

## MATERIALS LICENSE

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.

301963

<p>Licensee</p> <p>1. Bon Secours Hospital</p> <p>2. 468 Cadieux Grosse Pointe, MI 48230</p>	<p>In accordance with letters dated October 7, 1996 and November 8, 1996</p> <p>3. License Number 21-16868-01 is amended in its entirety to read as follows:</p> <p>4. Expiration Date October 31, 2001</p> <p>5. Docket or Reference No. 030-11777</p>	
<p>6. Byproduct, Source, and/or Special Nuclear Material</p> <p>A. Any byproduct material identified in 10 CFR 35.100</p> <p>B. Any byproduct material identified in 10 CFR 35.200</p> <p>C. Any byproduct material identified in 10 CFR 35.300</p> <p>D. Any byproduct material identified in 10 CFR 31.11</p>	<p>7. Chemical and/or Physical Form</p> <p>A. Any radiopharmaceutical identified in 10 CFR 35.100</p> <p>B. Any radiopharmaceutical identified in 10 CFR 35.200 (excluding Xenon-133 and generators)</p> <p>C. Any radiopharmaceutical identified in 10 CFR 35.300 (excluding Iodine-131 for thyroid carcinoma therapy)</p> <p>D. Prepackaged Kits</p>	<p>8. Maximum Amount that Licensee May Possess at Any One Time Under This License</p> <p>A. As needed</p> <p>B. As needed</p> <p>C. As needed</p> <p>D. As needed</p>

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MATERIALS LICENSE  
SUPPLEMENTARY SHEET

License Number

21-16868-01

Docket or Reference Number

030-11777

Amendment No. 07

9. Authorized Use:

- A. Medical use described in 10 CFR 35.100.
- B. Medical use described in 10 CFR 35.200 (excluding Xenon-133 and generators).
- C. Medical use described in 10 CFR 35.300 (excluding Iodine-131 for thyroid carcinoma therapy).
- D. In vitro studies.

10. Locations of Use:

- A. 468 Cadieux, Grosse Pointe, Michigan.
- B. Bon Secours Diagnostic Center, 25990 Kelly Road, Suite 3, Roseville, Michigan 48066, limited to material in 10 CFR 35.100 and 35.200 (excluding Xenon-133).

11. Radiation Safety Officer: Cynthia L. Blount, D.O.

12. Authorized User:

- A. James M. Kuhlman, M.D., for material in 10 CFR 35.100, 35.200 (excluding xenon-133 and generators), 35.300 (excluding Iodine-131 for thyroid carcinoma therapy) and 31.11.
- B. David Bryer, M.D., for material in 10 CFR 35.100, 35.200 (excluding xenon-133 and generators) and 31.11.
- C. James E. Denier, M.D., for material in 10 CFR 35.100, 35.200 (excluding xenon-133) and 35.300 (excluding Iodine-131 for thyroid carcinoma therapy) and 31.11.
- D. Cynthia L. Blount, D.O., for material in 10 CFR 35.100, 35.200 (excluding xenon-133) and 35.300 (excluding iodine-131 for thyroid carcinoma therapy) and 31.11.
- E. Rob Allen Reed, M.D., for material in 10 CFR 35.100, 35.200 (excluding xenon-133 and generators) and 31.11.
- F. Vito A. Casano, M.D., for material in 10 CFR 35.100, 35.200 (excluding xenon-133 and generators) and 31.11.

COPY

MATERIALS LICENSE  
SUPPLEMENTARY SHEET

License Number

21-16868-01

Docket or Reference Number

030-11777

Amendment No. 07

13. 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 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 July 30, 1991; and
- B. Letter dated May 26, 1992, with enclosures.

FOR THE U.S. NUCLEAR REGULATORY COMMISSION

Date 6 December 1996

By William P. Reichhold  
Nuclear Materials Licensing Branch, Region III

COPY

(FOR LFMS USE)  
INFORMATION FROM LTS

BETWEEN:

License Fee Management Branch, ARM  
and  
Regional Licensing Sections

Program Code: 02120  
Status Code: 0  
Fee Category: 7C  
Exp. Date: 20011031  
Fee Comments:  
Decom Fin Assur Req'd: N

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED

Applicant/Licensee: BON SECOURS HOSPITAL  
Received Date: 961021  
Docket No: 3011777  
Control No.: 301963  
License No.: 21-16868-01  
Action Type: Amendment

2. FEE ATTACHED

Amount: 430  
Check No.: 206197

3. COMMENTS

Signed  
Date

D. Hersey  
10-25-96

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  
Date

SC  
11/18/96

NOV 26 1996

Log	Oct 11 III
Remitter	
Check No.	206197 / 208129
Amount	\$430 + \$10
Fee Category	7C
Type of Fee	AMD
Date Check Rec'd	10/25/96
Date Completed	11/18/96
By:	SC

1996 OCT 25 AM 11:11

57

October 7, 1996



BON SECOURS OF MICHIGAN  
HEALTHCARE SYSTEM, INC.

