

FORM NRC-313M (8-78) 10 CFR 35	U.S. NUCLEAR REGULATORY COMMISSION <b>APPLICATION FOR MATERIALS LICENSE – MEDICAL</b>	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 Department of the Army Martin Army Community Hospital ATTN: HSXB-PM-HP Fort Benning, GA 31905-6100 TELEPHONE NO.: AREA CODE ( ) _____	1.b. STREET ADDRESS(ES) AT WHICH RADIOACTIVE MATERIAL WILL BE USED (if different from 1.a.) INCLUDE ZIP CODE  Same as item 1a
2. PERSON TO CONTACT REGARDING THIS APPLICATION  Charles R. Williams, SSG, USA TELEPHONE NO.: AREA CODE 404 ) 544-1554	3. THIS IS AN APPLICATION FOR: (Check appropriate item) a. <input type="checkbox"/> NEW LICENSE b. <input checked="" type="checkbox"/> AMENDMENT TO LICENSE NO. 10-06493-02 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.)	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.)  Mary E. Thompson, 1LT, MSC

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
8510240225 850916 REG3 LIC30 10-06493-02 PDR			FEE EXEMPT

# 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 checked="" 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 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 checked="" type="checkbox"/>	Supplements A & B Attached for Each Individual User; and	<input 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 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 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 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 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 type="checkbox"/>	Equivalent Procedures Attached	23. PROCEDURES AND PRECAUTIONS FOR USE OF RADIOACTIVE MATERIAL SPECIFIED IN ITEM 6.b	
<input type="checkbox"/>	Detailed Information Attached		

## 24. PERSONNEL MONITORING DEVICES

TYPE (Check appropriate box)		SUPPLIER	EXCHANGE FREQUENCY
a. WHOLE BODY	FILM		
	TLD		
	OTHER (Specify)		
b. FINGER	FILM		
	TLD		
	OTHER (Specify)		
c. WRIST	FILM		
	TLD		
	OTHER (Specify)		

d. OTHER (Specify)

## 25. FOR PRIVATE PRACTICE APPLICANTS ONLY

a. HOSPITAL AGREEING TO ACCEPT PATIENTS CONTAINING RADIOACTIVE MATERIAL			b. ATTACH A COPY OF THE AGREEMENT LETTER SIGNED BY THE HOSPITAL ADMINISTRATOR.
NAME OF HOSPITAL			
MAILING ADDRESS			
CITY	STATE	ZIP CODE	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) JOHN C. RICHARDS, M.D., COL, MC
(1) LICENSE FEE CATEGORY: Exempt under 10 CFR 170.11	(2) TITLE Commander, Martin Army Community Hospital
(2) LICENSE FEE ENCLOSED: \$	c. DATE 7 Aug 85

## PRIVACY ACT STATEMENT

Pursuant to 5 U.S.C. 552a(e)(3), enacted into law by section 3 of the Privacy Act of 1974 (Public Law 93-579), the following statement is furnished to individuals who supply information to the Nuclear Regulatory Commission on Form NRC-313M. This information is maintained in a system of records designated as NRC-3 and described at 40 Federal Register 45334 (October 1, 1975).

1. **AUTHORITY** Sections 81 and 161(b) of the Atomic Energy Act of 1954, as amended (42 U.S.C. 2111 and 2201(b)).
2. **PRINCIPAL PURPOSE(S)** The information is evaluated by the NRC staff pursuant to the criteria set forth in 10 CFR Parts 30-36 to determine whether the application meets the requirements of the Atomic Energy Act of 1954, as amended, and the Commission's regulations, for the issuance of a radioactive material license or amendment thereof.
3. **ROUTINE USES** The information may be used: (a) to provide records to State health departments for their information and use; and (b) to provide information to Federal, State, and local health officials and other persons in the event of incident or exposure, for their information, investigation, and protection of the public health and safety. The information may also be disclosed to appropriate Federal, State, and local agencies in the event that the information indicates a violation or potential violation of law and in the course of an administrative or judicial proceeding. In addition, this information may be transferred to an appropriate Federal, State, or local agency to the extent relevant and necessary for a NRC decision or to an appropriate Federal agency to the extent relevant and necessary for that agency's decision about you. A copy of the license issued will routinely be placed in the NRC's Public Document Room, 1717 H Street, N.W., Washington, D.C.
4. **WHETHER DISCLOSURE IS MANDATORY OR VOLUNTARY AND EFFECT ON INDIVIDUAL OF NOT PROVIDING INFORMATION** Disclosure of the requested information is voluntary. If the requested information is not furnished, however, the application for radioactive material license, or amendment thereof, will not be processed.
5. **SYSTEM MANAGER(S) AND ADDRESS** Director, Division of Fuel Cycle and Material Safety, Office of Nuclear Material Safety and Safeguards, U.S. Nuclear Regulatory Commission, Washington, D.C. 20555.

