

## MATERIALS LICENSE

Amendment No. 39

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.

301853

## Licensee

In accordance with letters dated  
September 13, 1996 and October 17, 1996  
3. License Number 24-12699-01 is amended in  
its entirety to read as follows:

1. Capital Region Medical Center

4. Expiration Date February 28, 2005

5. Docket or  
Reference No. 030-023752. 1125 S. Madison  
Jefferson City, MO 651026. Byproduct, Source, and/or  
Special Nuclear Material7. Chemical and/or Physical  
Form8. Maximum Amount that Licensee  
May Possess at Any One Time  
Under This LicenseA. Any byproduct  
material identified  
in 10 CFR 35.100A. Any  
radiopharma-  
ceutical identi-  
fied in 10 CFR  
35.100

A. As needed

B. Any byproduct  
material identified  
in 10 CFR 35.200B. Any  
radiopharma-  
ceutical identi-  
fied in 10 CFR  
35.200 (excluding  
xenon-133)

B. As needed

C. Any byproduct  
material identified  
in 10 CFR 35.300C. Any  
radiopharma-  
ceutical identi-  
fied in 10 CFR  
35.300C. As needed  
(not to exceed  
10 curies of  
I-131)D. Any byproduct  
material identified  
in 10 CFR 35.400D. Any brachytherapy  
sources identified  
in 10 CFR 35.400

D. 1 curie

## 9. Authorized Use:

A. Medical use described in 10 CFR 35.100.

B. Medical use described in 10 CFR 35.200 (excluding xenon-133).

C. Medical use described in 10 CFR 35.300

D. Medical use described in 10 CFR 35.400

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MATERIALS LICENSE  
SUPPLEMENTARY SHEETLicense Number  
24-12699-01Docket or Reference Number  
030-02375

Amendment No. 39

CONDITIONS

10. Location of Use: 1125 South Madison, Jefferson City, Missouri and  
1432 Southwest Boulevard Jefferson City, Missouri.
11. Radiation Safety Officer: William H. Voss, D.O.
12. Licensed material listed in Item 6 above is only authorized for use by, or under the supervision of, the following individuals for the materials and uses indicated:

Authorized UsersMaterial and Use

- |                               |   |
|-------------------------------|---|
| A. D. J. Hawes-Davis, D.O.    | 10 CFR Part 35.100, 35.200 (excluding xenon-133) and 35.300 (excluding iodine-131 for thyroid carcinoma therapy).           |
| B. William H. Voss, D.O.      | 10 CFR Part 35.100, 35.200 (excluding xenon-133) and 35.300 (excluding iodine-131 for thyroid carcinoma therapy).           |
| C. Joseph J. Doggett, D.O.    | 10 CFR Part 35.100, 35.200 (excluding xenon-133) and 35.300.  |
| D. L. David Linsenbardt, D.O. | 10 CFR Part 35.100 and 35.200 (excluding xenon-133).  |
| E. H. Jerry Murrell, D.O.     | 10 CFR 35.400.  |
| F. S. J. Westgate, M.D.       | 10 CFR 35.400.  |
| G. Rushdy Abadir, M.D.        | 10 CFR 35.400.  |
| H. Conrad Balcer, D.D.        | 10 CFR 35.100 and 35.200 (excluding xenon-133).   |
| I. Donald Kent McNutt, D.O.   | 10 CFR 35.100 and 35.200 (excluding xenon-133).   |
| J. Mark Phillip Bryer, M.D.   | 10 CFR 35.300 and 35.400.   |
| K. William L. Schlegel, D.O.  | 10 CFR 35.100 and 35.200 limited to cardiovascular clinical procedures (excluding xenon-133)                                |
| L. Rodney Adkison, D.O.       | 10 CFR 35.100, 35.200 (excluding xenon-133) and 35.300 (excluding iodine-131 for thyroid carcinoma therapy).<br>xenon-133). |

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MATERIALS LICENSE  
SUPPLEMENTARY SHEETLicense Number  
24-12699-01Docket or Reference Number  
030-02375

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Authorized UsersMaterial and Use