US Nuclear Regulatory Commission  
801 Warrenville Road  
Lisle, IL 60532-4352

att: Materials and Licensing

Re: License No. 21-168968-01  
Bon Secours Hospital

Dear Sir or Madam:

1. Please add Cynthia Louise Blount, D.O. as an authorized user for 10CFR Part 35.100, 35.200, and 35.300 materials. Dr. Blount is AOBR certified in Diagnostic Radiology as of September 15, 1995. Certification and training documents (supplements A and B) are enclosed. Dr. Blount has performed approximately 20 hyperthyroid therapies and 20 thyroid carcinoma ablations using NAL-131. (See attached case log and supplement B.)
2. Please remove James Kuhlman as Radiation Safety Officer. Dr. Kuhlman will remain as an authorized user at this facility.
3. Please add Dr. Blount<sup>1</sup> as the new Radiation Safety Officer.

Enclosed is a check for \$430.00 made payable to the US NRC to cover the cost of this amendment.

Sincerely,

Norbert Radzialowski, Director  
Radiology

NR:bg  
enclosures

*Pm: 10-14-96*

RECEIVED  
OCT 21 1996  
REGION III

OCT 21 1996  
301963



TRAINING AND EXPERIENCE  
AUTHORIZED USER OR RADIATION SAFETY OFFICER

Approved by OMB  
3150-0041  
Expires 6-30-89

1. NAME OF AUTHORIZED USER OR RADIATION SAFETY OFFICER  Cynthia Louise Blount, D.O.	2. STATE OR TERRITORY IN WHICH LICENSED TO PRACTICE MEDICINE  Michigan
---	--

3. CERTIFICATION

SPECIALTY BOARD A	CATEGORY B	MONTH AND YEAR CERTIFIED C
American Osteopathic Board of Radiology	Diagnostic Radiology	September 15, 1995
	Nuclear Medicine Specialty Boards	April 1997 (pending)

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	At least 200 hours in categories a. - e. during diagnostic radiology residency and residency in nuclear medicine (see attached certificate).		
b. RADIATION PROTECTION			
c. MATHEMATICS PERTAINING TO THE USE AND MEASUREMENT OF RADIOACTIVITY			
d. RADIATION BIOLOGY			
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
Greater than 500 hours in the above listed residency program for all commonly used radiopharmaceuticals in nuclear medicine.				

NRC FORM 313M SUPPLEMENT B  
(9-81)

U. S. NUCLEAR REGULATORY COMMISSION

## PRECEPTOR STATEMENT

Approved by OMB  
3160-0041  
Expires 9-30-86

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

Cynthia Louise Blount

STREET ADDRESS

Bon Secours Hospital

458 Cadieux Grosse Pointe, MI

CITY

STATE

ZIP CODE

48230

## 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 sheet B) D
I-131 or I-125	DIAGNOSIS OF THYROID FUNCTION		See attached supplement for a detailed description of studies completed during preceptorship.
	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		
Sm-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		
OTHER	BONE IMAGING		
OTHER			

NRC FORM 313M SUPPLEMENT B  
(9-81)

Page 6

Faxed  
10/16/96  
Jm

## 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 sheet(s).) D
P-32 (Soluble)	TREATMENT OF POLYCYTHEMIA VERA, LEUKEMIA, AND BONE METASTASES		see attached case log
P-32 (Colloid)	INTRACAVITARY TREATMENT		
I-131	TREATMENT OF THYROID CARCINOMA	15	
	TREATMENT OF HYPERTHYROIDISM	25	
Au-198	INTRACAVITARY TREATMENT		
Co-60 or Cs-137	INTERSTITIAL TREATMENT		
Co-60 or Cs-137	INTRACAVITARY TREATMENT		
I-125 or I-192	INTERSTITIAL TREATMENT		
Co-60 or Cs-137	TELETHERAPY TREATMENT		
Sr-90	TREATMENT OF EYE DISEASE		
	RADIOPHARMACEUTICAL PREPARATION		
Mo-99/ Tc-99m	GENERATOR		
Sr-90/ Y-90	GENERATOR		
Tc-99m	REAGENT KITS		
Other:			

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

The attached case log included preparation and handling of radioisotopes.  
Total hours far exceed the required 500 hours.

