



4-4-87

Region III, Licensing Section  
Material Licensing Branch  
U.S. Nuclear Regulatory Commission  
799 Roosevelt Road  
Glen Ellyn, IL 60137

RECEIVED

'87 MAY -4 A9:27

Re: Amendment to License #13-17943-01.

Gentlemen:

Please amend our license as stated below.

May 7, 1987  
License # 13-17943-01  
Amount \$180  
and  
Date Completed 5/11/87

1. Item 5. RADIATION SAFETY OFFICER

Dean L. Cook, M.D. is to be our new radiation safety officer.  
Dr. Cook is listed on our license as an individual user.

2. Item 4. INDIVIDUAL USERS

Add the name of Douglas S. Kuehn, M.D. to the users list.  
List him as a user of all groups listed in Part 35 for which he is qualified. Dr. Kuehn is a licensed physician in the State of Indiana and is presently listed as a user on NRC license number 13-02650-02, Saint Joseph's Medical Center of South Bend, Indiana.

Also, add the name of Robert Rust, M.D. to the users list as a user of all groups listed in Part 35 for which he is qualified. Dr. Rust is listed as a user on NRC license number 22-17053-01, Ridgeview Hospital, Waconia, Minnesota, and is a licensed physician in the State of Indiana.

Also, add the name of Victor Jones II, M.D. as a user of all groups listed in Part 35 for which he is qualified. Dr. Jones is a licensed physician in the State of Indiana. His supplements A and B are enclosed for your review.

CONTROL NO. 83465

APR 30 1987

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REG3 LIC50  
13-17943-01 PDR

SAINT JOSEPH HOSPITAL - MISHAWAKA, INDIANA

Member of ANCILLA SYSTEMS



3. Item 11. FACILITIES AND EQUIPMENT

The nuclear medicine department and storage area have been moved within the hospital. The previously occupied areas were found free of contamination and all sources were removed. See the enclosed survey sheet for documentation of the survey.

Enclosed, for your files, is a diagram of the new facilities ( Attachment 7A).

If you have any questions concerning these amendment requests, please contact John D. Scheu, Ph.D. (219) 287-4146 or (219) 237-7287. A check of \$120.00 is enclosed for the amendment fee.

Yours very truly,

*Carol Beehler*

Carol Beehler  
Assistant Executive Director

CONTROL NO. 83465



TRAINING AND EXPERIENCE  
AUTHORIZED USER OR RADIATION SAFETY OFFICER

1. NAME OF AUTHORIZED USER OR RADIATION SAFETY OFFICER

Victor F. Jones II, M.D.

2. STATE OR TERRITORY IN  
WHICH LICENSED TO  
PRACTICE MEDICINE  
Indiana

3. CERTIFICATION

SPECIALTY BOARD  
A

CATEGORY  
B

MONTH AND YEAR CERTIFIED  
C

Diagnostic Radiology  
(American Board of Radiology)

Diagnostic

June 1981

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	Indiana University Medical Center. July 1978 - June 1981	120	30
b. RADIATION PROTECTION	"	30	10
c. MATHEMATICS PERTAINING TO THE USE AND MEASUREMENT OF RADIOACTIVITY	"	20	5
d. RADIATION BIOLOGY	"	20	0
e. RADIOPHARMACEUTICAL CHEMISTRY	"	30	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
I-123	6mCi	Indiana University Med.	4 months	Dx
I-131	2mCi	" " "	" "	Dx
Mo-99	6 Ci	" " "	4 months	Dx
Tc-99m	6 Ci	" " "	" "	Dx
Xe-133	370 mCi	" " "	" "	Dx
Tl-201	90 mCi	" " "	" "	Dx
Ga-67	27 mCi	" " "	" "	Dx
I-123	5mCi	St. Joseph's Med. Center	21 "	Dx
Tc-99m	10 Ci	" " "	" "	Dx
Xe-133	270 mCi	" " "	" "	Dx
Tl-201	62 mCi	" " "	" "	Dx
Ga-67	42 mCi	" " "	" "	Dx

