Help!!! 02/02/95

Mr. Bishop called 11/4/95, again wt what to make payable
Called 10/30/96, Dwayne Bishop Mrs

NRC FORM 577
(1-95)

U.S. NUCLEAR REGULATORY COMMISSION

LICENSE FEE REQUIREMENTS

LICENSE FEE AND DEBT COLLECTION BRANCH
DIVISION OF ACCOUNTING AND FINANCE
OFFICE OF THE CONTROLLER
U.S. NUCLEAR REGULATORY COMMISSION
WASHINGTON, DC 20555-0001

HEARTLAND HEALTH SYSTEM
ATTN; DEWAYNE BISHOP, CNMT
NUCLEAR MEDICINE DEPARTMENT
5325 FARAON STREET
ST. JOSEPH, MISSOURI 64506-6569

TYPE OF ACTION

- [ ] NEW LICENSE
- [ ] RENEWAL OF LICENSE
- [x] AMENDMENT TO LICENSE

REQUESTED DATE: 9-9-96

LICENSE NUMBER: 24-18287-01

CONTROL NUMBER: 301832

I. APPLICATION FEE DUE

Your request for a licensing action is subject to the fee(s) in the category(ies) noted below in accordance with Section 170.31 of the enclosed Federal Register notice. Payment of the fee is required prior to the issuance of the license, renewal, or amendment.

FEE CATEGORY	APPLICATION	RENEWAL	AMENDMENT
7C	$	$	$ 440.00
	$	$	$
	$	$	$
	$	$	$
	$	$	$
	$	$	$
	$	$	$
	$	$	$
	$	$	$
	$	$	$

FEE(s) DUE	$ 440.00
PAYMENT RECEIVED	$ 0.00
AMOUNT DUE	$ 440.00

- [x] Your request was received without the prescribed application fee.
- [ ] We received your Check No. _____ in the amount of $ _____. Payment of the additional fee noted above is required.
- [ ] Your request will increase the scope of your license program. Therefore, your request is subject to the application fee(s) noted above. Refer to Section 170.31 and Footnote 1(d)(2).
- [ ] Your license expired prior to the receipt of your application for renewal. Therefore, your request is subject to the application fee(s) noted above. Refer to Section 170.31 and Footnote 1(a).

MAKE PAYMENT OF THE FEE(S) TO THE U.S. NUCLEAR REGULATORY COMMISSION AND MAIL THE PAYMENT TO THE ADDRESS LISTED AT THE TOP OF THIS FORM. IF WE DO NOT RECEIVE A REPLY FROM YOU WITHIN 30 CALENDAR DAYS FROM THE DATE LISTED BELOW, WE SHALL ASSUME THAT YOU DO NOT WISH TO PURSUE YOUR APPLICATION AND WILL VOID THIS ACTION.

II. FEE NOT REQUIRED

- [ ] Enclosed is Check No. _____ which accompanied your request. The fee is not required because:
  - [ ] We received your Check No. _____ in payment of the fee.
  - [ ] The Licensing staff has informed us that your request is to be considered as a continuation of your request dated _____, Control No. _____.
  - [ ] Your request was combined, prior to review, with your _____ request, Control No. _____.

III. CHECK RETURNED

- [ ] Enclosed is Check No. _____ which was returned to us by the bank for:
  - [ ] INSUFFICIENT FUNDS
  - [ ] ACCOUNT CLOSED
  - [ ] OTHER

MAIL THE REPLACEMENT CHECK TO THE ADDRESS LISTED AT THE TOP OF THIS FORM AND REFERENCE THE ABOVE CONTROL NUMBER.

IV. LICENSE ISSUED WITHOUT THE REQUIRED FEE

- [ ] License No. _____, Amendment No. _____, issued on _____ was issued without the required fee being collected. The fee required is noted in Section I of this form.
- [ ] The scope of your licensed program was increased. Therefore, your request is subject to the application fee(s) noted in Section 1 of this form. Refer to Section 170.31 and Footnote 1(d)(2).
- [ ] Because of the urgency of your request, the license was issued without remittance of the prescribed fee noted in Section 1 of this form.