## RADIATION SAFETY COMMITTEE

COL Daniel C. Warren, MC  
MAJ Ross B. Pollack, MC  
MAJ Ana Maria Santiago, ANC  
MAJ Thomas Capraro, DC  
CPT Edward C. Garner, MSC  
CPT Kenneth Bryant, MC  
CPT Lawrence E. Crimmins, MC

2LT Scott Moore, MSC  
SSG Charles R. Williams  
CW3 Robert Dondelinger  
Mr. Milton Carroll

Chairman, Radiation Safety Committee  
Department of Medicine  
Department of Nursing  
DENTAC Representative  
Department of Pathology  
Department of Surgery  
Department of Radiology, Department  
of Nuclear Medicine  
Radiation Protection Officer \*\*  
Alternate Radiation Protection Officer  
Biomedical Maintenance  
Safety Manager, MEDDAC/DENTAC

\*\*2LT Moore is scheduled to arrive at Fort Benning as the Radiation Protection Officer in October 1985. His NRC Form 313-M, Supplements A and B, and curriculum vitae will be forwarded. In the interim, CPT Debra Galloway, Staff Health Physics Officer, DDEAMC, will act as the Radiation Protection Officer. Her curriculum vitae and training experience are attached.



CURRICULUM VITAE

DEBRA D. GALLOWAY

ACADEMIC AREAS OF MAJOR INTEREST:

Health Physics

EDUCATION AND TRAINING:

CIVILIAN

Vanderbilt University, BS, Physics, 1980  
Florida State University, MS, Physics, 1982

MILITARY

AMEDD (MSC) Officer Basic Course, Fort Sam Houston, TX, 8 Weeks, 1984

TEACHING EXPERIENCE:

1979-1980 - Undergraduate Physics Laboratory  
Instructor, Vanderbilt University  
1980-1984 - Undergraduate Physics Laboratory  
Instructor, Florida State University

PROFESSIONAL EXPERIENCE:

Date: September 1984 - Present  
Employer: U. S. Army at Dwight D. Eisenhower Army Medical  
Center, Fort Gordon, Georgia

Title: Alternate Radiation Protection Officer

Description of Duties: As Alternate Radiation Protection Officer, supports operations of Health Physics Office and radiation protection program to include support of U. S. Nuclear Regulatory Commission Byproduct Materials License No. 10-12044-03 and Department of Army Radioactive Materials Authorization No. 10-07-81. Coordinates and conducts training program for students in Phase II of the Health Physics Specialist Course.

*forwarded DA Form 4691-R  
and DA Form 5374-R to  
CPT Galloway, to be completed  
and returned*

TRAINING AND EXPERIENCE  
AUTHORIZED USER OR RADIATION SAFETY OFFICER

1. NAME OF AUTHORIZED USER OR RADIATION SAFETY OFFICER

Debra D. Galloway

2. STATE OR TERRITORY IN  
WHICH LICENSED TO  
PRACTICE MEDICINE  
N/A

## 3. CERTIFICATION

SPECIALTY BOARD

A

CATEGORY

B

MONTH AND YEAR CERTIFIED

C

N/A

N/A

N/A

## 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)  
CSUPERVISED  
LABORATORY  
EXPERIENCE  
(Hours)  
Da. RADIATION PHYSICS AND  
INSTRUMENTATIONEisenhower Army Medical Center  
Fort Gordon, Georgia  
Sep 1984 - July 1985

