

# HOLLAND COMMUNITY HOSPITAL

602 Michigan Avenue  
Holland, Michigan 49423  
Phone 616-392-5141

October 21, 1985

Ms. Evelyn Matson  
USNRC Region III  
799 Roosevelt Road  
Glen Ellyn, Illinois 60137

Dear Ms. Matson:

Would you please amend our NRC License #21-18502-01 issued to Holland Community Hospital to include:

David J. Mulligan, M.D. as an individual user for all uses currently on our license except I 131 therapy.

Paul M. Dassel, M.D. as an individual user for Groups I, II, III studies and In Vitro studies.

Dr. Mulligan has been approved for privileges in Nuclear Medicine by the Nuclear Medicine Radiation Safety Committee and by the medical staff and board of Holland Community Hospital. Dr. Mulligan will be following the procedures as set by our license renewal of February 21, 1983 and subsequent amendments. Please find enclosed, a completed form NRC-313M, supplements A and B, detailing Dr. Mulligan's training and experience in the use of radioactive materials.

Dr. Dassel was listed as an individual user on NRC License #21-12770-01, amendment number 7, and by oversight left off NRC License #21-18501-01 when the License was changed to an institutional license. Dr. Dassel has had continuing experience with the medical use of radioactive materials and will be following the procedures as set by the current NRC License.

If you need further information we will be happy to supply it.

Sincerely,

Ron Harms  
Senior Vice-President

Marlen F. Junck, M.D.  
Radiation Safety Officer

*Ronald V. Harms*  
*Marlen F. Junck*

8602190590 851212  
REG3 LIC30  
21-18502-01 PDR

170.11(a)(9)  
FEE EXEMPT #16

RECEIVED BY LFMB	
Date	11/1/85
Log	Oct 28 III
By	CP
Orig. To	CP
Action Compl.	CP

U.S. N.R.C.  
100 FEE NIGHT BRANCH

85 NOV -1 AM 10:07

RECEIVED

RECEIVED  
OCT 28 1985  
REGION III

OCT 28 1985

## 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

FULL NAME

David J. Mulligan, M.D.

STREET ADDRESS

2329 Sunset Bluff Drive

CITY

Holland,

STATE

MI

ZIP CODE

49423

## KEY TO COLUMN C

## PERSONAL PARTICIPATION SHOULD CONSIST OF:

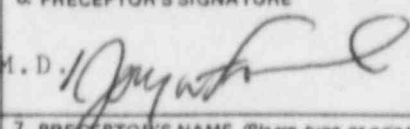
1-Supervised examination of patients to determine the suitability for radioisotope diagnosis and/or treatment and recommendation for prescribed dosage.

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
I-131 or I-125	DIAGNOSIS OF THYROID FUNCTION	18	Tc-99m
	DETERMINATION OF BLOOD AND BLOOD PLASMA VOLUME	7	Wall Motion 145
	LIVER FUNCTION STUDIES	-0-	Bowel 3
	FAT ABSORPTION STUDIES	-0-	Gastroesophageal Reflux 5
	KIDNEY FUNCTION STUDIES	27	Gastric emptying 3
	IN VITRO STUDIES	-0-	Hepatobiliary 38
OTHER		2	Cystogram 13
I-125	DETECTION OF THROMBOSIS	-0-	Cerebral Blood Flow 28
I-131	THYROID IMAGING	69	Testicular Flow Study 1
P-32	EYE TUMOR LOCALIZATION	-0-	Superior Vena Cava 1
Se-75	PANCREAS IMAGING	-0-	Renogram (DTPA) 46
Yb-169	CISTERNOGRAPHY	-0-	Renal Scan (S.C.) 19
Xe-133	BLOOD FLOW STUDIES AND PULMONARY FUNCTION STUDIES	48	Cr-51
OTHER		5	Red Cell Mass 5
Tc-99m	BRAIN IMAGING	90	Red Cell Survival 1
	CARDIAC IMAGING	54	Co-57 & 58
	THYROID IMAGING	25	Schillings 17
	SALIVARY GLAND IMAGING	-0-	Tl-201
	BLOOD POOL IMAGING	-0-	Myocardial Perfusion 174
	PLACENTA LOCALIZATION	-0-	Ga-67 32
	LIVER AND SPLEEN IMAGING	420	
	LUNG IMAGING	85	
	BONE IMAGING	494	
OTHER	See Comments Column		