M. Donald A. Swayze, D.O.

10 CFR 35.100 and 35.200 (excluding xenon-133).

N. Larry P. Courter, M.D.

10 CFR 35.100 and 35.200 (excluding xenon-133) and 35.300.

O. Sidney B. Belshe, M.D.

10 CFR 35.100 and 35.200 (excluding xenon-133) and 35.300.

P. Robert L. Searce, M.D.

10 CFR 35.100 and 35.200 (excluding xenon-133) and 35.300.

Q. Jeffrey Lee Patrick, M.D.

10 CFR 35.100 and 35.200 (excluding xenon-133) and 35.300.

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 June 23, 1993;

B. Letters dated April 4, 1994, April 13, 1994, May 18, 1994, August 17, 1994, January 30, 1995, September 13, 1996 and October 17, 1996; and

C. Letters received October 14, 1994 and June 18, 1996.

FOR THE U.S. NUCLEAR REGULATORY COMMISSION

Date 15 November 1996By William P. Reinhold  
Nuclear Materials Licensing Branch, Region III

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(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: 20050228  
Fee Comments: CODE 23  
Decom Fin Assur Req: N  
.....

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED  
Applicant/Licensee: CAPITAL REGION MEDICAL CENTER  
Received Date: 960920  
Docket No: 3002375  
Control No.: 301853  
License No.: 24-12699-01  
Action Type: Amendment

2. FEE ATTACHED  
Amount: ~~-----~~  
Check No.: ~~-----~~

\* ADDL. INFO.  
301436-57

3. COMMENTS

Signed D. Hersey  
Date 9-27-96

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

1. Fee Category and Amount: 7C **FEE NOT REQUIRED**

2. Correct Fee Paid ☒ Application may be processed for:  
Amendment ~~-----~~  
Renewal ~~-----~~  
License ~~-----~~

3. OTHER ~~-----~~

Signed SC  
Date 9/30/96

1996 SEP 27 AM 11:00

OCT 08 1996

RECEIVED BY LFDCB	
Date	<u>Sept. 27, 1996</u>
Log	<u>SEP 10 TTT</u>
By	<u>SC</u>
Date Completed	<u>9/30/96</u>





# CAPITAL REGION MEDICAL CENTER

P.O. Box 1128  
Jefferson City, Missouri 65102-1128  
573/635-7141

September 13, 1996

William Reichold  
U.S. Nuclear Regulatory Commission  
801 Warrenville Rd.  
Lisle, IL 60532-4351

Re: Additional information to voided control no. 301436 Still Campus and voided control number 301437 Memorial Campus.

Dear Mr. Reichold:

This letter is to respond to various questions you had concerning our recent radioactive materials license amendment sent for the purpose of combining the license activities of license # 24-176080-02 and license 24-12699-01. Our response to your questions are in the order they are listed in your letter dated 22 August 1996.

1. Mary Margaret Davis is no longer associated with our hospitals. She should not be listed as an authorized user on the license.

2. You may reference all the applications and letters for the Memorial Campus into the Still Campus License. The date of these letters and applications are listed in item 13 of the Memorial Campus license

3. The Radiation Safety Officer for this license sees patients at both hospitals. As a result, he visits both facilities on a routine basis. We see no reason to have an Assistant Radiation Safety Officer.

4. These two facilities are in close proximity approximately two miles apart and have a centralized management system over two facilities. From a management point of view, the administration of the two facilities will be no different than from that described/utilized in the existing individual licenses. The license application and ALARA program provides an adequate description of the overall administrative structure and commitment to radiation safety.

4a. The Radiation Safety Committee has an administrative representative attend the routine quarterly visits. As an administrative representative, this individual participates in the routine meetings and the annual ALARA review.

4b. We have enclosed an organizational chart. The VP of Quality/Clinical Services serves as the administrative representative to the Radiation Safety Committee. The Radiation Safety Committee and Radiation Safety Officer flow of command is through the administrative

*Continuation of 301436*  
**FEE NOT REQUIRED**

*Pm 9/16/96*

**RECEIVED**

**SEP 20 1996**

**REGION III**

*301853*

**SEP 20 1996**



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representative who reports directly to the hospital president. This structure applies to both facilities, and the individuals shown are responsible at both facilities.