3

40+

b. RADIATION PROTECTION

Eisenhower Army Medical Center  
Fort Gordon, Georgia  
Sep 1984 - July 1985

3

40+

c. MATHEMATICS PERTAINING TO  
THE USE AND MEASUREMENT  
OF RADIOACTIVITYEisenhower Army Medical Center  
Fort Gordon, Georgia  
Sep 1984 - July 1985

1

40+

d. RADIATION BIOLOGY

Eisenhower Army Medical Center  
Fort Gordon, Georgia  
Sep 1984 - July 1985

2

0

e. RADIOPHARMACEUTICAL  
CHEMISTRYEisenhower Army Medical Center  
Fort Gordon, Georgia  
Sep 1984 - July 1985

1

0

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

ISOTOPE	MAXIMUM AMOUNT	WHERE EXPERIENCE WAS GAINED	DURATION OF EXPERIENCE	TYPE OF USE
Cs-137	130 Ci	Fort Gordon, EAMC	11 Months	Calibration Range
Cs-137	130 mCi	Fort Gordon, EAMC	11 Months	Calibration Range
I-131	110 mCi	Fort Gordon, EAMC	11 Months	Ablation Therapy

# DISPOSITION FORM

For use of this form, see AR 340-15; the proponent agency is TAGO.

REFERENCE OR OFFICE SYMBOL

HSXB-PM-HP

SUBJECT

Certification of Radioisotope User

TO C, Radiology

FROM Health Physics

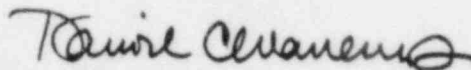
DATE 1 August 1985

CMT 1

1LT Thompson/gbl/544-1554

1. Pursuant to request from CPT Lawrence Crimmins, MC, this committee authorized full medical use privileges of the radioactive materials listed in 10 CFR 35.100, Schedule A, Groups I, II, and III.

2. A user is subject to the provisions of NRC BML 10-06493-02.



DANIEL C. WARREN, M.D.  
Colonel, Medical Corps  
Chairman, Radiation Safety Committee

Encl 5



TRAINING AND EXPERIENCE  
AUTHORIZED USER OR RADIATION SAFETY OFFICER

1. NAME OF AUTHORIZED USER OR RADIATION SAFETY OFFICER  Lawrence Crimmins		2. STATE OR TERRITORY IN WHICH LICENSED TO PRACTICE MEDICINE  CPT		
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	Fitzsimons Army Medical Ctr 8 Jul 82 - 8 Jun 85	120	12	
b. RADIATION PROTECTION	Fitzsimons Army Medical Ctr 8 Jul 82 - 8 Jun 85	30	3	
c. MATHEMATICS PERTAINING TO THE USE AND MEASUREMENT OF RADIOACTIVITY	Fitzsimons Army Medical Ctr 8 Jul 82 - 8 Jun 85	20	-	
d. RADIATION BIOLOGY	Fitzsimons Army Medical Ctr 8 Jul 82 - 8 Jun 85	24	-	
e. RADIOPHARMACEUTICAL CHEMISTRY	FAMC 8 Jul 82 - 8 Jun 85 General Nuclear Medicine Radiopharmacy Lectures	24 6	- 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
3-83	200 mCi	Fitzsimons	3 months	Human
99mMo	5,000 mCi	Fitzsimons	3 months	Human
99mTc	5,000 mCi	Fitzsimons	3 months	Human

Encl 6

## PRECEPTOR STATEMENT

Supplement B must be completed by the applicant physician's preceptor. If more than one preceptor is necessary to document experience, obtain a separate statement from each.