SIGNATURE – LICENSE FEE ANALYST	LFDCB	LFDCB
Sherley Crutchfield SC		
SHIRLEY CRUTCHFIELD	9/25/96	

Distribution: OC/DAF/RF
Pending Fee File OC/DAF/SF(LF-3.2.7)
FARB R/F (2) Region 3

DATE: Sept. 25, 1996

NRC FORM 577 (1-95)

This form was electronically produced by Elite Federal Forms, Inc.

DEC 0 2 1996

John H. Bartow, D.O.
Radiation Safety Officer
Heartland Hospital East
5325 Faraon Street
St. Joseph, MO 64506

Dear Dr. Bartow:

Enclosed is Amendment No. 24 to your NRC Material License No. 24-18287-01 in accordance with your request.

Please review the enclosed document carefully and be sure that you understand all conditions. If there are any errors or questions, please notify the U.S. Nuclear Regulatory Commission, Region III office at (630) 829-9887 so that we can provide appropriate corrections and answers.

Please be advised that we were unable to authorize Dr. Blatt for material in 10 CFR 35.300. If you would like to have him authorized at a later date, please submit information in accordance with 10 CFR 35.930(2)(i) and (2)(ii) to Control No. 301832 with no additional fee.

Please be advised that your license expires at the end of the day, in the month, and year stated in the license. Unless your license has been terminated, you must conduct your program involving byproduct materials in accordance with the conditions of your NRC license, representations made in your license application, and NRC regulations. In particular, note that you must:

1. Operate in accordance with NRC regulations 10 CFR Part 19, "Notices, Instructions and Reports to Workers; Inspections," 10 CFR Part 20, "Standards for Protection Against Radiation," and other applicable regulations.

2. Notify NRC, in writing, within 30 days:

   a. When an authorized user or Radiation Safety Officer permanently discontinues performance of duties under the license or has a name change; or

   b. When the licensee's mailing address changes (no fee is required if the location of byproduct material remains the same).

301832

3. In accordance with 10 CFR 30.36(b) and/or license condition, notify NRC, promptly, in writing, and request termination of the license when you decide to terminate all activities involving materials authorized under the license.

4. Request and obtain a license amendment before you:

   a. Receive or use byproduct material for a clinical procedure permitted under Part 35 but not permitted by your license issued pursuant to this Part;

   b. Permit anyone, except individuals described in 10 CFR 35.13(b), to work as an authorized user under the license;

   c. Change Radiation Safety Officers;

   d. Order byproduct material in excess of the amount, or radionuclide, or form different than authorized on the license;

   e. Add or change the areas of use or address or addresses of use identified in the license application or on the license; or

   f. Change ownership of your organization.

5. Submit a complete renewal application with proper fee or termination request at least 30 days before the expiration date of your license. You will receive a reminder notice approximately 90 days before the expiration date. Possession of byproduct material after your license expires is a violation of NRC regulations. A license will not normally be renewed, except on a case-by-case basis, in instances where licensed material has never been possessed or used.

In addition, please note that NRC Form 313 requires the applicant, by his/her signature, to verify that the applicant understands that all statements contained in the application are true and correct to the best of the applicant's knowledge. The signatory for the application should be the licensee or certifying official rather than a consultant.

You will be periodically inspected by NRC. Failure to conduct your program in accordance with NRC regulations, license conditions, and representations made in your license application and supplemental correspondence with NRC will result in enforcement action against you. This could include issuance of a notice of violation, or imposition of a civil penalty, or an order suspending, modifying or revoking your license as specified in the General Policy and Procedures for NRC Enforcement Actions. Since serious consequences to employees and the public can result from failure to comply with NRC requirements,

prompt and vigorous enforcement action will be taken when dealing with licensees who do not achieve the necessary meticulous attention to detail and the high standard of compliance which NRC expects of its licensees.