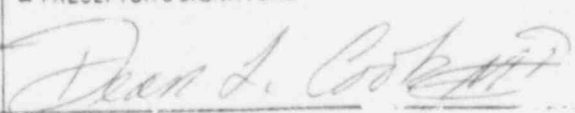
## PRECEPTOR STATEMENT

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
FULL NAME  Victor F. Jones, M.D.		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.
STREET ADDRESS  15900 Cedar Ridge Ct.		
CITY  Granger	STATE  IN	

## 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		
	DETERMINATION OF BLOOD AND BLOOD PLASMA VOLUME		
	LIVER FUNCTION STUDIES		
	FAT ABSORPTION STUDIES		
	KIDNEY FUNCTION STUDIES	10	
	IN VITRO STUDIES		
OTHER			
I-125	DETECTION OF THROMBOSIS		
I-131	THYROID IMAGING		
P-32	EYE TUMOR LOCALIZATION		
Sr-75	PANCREAS IMAGING		
Yb-169	CISTERNOGRAPHY		
Xe-133	BLOOD FLOW STUDIES AND PULMONARY FUNCTION STUDIES	27	
OTHER			
Tc-99m	BRAIN IMAGING	5	
	CARDIAC IMAGING	18	
	THYROID IMAGING	10	
	SALIVARY GLAND IMAGING		
	BLOOD POOL IMAGING	14	
	PLACENTA LOCALIZATION		
	LIVER AND SPLEEN IMAGING	74	
	LUNG IMAGING	27	
	BONE IMAGING	113	
OTHER	Renal DTPA	18	

PRECEPTOR STATEMENT (Continued)			
2. CLINICAL TRAINING AND EXPERIENCE OF ABOVE NAMED PHYSICIAN (Continued)			
ISOTOPE	CONDITIONS DIAGNOSED OR TREATED	NUMBER OF CASES INVOLVING PERSONAL PARTICIPATION	COMMENTS (Additional information or comments may be submitted in duplicate on separate sheets.)
A	B	C	D
P-32 (Soluble)	TREATMENT OF POLYCYTHEMIA VERA, LEUKEMIA, AND BONE METASTASES		
P-32 (Colloidal)	INTRACAVITARY TREATMENT		
I-131	TREATMENT OF THYROID CARCINOMA		
	TREATMENT OF HYPERTHYROIDISM		
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	TELE THERAPY TREATMENT		
Sr-90	TREATMENT OF EYE DISEASE		
	RADIOPHARMACEUTICAL PREPARATION		
Mo-99/ Tc-99m	GENERATOR	6	
Sn-113/ In-113m	GENERATOR		
Tc-99m	REAGENT KITS	10	
Other			
Tl-201	Myocardial Perfusion	31	
Ga-67	Tumor Localization	7	
Tc-99m	Billiary HIDA	9	
3. DATES AND TOTAL NUMBER OF HOURS RECEIVED IN CLINICAL RADIOISOTOPE TRAINING			
July 1985 to March 1987		504 hours	
4. THE TRAINING AND EXPERIENCE INDICATED ABOVE WAS OBTAINED UNDER THE SUPERVISION OF:		5. PRECEPTOR'S SIGNATURE	
a. NAME OF SUPERVISOR Dean L. Cook, M.D.		 PRECEPTOR'S NAME (Please type or print) Dean L. Cook, M.D.	
b. NAME OF INSTITUTION Saint Joseph's Medical Center			
c. MAILING ADDRESS 811 E. Madison Street, P.O. Box 1935		6. DATE 4-12-87	
d. CITY South Bend, Indiana 46634			
e. MATERIALS LICENSE NUMBER(S) 13-02650-02			