1. APPLICANT PHYSICIAN'S NAME AND ADDRESS		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.
FULL NAME		
Lawrence Crimmins CPT		
STREET ADDRESS		
Fitzsimons Army Medical Center		
CITY	STATE	ZIP CODE
Aurora	Colo.	80045-5001

## 2. CLINICAL TRAINING AND EXPERIENCE OF ABOVE NAMED PHYSICIAN

ISOTOPE A	CONDITIONS DIAGNOSED OR TREATED B	NUMBER OF CASES INVOLVING PERSONAL PARTICIPATION C	COMMENTS (Additional information or comments may be submitted in duplicate on separate sheets.) D
I-131 or I-125	DIAGNOSIS OF THYROID FUNCTION	56	
	DETERMINATION OF BLOOD AND BLOOD PLASMA VOLUME	11	
	LIVER FUNCTION STUDIES		
	FAT ABSORPTION STUDIES		
	KIDNEY FUNCTION STUDIES	5	
	IN VITRO STUDIES	11,651	
I-131	Adrenal Imaging	3	
TL-201	Heart Imaging	52	
I-131	THYROID IMAGING	8	
In-111	Whole Body Imaging	5	
I-123	Thyroid Imaging	1	
Tc99m	Hepatobiliary	25	
Xe-133	BLOOD FLOW STUDIES AND PULMONARY FUNCTION STUDIES	30	
Ga-67	Whole Body Imaging	59	
Tc-99m	BRAIN IMAGING	24	
	CARDIAC IMAGING	47	
	THYROID IMAGING	23	
	SALIVARY GLAND IMAGING	2	
	BLOOD POOL IMAGING	81	
	Parotid Imaging	4	
	LIVER AND SPLEEN IMAGING	81	
	LUNG IMAGING	31	
	BONE IMAGING	199	
OTHER	Renal Imaging	57	

Encl 7

# 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	2	
	TREATMENT OF HYPERTHYROIDISM	5	
Au-198	INTRACAVITARY TREATMENT		
Co-60 or Cs-137	INTERSTITIAL TREATMENT		
	INTRACAVITARY TREATMENT		
I-125 or Ir-192	INTERSTITIAL TREATMENT		
Co-60 or Cs-137	TELETHERAPY TREATMENT		
Sr-90	TREATMENT OF EYE DISEASE		
	RADIOPHARMACEUTICAL PREPARATION		
Mo-99/ Tc-99m	GENERATOR	60	
Sn-113/ In-113m	GENERATOR		
Tc-99m	REAGENT KITS	200	
Cr-51	Blood Volume	11	
Tc-99m	Shunt studies, Meckel's Gastric Emptying, GI bleed, Testicular, Esophageal motil- ity, Cystogram	29	
Co-57	Schilling Tests	18	
I-125	Bone Densitometry	72	
Transmissions			

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

Nov-Dec 1983

Oct 1984

480 Hours

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

### a. NAME OF SUPERVISOR

PETER W. BLUE, LTC, MC

### b. NAME OF INSTITUTION

Fitzsimons Army Medical Center

### c. MAILING ADDRESS

HSHG-RAN

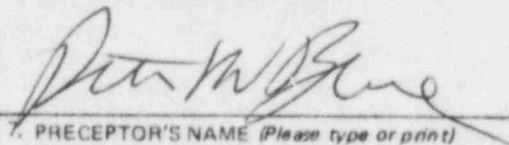
### d. CITY

Aurora, CO 80045-5001

## 5. MATERIALS LICENSE NUMBER(S)

05-00046-13

## 6. PRECEPTOR'S SIGNATURE



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

PETER W. BLUE, LTC, MC

## 8. DATE

8 May 1985

The State Board of  
Medical Examiners

State of



South Dakota

Certificate No.

1490

*This is to Certify that*

Lawrence E. Crimmins

*is a licensed Physician & Surgeon ( M.D. ) under the provisions of the laws of the State of South Dakota and is entitled to practice medicine in all its branches.*

*Said license granted by* ENDORSEMENT.

In witness whereof, we have hereunto set our hands and  
affixed the Seal of said Board at Sioux Falls,  
S. Dak. This 18th day of May, in the  
year of Our Lord One Thousand Nine Hundred and 84.



Russell A. Lewis M.D.  
President

D. H. Barton, M.D.  
Secretary