7/1/95 - 6/30/96

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

a. NAME OF SUPERVISOR

Howard Dworkin, M.D.

b. NAME OF INSTITUTION

Beaumont Hospital

c. MAILING ADDRESS

3601 West 13 Mile Road

d. CITY

Royal Oak, MI 48073

## 5. MATERIALS LICENSE NUMBER(S)

21-01333-01

## 6. PRECEPTOR'S SIGNATURE

*Howard Dworkin MD*

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

Howard Dworkin, M.D.

## 8. DATE

10/3/96



NUCLEAR RADIOLOGY  
Case Log

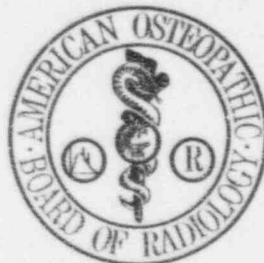
List only the number of procedures you have personally dictated or performed.  
Do not list the statistics for your entire department.

Abscess/IN-111 WBC	<u>63</u>	Schilling with	
Technetium WBC (Cerotec)	<u>26</u>	Intrinsic Factor	<u>13</u>
Bone Spect	<u>500</u>	Spleen-Traumatic	<u>0</u>
Bone Spots/Planar	<u>1582</u>	Spleen-Traumatic SPECT	<u>0</u>
Bone - 3 Phase	<u>550</u>	Testicular/With Flow	<u>0</u>
Bone - 4 Phase	<u>550</u>	Thallium/Adenosine	<u>350</u>
Bone Whole Body	<u>1582</u>	Thallium-201-Resting	<u>750</u>
Bone Densitometry	<u>26</u>	Thallium Resting SPECT	<u>750</u>
Joint Scan (Synovial)	<u>0</u>	Thallium Stress SPECT	<u>750</u>
Extremity Flow Study	<u>550</u>	Thallium Thrombolytic Study	<u>0</u>
Cardiac Output	<u>0</u>	Thyroid-I-131	
Cardiac Flow	<u>0</u>	Therapy/Abl: ion	<u>40</u>
Cerebral Perfusion		Thyroid-TC 99M Scan	<u>363</u>
SPECT W/O Diamox	<u>258</u>	Thyroid-I-131 Uptake	<u>48</u>
Cerebral Perfusion		Thyroid-I-123 Uptake and Scan	<u>0</u>
SPECT/Spectamine I-123	<u>16</u>	Parathyroid Scanning	<u>25</u>
Cerebral Shunt Patency	<u>0</u>	Salivatory Gland Scan	<u>5</u>
Cisternography	<u>17</u>	Cytomel Suppression	<u>125</u>
Deep Vein Thrombosis	<u>0</u>	TSH Immulation	<u>100</u>
Emergency Post Hrs.	<u>600</u>	Tomography	<u>75</u>
Exercise Tolerance Test	<u>0</u>	Ventricular Eject, FR	
Gallium Osteo-Inflammatory	<u>60</u>	1st Pass/Right	<u>5</u>
Gallium Tumor Detection	<u>30</u>	Ventricular Eject, FR	
GI Bleed-Invivo RBC's	<u>75</u>	Resting Left	<u>20</u>
GE Reflex	<u>30</u>	Ventricular Eject, FR	
Gastroistic Emptying Study	<u>34</u>	Stressed Left	<u>15</u>
Mekel Scan	<u>15</u>	Gated Blood Pole Study	<u>0</u>
Hepatobiliary Scan	<u>103</u>	Whole Body-I-123 Scan	<u>0</u>
Liver SPECT	<u>32</u>	Whole Body-I-131	
Liver-Spleen Scan	<u>40</u>	Therapy/Cancer	<u>40</u>
Liver Flow	<u>0</u>	Whole Body-I-131 Scan	<u>40</u>
Leveen Shunt Patency	<u>5</u>		
Lung Perfusion	<u>148</u>	Cr 51 tagged RBC	<u>43</u>
Lung Vent, DTPA Aerosol	<u>140</u>	PET Heart	<u>49</u>
Lung Ventilation (Xenon)	<u>0</u>	PET Brain	<u>217</u>
Myocardial Hot Spot	<u>0</u>	PET Oncology	<u>13</u>
Myocardial Hot Spot SPECT	<u>0</u>	C4 urea breath	<u>36</u>
Inferior or Superior		Total Blood Volume	<u>43</u>
Venal Caval Flow	<u>0</u>	Cardiolite Rest/Stress	<u>203</u>
Portable Scan	<u>95</u>	Bone Marrow	<u>75</u>
Renal GFR	<u>20</u>	Adrenal MIBG	<u>10</u>
Renal-Function	<u>96</u>	P 32 Therapy	<u>1</u>
Renal DMSA	<u>75</u>	Esophageal Motility	<u>5</u>
Renal Tc-MAG 3	<u>5</u>		
GU Reflex	<u>5</u>		
Testicular Scan and Flow	<u>0</u>		
Schilling W/O			
Intrinsic Factor	<u>64</u>		