4c. The administrative input in the Radiation Safety Committee, the routine ALARA program, and our delegation of authority to the Radiation Safety Officer and Radiation Safety Committee provide adequate control over the day to day licensed activities at each site.

4d. We have enclosed a copy of a statement of authority to the Radiation Safety Officer and Radiation Safety Committee signed by senior management.

4e. The administration/senior management is committed to giving the Radiation Safety Officer sufficient time and staff support to adequately oversee and ensure a radiation safe environment at the two campuses.

4f. This item has been addressed in previous statements related to administration's input and participation in the Radiation Safety Committee and ALARA Program

4g. This item is adequately covered in our ALARA program Quality Management Program and the Radiation Safety Committee Structure.

4h. The Radiation Safety Officer, in conjunction with the consulting physicist, reviews NRC Reg. guides, fliers, and new regulations for the Radiation Safety Committee meetings. Since administration participates in this committee, they have direct input and participation in this process.

4i. The authority for ensuring regulatory compliance is with the Nuclear Medicine support staff, the Radiation Safety Committee, and ultimately the Radiation Safety Officer.

4j. Radiation safety audits are ongoing. The results of these audits are documented in the quarterly radiation safety committee minutes. They include, but are not limited to, review of film badge readings and adherence to the Quality Management Program. Senior management has an administrative representative who attends and participates in the review of these audits.

4k. Site management and support staff are the same at both facilities. The radiation safety audits mentioned above are evaluations of the radiation safety programs at both sites. Any problems noted are acted upon and documented in the RSC minutes.

5a. As indicated earlier, the Radiation Safety Officer sees patients at both campuses. As a result of this patient schedule, the Radiation Safety Officer meets with and is available for consultation with individuals at each site. The Radiation Safety Officer meets with the Radiation Safety Committee on a quarterly basis and more often if deemed necessary by the Radiation Safety Officer or Radiation Safety Committee.



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- 5b. Our discussion in item 5a addresses your questions for item 5b.
- 5c. The Radioactive Materials license application describes the duties and responsibilities of the Radiation Safety Officer. These duties and responsibilities are conducted at each site. In conjunction with that, the RSO reviews the physicist's reports and participates in the quarterly RSC meetings. We feel this provides adequate reporting and review at each facility.
- 5d. The mechanism for responding to unsafe practices and urgent situations include close communication with support staff and ongoing evaluations of safety practices. at both sites. Unsafe practices and urgent situations are acted upon as they occur and they do not wait for action at the quarterly radiation safety committee. They are reported in the next RSC minutes.
- 5e. The RSO has the authority to make decisions and terminate unsafe practices and activities jeopardizing the safety of workers, the public, or the environment.
- 6a. We do not transport licensed materials between sites.
- 6b. We will share GM meters between hospitals. Battery checks, source readings, and calibrations are done on this equipment at both sites.
7. We will continue to operate licensed activities at both facilities. We will notify the NRC prior to closing activities at the Memorial Campus.

If you have any questions or require additional information, please contact me at (573) 635-6811, or Ron Thompson at (573) 635-6811 ext. 1312. Thank you for your time and attention to this matter.

Sincerely,

Ed Farnsworth, President



# CAPITAL REGION MEDICAL CENTER

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P.O. Box 1128  
Jefferson City, Missouri 65102-1128  
573/635-7141

TO: Radiation Safety Officer, William Voss, D.O.  
Radiation Safety Committee

From: Ed Farnsworth, President Capital Region Medical Center

RE: Radiation Safety at the Madison and Southwest Facility

Date: Sept. 13, 1996

The authority and responsibility for ensuring the safe use of radioactive material at the Madison and Southwest facilities are that of the Radiation Safety Officer and Radiation Safety Committee. It is understood that safe practices will be monitored through program audits such as the Quality Management Program, health physics reports, and annual ALARA reviews. The Radiation Safety Officer has the authority over each facility's program to immediately correct unsafe practices without redirection or hindrance by site management. The results of audits and action to correct unsafe practices will be listed in the minutes of the Radiation Safety Committee meetings which are reported to me through my administrative representative.

