



MUSKEGON GENERAL HOSPITAL

1700 OAK AVENUE • MUSKEGON, MICH. 49442 • (616) 773-3311



Ms. Dixie Matson  
Materials Licensing Branch  
Region III  
U.S. Nuclear Regulatory Commission  
799 Roosevelt Road  
Glen Ellyn, Illinois 60137

August 20, 1985

CONTROL #79324

Dear Ms. Matson:

Per our phone conversation on August 15, 1985, you will find listed below the support information requested regarding our amendment to use Gd-153 and I-125 in a Bone Mineral Analyzer.

- (1) The device for use with the Gd-153 will be a Lunar Radiation Corporation #DP-3

The source for use with the DP-3 will be a Gulf Nuclear #GD-1; NEN #NER-43 or Amersham #GDC.CY1

The device for use with the I-125 will be a Lunar Radiation Corporation #SP-2

The source for the SP-2 will be a AECL #C235 or #C234; Amersham #IMC-T2, #IMC-129, 4052, 4040 or AMC #D1

- (2) The hospital confirms that radioactive sources will be exchanged only by personnel having received training by Lunar Radiation Corporation.
- (3) The hospital confirms that radioactive sources will be exchanged only as outlined in the Lunar Radiation Corporation manual.
- (4) The hospital confirms that all service and repair will be done by Lunar Radiation Corporation under warranty for the first year and service contract after that date.

I hope we have clarified all the remaining questions regarding this amendment request.

8509110265 850903  
REG3 LIC30  
21-17971-01 PDR  
MMK/k

Sincerely,  
*Michael M. Kusch*  
Michael M. Kusch  
Chairman, Radiation  
Safety Committee

RECEIVED

AUG 22 1985

REGION III

AUG 22 1985

## CONVERSATION RECORD

TIME

3pm

DATE

C/N 79324  
8/15/85

TYPE

☐ VISIT☐ CONFERENCE☒ TELEPHONE☐ INCOMING☒ OUTGOING

ROUTING

NAME/SYMBOL

INT

Location of Visit/Conference:

NAME OF PERSON(S) CONTACTED OR IN CONTACT  
WITH YOUORGANIZATION (Office, dept., bureau,  
etc.)

TELEPHONE NO.

Mike Kusch

Muskegon General

SUBJECT

L No. 21-17971-01 application dated

7/10/85 requesting amendment.

SUMMARY

NRC needs following:

1. Identify which one of the listed BMA you will be purchasing. Provide name/model No.
2. State that only persons who have been trained by the manufacturer on ~~rep~~ source replacement and installation procedures will be permitted to perform source holder replacements.
3. Submit procedures for performing source replacements
4. Identify who will perform maintenance and repair on the devices. If someone other than manufacturer provide training, procedures &

ACTION REQUIRED

Reply in 30 days

Reply in duplicate: use control no 79324

NAME OF PERSON DOCUMENTING CONVERSATION

SIGNATURE

DATE

ACTION TAKEN

SIGNATURE

TITLE

DATE

50271-101

GPO : 1981 O - 381-526 (7227)

CONVERSATION RECORD

OPTIONAL FORM 271 (12-76)  
DEPARTMENT OF DEFENSE