# The American Osteopathic Association

upon recommendation  
of the

## American Osteopathic Board of Radiology



certifies that

**Cynthia Louise Blount, D.O.**

having met the prescribed qualifications and standards and  
passed the required examinations of this Board,  
is qualified as a specialist in

**Diagnostic Radiology**

and is hereby awarded this certificate as of  
September 15, 1995

American Osteopathic Association

*Robert P. Roberts*  
Executive Director

American Osteopathic Board of Radiology

*John Kraus, D.O., FAOCR*  
Chairman

*Michael K. Willman, D.O., FA*  
Secretary

Certificate No. 0815



# William Beaumont Hospital Royal Oak, Michigan

This certifies that

Cynthia Louise Blount, D.O.

Has served as a

Resident in Nuclear Medicine

From July 1, 1995 to June 30, 1996

*W. James*

Chairman, Board of Directors

*Z. L. Swarkin M.D.*

Program Director



*K. W. Fick*

Hospital Director

*Robert Redman*

Medical Director

## 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 20555-0001BON SECOURS OF MICHIGAN HEALTH  
CARE SYSTEM, INC.  
ATTN: NORBERT RADZIALOWSKI  
DIRECTOR OF RADIOLOGY  
468 CARIEUX ROAD  
GROSSE POINTE, MICHIGAN 48230

## TYPE OF ACTION

- ☐ NEW LICENSE  
☐ RENEWAL OF LICENSE  
☒ AMENDMENT TO LICENSE

REQUESTED DATE

10-7-96

LICENSE NUMBER

21-16868-01

CONTROL NUMBER

301963

## 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	\$	430.00
AMOUNT DUE	\$	10.00

☐ Your request was received without the prescribed application fee.

☒ We received your Check No. 206197 in the amount of \$ 430.00. 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.

SIGNATURE - LICENSE FEE ANALYST	LFDCB	LFDCB
<i>Shirley Crutchfield</i>		
SHIRLEY CRUTCHFIELD	10/28/96	

## 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 I 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 I of this form.

Distribution: OC/DAF/R/F  
Lending Fee File OC/DAF/SF(LF-3 2.7)  
FARB R/F (2) *[Signature]*

DATE

Oct. 28, 1996

DEC 06 1996

Norbert Radzialowski  
Director of Radiology  
Bon Secours Hospital  
468 Cadieux  
Grosse Pointe, MI 48230

Dear Mr. Radzialowski:

Enclosed is Amendment No. 07 to your NRC Material License No. 21-16868-01 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 note we have extended the expiration date of the license for five years in accordance with the regulations (10 CFR 30.36).

Also note, we have removed the license condition requiring decommissioning records because this requirement is in the regulations.

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).

30/963



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

N. Radzialowski

-3-

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  
William P. Reichhold  
Nuclear Materials Licensing Branch

License No. 21-16868-01  
Docket No. 030-11777

Enclosure: Amendment No. 07

DOCUMENT NAME: M:\03011777.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 <i>WPR</i>							
NAME	WPreichhold:brt							
DATE	11/ <i>4</i> /96							

OFFICIAL RECORD COPY



BON SECOURS OF MICHIGAN  
HEALTHCARE SYSTEM, INC.

November 8, 1996

U.S. Nuclear Regulatory Commission  
Region III, Materials & Licensing Section  
801 Warrenville Road  
Lisle, Illinois 60532-4351

Re: NRC License Amendment  
Bon Secours Hospital  
License No. 21-16868-01  
Control Number 301963

Dear Sir or Madam:

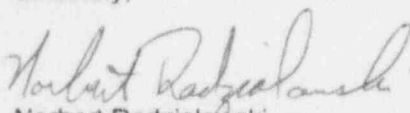
Please include this additional information with our current amendment request that adds Dr. Blount as an authorized user and RSO.

Please add Rob Allen Reed, M.D., as an authorized user for 10 CFR Part 35.100 and 35.200 materials. Dr. Reed received his ABR certification on June 9, 1994. Enclosed is a copy of this certification.