Sincerely,

Original Signed By
Gidget Watson
Nuclear Materials Licensing Branch

License No.: 24-18287-01
Docket No.: 030-14791

Enclosure: Amendment No. 24

DOCUMENT NAME: M:\03014791.CL6

To receive a copy of this document, indicate in the box: "C" = Copy without attachment/enclosure "E" = Copy with attachment/enclosure "N" = No copy

OFFICE	DNMS/RIII								
NAME	GWATSON:jaw								
DATE	10/2/96								

OFFICIAL RECORD COPY

Heartland Regional Medical Center

November 20, 1996

Ms. Gidgett Watson
Nuclear Regulatory Commission
801 Warrenville Road
Lyle, IL 60532

Dear Ms. Watson:

I am submitting this letter for your files giving DeWayne Bishop, CNMT, authorization to act in NRC matters on behalf of Heartland Regional Medical Center. I am also stating he was acting on behalf of Heartland Regional Medical Center in submitting Dr. Blatt and Dr. Bridges to be added to license #24-18287-01.

Thank you for your attention to this matter.

Sincerely,

Mark H Shuter

Mark H. Shuter
Chief Operating Officer

RECEIVED
NOV 25 1996
REGION III

5325 Faraon Street • St. Joseph, Missouri 64506-3398
Phone: 816-271-6000 FAX: 816-271-6569

PM 11/21/96

NOV 25 1996

00812522

State of Missouri

Department of Economic Development
Division of Professional Registration
Board of Registration for the Healing Arts

PHYSICIAN AND SURGEON

ISSUED: 10/[illegible]
JACK L. BRID[illegible]

VALID THROUGH JAN[illegible] 1997

Signature Jack L. Bridges MD

ORIGINAL CERTIFICATE/LICENSE NO. MD 102182

RECEIVED
NOV 25 1996
REGION III

NOV 2 5 1996

PM 11/21/96

STATE OF MISSOURI
DIVISION OF
PROFESSIONAL REGISTRATION

346062

MISSOURI BOARD OF HEALING ARTS

STEPHEN N BLATT M.D.

Valid Through 01/97 CERT / LIC # MD 26464

PHYSICIAN AND SURGEON

NOV 25 1996

CONVERSATION RECORD

TIME | DATE 10/28/96

O VISIT O CONFERENCE X TELEPHONE

O INCOMING
X OUTGOING

NAME OF PERSON(S) CONTACTED OR IN CONTACT	ORGANIZATION (OFFICE, DEPT.ETC.)	TELEPHONE NO.
Dwayne Bishop, CNMT	Heartland Hosp. East	816/271-6000

SUBJECT
License No. 24-18287-01

SUMMARY
I requested the following information in regards to amendment request dated 9/9/96:

1. Verification of signature.

2. Verification of Missouri license for Drs. Blatt and Bridges.

Mr. Bishop stated that he would forward the information ASAP.

ACTION REQUIRED

NAME OF PERSON DOCUMENTING CONVERSATION	SIGNATURE	DATE
Vickie Watson		10/28/96

ACTION TAKEN

SIGNATURE	TITLE	DATE

UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION III
801 WARRENVILLE ROAD
LISLE, ILLINOIS 60532-4351

September 18, 1996

John H. Bartow, D.O.
Radiation Safety Officer
Heartland Hospital East
5325 Faraon Street
St. Joseph, MO 64506

SUBJECT: ACKNOWLEDGEMENT OF CORRESPONDENCE
(Letter Dated 09/09/96)

Dear Licensee:

In response to your request, we have completed the initial processing, which is an administrative review of your application for a(n):

__ New License X Amendment __ Renewal
__ Termination ___ Auth User (Amendment not required)
__ Other_____

No administrative deficiencies were identified during this initial review. However, it should be noted that a technical review may identify omissions in the submitted information.

It appears that your request is routine (see 1-3 below, as applicable).

1. New and amendment actions are normally processed within 90 days, unless we find major deficiencies, or policy issues requiring central program office assistance.

2. Renewal actions are normally processed within 180 days, however, under timely filing (before expiration), you may continue to operate under your existing license.

3. Termination actions are normally processed within 90 days, unless confirmatory surveys following decontamination/decommissioning activities are involved.

A copy of your correspondence has been forwarded to our Licensing Fee and Debt Collection Branch (301/415-6097) for approval of the fee category and amount, if required.

If you have a compelling safety or business-related reason for requesting expedited review, please contact the Materials Licensing Branch at (630) 829-9887. We will try to complete your request as soon as practicable. Any correspondence about this request should reference the control number.

Nuclear Materials Support Branch

Mail Control No. 301832
License No. 24-18287-01