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

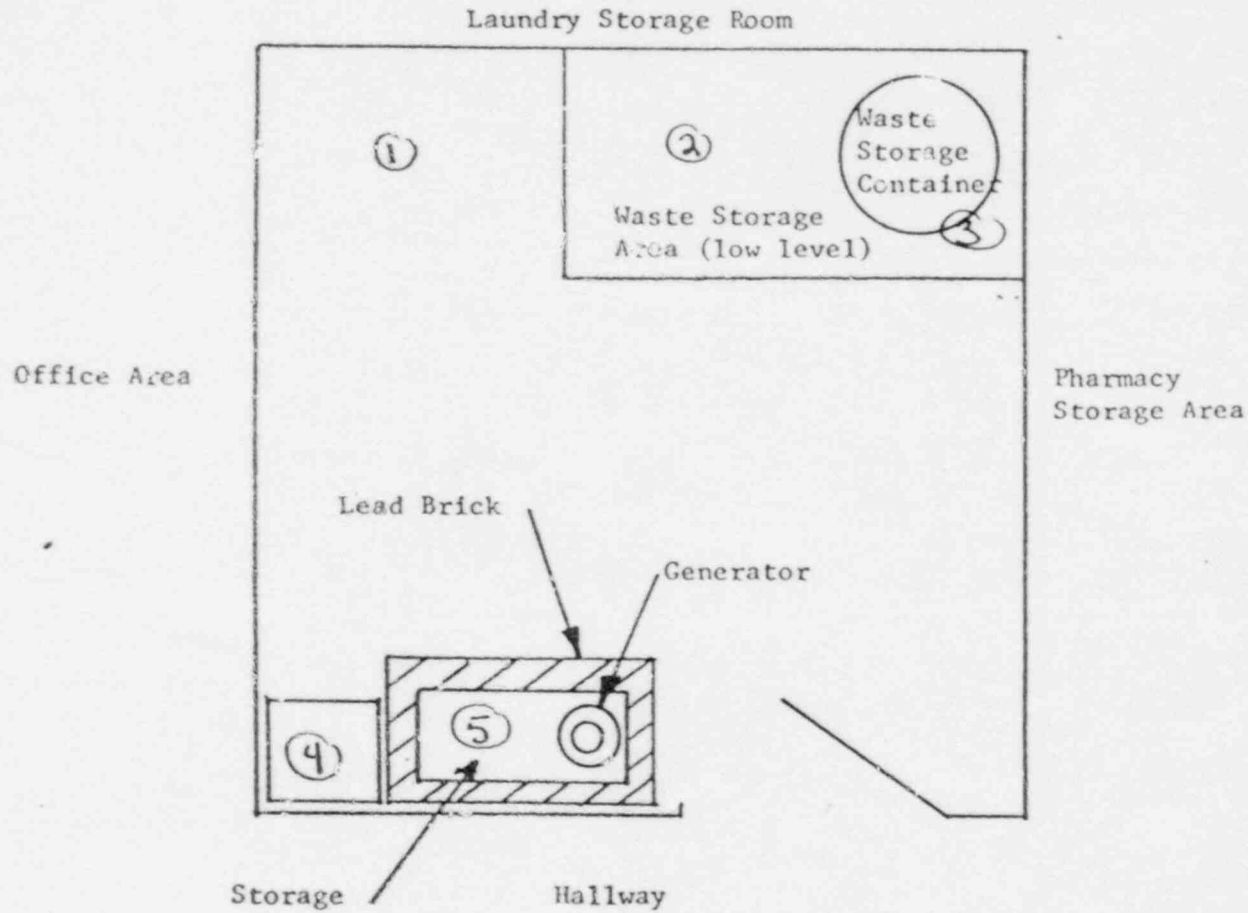


"HOT LAB"

"Source and Contamination Survey"