Also, please add Vita A. Casano, M.D., as an authorized user for 10 CFR, Part 35.100 and 35.200 materials. Dr. Casano received his ABR certification on November 25, 1991. Enclosed is a copy of this certification.

If you have any questions concerning this application, please contact us at 313-343-1636 or our consulting physicist, Neil Keller, at 313-662-3197.

Sincerely,

  
Norbert Radzialowski  
Director, Radiology

/bg

RECEIVED  
NOV 12 1996  
REGION III

Pm: 11-8-96

NOV 12 1996

# The American Board of Radiology

Organized through the cooperation of the  
American College of Radiology, the American Roentgen Ray Society,  
the American Radiology Society, the Radiological Society of South America,  
the Section on Radiology of the American Medical Association,  
the American Society for Therapeutic Radiology and Oncology, the Association of  
University Radiologists, and American Association of Physicians in Medicine  
Thereby certifies that

**Rob Allen Reed**

Has pursued an accepted course of graduate study  
and clinical work, has met certain standards and qualifications and  
has passed the examinations conducted under the authority of  
The American Board of Radiology

On this ninth day of June, 1934

Whereby demonstrating to the satisfaction of the Board  
that he is qualified to practice the specialty of  
Diagnostic Radiology



Tested by  
F. H. Reed, M.D. Secretary-Treasurer  
M. D. Reed, M.D. Executive Director

AMERICAN  
BOARD OF  
RADIOLOGY  
MEDICAL STAFF

# The American Board of Radiology

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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,  
the American Society for Therapeutic Radiology and Oncology,  
and the Federation of University Radiologists.  
Thereby certifies that

**Wm A. Casano, M.D.**

Has pursued an accepted course of graduate study  
and clinical work, has met certain standards and qualifications and  
has passed the examinations conducted under the authority of  
The American Board of Radiology

On this twenty-fifth day of November, 1951

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

**Diagnostic Radiology**

*Frank J. Murphy* Secretary-Treasurer *Frank J. Murphy* Executive Director







BON SECOURS OF MICHIGAN  
HEALTHCARE SYSTEM, INC.

November 8, 1996

U.S. Nuclear Regulatory Commission  
Region III, Materials & Licensing Section  
801 Warrenville Road  
Lisle, Illinois 60532-4351

Re: NRC License Amendment  
Bon Secours Hospital  
License No. 21-16868-01  
Control Number 301963

Dear Sir or Madam:

Please include this additional information with our current amendment request that adds Dr. Blount as an authorized user and RSO.

Please add Rob Allen Reed, M.D., as an authorized user for 10 CFR Part 35.100 and 35.200 materials. Dr. Reed received his ABR certification on June 9, 1994. Enclosed is a copy of this certification.

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Norbert Radzialowski  
Director, Radiology

/bg

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the American Society for Therapeutic Radiology and Oncology, the Association of  
University Radiologists, and American Association of Physicists in Medicine  
Hereby certifies that

**Rob Allen Reed**

Has pursued an accepted course of graduate study  
and clinical work, has met certain standards and qualifications and  
has passed the examinations conducted under the authority of  
The American Board of Radiology

On this ninth day of June, 1994

Whereby demonstrating to the satisfaction of the Board  
that he is qualified to practice the specialty of  
Diagnostic Radiology



For Rogers MD Date of Exam M. Paul Capt. M.D.  
President Secretary Executive Director



# The American Board of Radiology

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the Section on Radiology of the American Medical Association,  
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and the Association of University Radiologists

Hereby certifies that

**Wm A. Casano, M.D.**

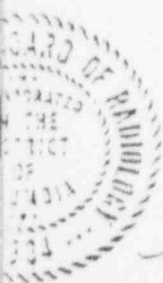
Has pursued an accepted course of graduate study  
and clinical work, has met certain standards and qualifications and  
has passed the examinations conducted under the authority of

The American Board of Radiology

On this twenty-fifth day of November, 1931.

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

**Diagnostic Radiology**



*Wm J. ...* *Charles H. ...* *Frank L. ...*  
President Secretary Treasurer





UNITED STATES  
NUCLEAR REGULATORY COMMISSION

REGION III  
801 WARRENVILLE ROAD  
LISLE, ILLINOIS 60532-4351

October 22, 1996

Cynthia Louise Blount, D.O.  
Radiation Safety Officer  
Bon Secours Hospital  
468 Cadieux Road  
Grosse Pointe, MI 48230

SUBJECT: ACKNOWLEDGEMENT OF CORRESPONDENCE  
(Letter Dated 10/07/96)

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                      ☒ 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. 301963  
License No. 21-16868-01