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	} Observation Only
P-32 (Colloidal)	INTRACAVITARY TREATMENT	1	
I-131	TREATMENT OF THYROID CARCINOMA	-0-	
	TREATMENT OF HYPERTHYROIDISM	25	
Au-198	INTRACAVITARY TREATMENT	-0-	
Co-60 or Cs-137	INTERSTITIAL TREATMENT	-0-	
	INTRACAVITARY TREATMENT	-0-	
I-125 or Ir-192 or Co-60 or Cs-137	INTERSTITIAL TREATMENT	-0-	
	TELETHERAPY TREATMENT	-0-	
Sr-90	TREATMENT OF EYE DISEASE	-0-	
	RADIOPHARMACEUTICAL PREPARATION		
Mo-99/ Tc-99m	GENERATOR	10	
Sn-113/ In-113m	GENERATOR	-0-	
Tc-99m	REAGENT KITS	20	
Other			
3. DATES AND TOTAL NUMBER OF HOURS RECEIVED IN CLINICAL RADIOISOTOPE TRAINING			
April, 1980 April, 1981 June, 1981		} TOTAL HOURS = 500	
4. THE TRAINING AND EXPERIENCE INDICATED ABOVE WAS OBTAINED UNDER THE SUPERVISION OF:		5. PRECEPTOR'S SIGNATURE	
a. NAME OF SUPERVISOR Daniel S. Marks, M.D. Jerry W. Froelich, M.D.		 7. PRECEPTOR'S NAME (Please type or print) Jerry W. Froelich, M.D. (for Daniel S. Marks, M.D.)	
b. NAME OF INSTITUTION Henry Ford Hospital			
c. MAILING ADDRESS 2799 W. Grand Boulevard		8. DATE 8/28/85	
d. CITY Detroit, MI 49202			
6. MATERIALS LICENSE NUMBER(S) 21-04109-16			

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

TRAINING AND EXPERIENCE  
AUTHORIZED USER OR RADIATION SAFETY OFFICER

1. NAME OF AUTHORIZED USER OR RADIATION SAFETY OFFICER  David J. Mulligan, M.D.	2. STATE OR TERRITORY IN WHICH LICENSED TO PRACTICE MEDICINE
---	--

3. CERTIFICATION		
SPECIALTY BOARD A	CATEGORY B	MONTH AND YEAR CERTIFIED C
American Board of Radiology	Diagnostic Radiology	June, 1982

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	Henry Ford Hospital April, 1980 April, June, 1981	60	40
b. RADIATION PROTECTION	Henry Ford Hospital April, 1980 April, June, 1981	10	20
c. MATHEMATICS PERTAINING TO THE USE AND MEASUREMENT OF RADIOACTIVITY	Henry Ford Hospital April, 1980 April, June, 1981	10	10
d. RADIATION BIOLOGY	Henry Ford Hospital April, 1980 April, June, 1981	10	10
e. RADIOPHARMACEUTICAL CHEMISTRY	Henry Ford Hospital April, 1980 April, June, 1981	18	12

5. EXPERIENCE WITH RADIATION. (Actual use of Radioisotopes or Equivalent Experience)				
ISOTOPE	MAXIMUM AMOUNT	WHERE EXPERIENCE WAS GAINED	DURATION OF EXPERIENCE	TYPE OF USE
Mo-Tc99m	2 Curies	Henry Ford Hospital	April 1980-June '81	Diagnostic uptake, dilution, excretion and imaging studies
I-131	5 mCi	Henry Ford Hospital	April 1980-June '81	
Xe-133	300 mCi	Henry Ford Hospital	April 1980-June '81	
Cr-51	.5 mCi	Henry Ford Hospital	April 1980-June '81	
In-111	2 mCi	Henry Ford Hospital	April 1980-June '81	