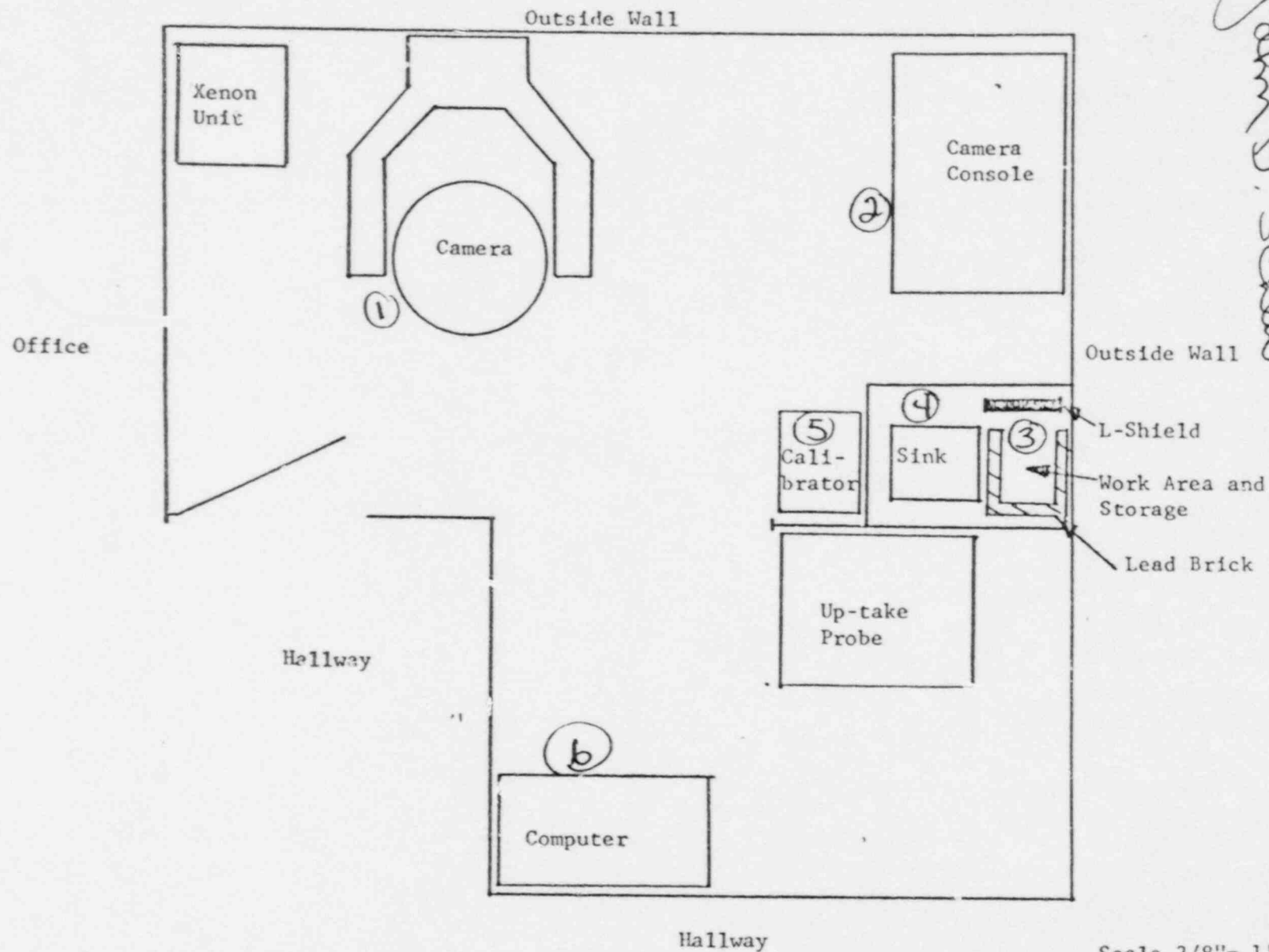
1. All "Radioactive" labeled containers were removed from the "Hot Lab".
2. Room Survey with a Victoreen G-M Meter showed no area reading above background level (Bkg= 0.01mR/hr.).
3. Wipe testing of areas 1,2,3,4,5 were negative for removable contamination.