Thank You,

Ed Farnsworth  
President



# ORGANIZATIONAL CHART

PRESIDENT

FOUND/BRD GOV MGR

FACILITIES DIR  
- MAINT

HUMAN RES DIR  
- EDUCATION

MANAGED CARE DIR

VP SPECIAL PROJECTS

VP OUTREACH

- CANCER CARE ASSOCIATES
- CLINICS
- ST PLAN
- MKTING/PR
- SPORTS MED
- PSYCOLOGY
- CORP HEALTH
- CORP SALES COUNCIL
- COMM HEALTHWELLNESS

VP PATIENT CARE

- ONCOLOGY
- CARDIOLOGY
- ICU
- NIC
- CCI
- CARDIOPULM REHAB
- RT
- ACUTE CARE
- MED
- SURG
- ORIPACU
- OUTPATEND
- WOMEN/CHILDREN
- OB
- PEDI
- EXTND CARE
- HHA
- SNF
- REHAB
- SOC WORK
- HOUSE SUP
- ER
- AMB

VP FINANCE

- ACCOUNTING
- ACCT'S PAYABLE
- PAYROLL
- PT ACCTS
- INSCASHER
- REGISTACNT SCHED
- INFO SYS
- LAN
- TELECOMM
- SUPPORT SERVICES
- FOOD SERV
- HSRG
- MAT MNGMNT
- STERILE PROC

VP MED AFFAIRS

- MED STAFF SERVICES
- LIBRARY
- CREDIT
- PHY REL/RECRUIT
- MED ED
- ALUMNO/GUEST REL/PASTORAL CARE

VP QUALITY CLINICAL

- UR
- RISK
- CLIN INFO / MED REC
- EMP HEALTH / INF CONTRL
- LAB
- MED IMAGING
- PNR
- PT
- OT
- SPEECH
- PHARMACY

Radiation Safety Committee  
Radiation Safety Committee

Advisory Council Member



# CAPITAL REGION MEDICAL CENTER

P.O. Box 1128  
Jefferson City, Missouri 65102-1128  
573/635-7141

~~October 17, 1996~~

William Reichold  
U.S. Nuclear Regulatory Commission  
801 Warrensville Rd.  
Lisle, Illinois 60532-4351

Re: Additional information to control numbers 301853 and 301854.

Dear Mr. Reichold:

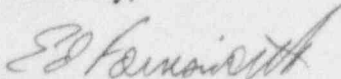
The following additional information is being provided per our phone conversation of October 17, 1996.

## Senior Management

- 4f. Senior management, VP-Quality-Clinical Services, is periodically at both hospital sites on a weekly basis. The Vice President-Quality-Clinical Services is the administrative representative on the Radiation Safety Committee. The Manager of Medical Imaging may substitute as the administrative representative in the absence of the Vice President-Quality Clinical Services. The Manager of Medical Imaging is periodically at both sites on a weekly basis and reports directly to the Vice President-Quality-Clinical Services. In addition, the Lead Technologist in Nuclear Medicine serves on the Hospital Safety Committee. The Nuclear Medicine Department is subject to periodic unannounced inspections from the head of the Hazardous Materials Committee. The head of the hazardous materials committee reports directly to the Vice President-Quality-Clinical Services.
- 4I The authority for ensuring regulatory compliance is with the Vice President-Quality-Clinical Services, the senior management person in the chain of command.

We want to change the single license name to Capital Region Medical Center formerly Capital Region Medical Center Still Campus. If you have any questions or require additional information, please contact me at (573) 635-6811, or Ron Thompson at (573) 635-6811 ext. 1312. Thank you for your time and attention to this matter.

Sincerely,

  
Ed Farnsworth, President

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OCT 25 1996

REGION III

pm: 10-22-96

OCT 25 1996

NOV 18 1996

Ed Farnsworth, President  
Capital Regional Medical Center  
1125 S. Madison  
Jefferson City, MO 65102

Dear Mr. Farnsworth:

Enclosed is Amendment No. 39 to your NRC Material License No. 24-12699-01 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).

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).
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.

301853

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,



E. Farnsworth

-3-

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  
W. P. Reichhold  
Nuclear Materials Licensing Branch

License No.: 24-12689-01  
Docket No.: 030-02375

Enclosure: Amendment No. 39

DOCUMENT NAME: M:\03002375.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	WREICHHOLD:jaw								
DATE	11/8/96								

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