*John D. S. Dean Ph.D.*



Scale 3/8" = 1'

# CLINICAL AREA



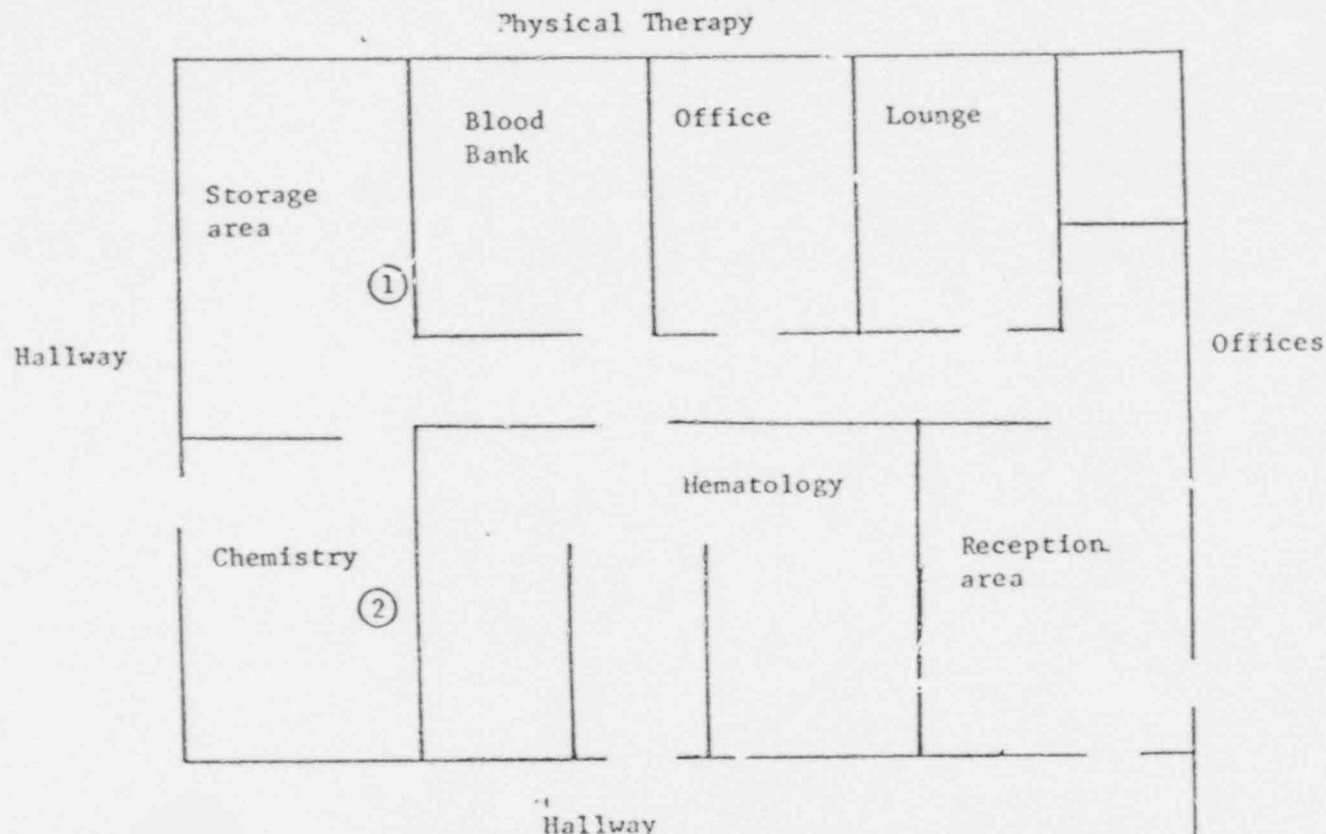
1. All "Radioactive" labeled containers were removed from the lab.
2. Room survey with a Victoreen G-M Meter showed no area reading above background level (Bkg = 0.01mR/hr.).
3. Wipe testing of areas 1,2,3,4,5,6 were negative for removable contamination.

*John D. Schen*

SOURCE AND CONTAMINATION SURVEY

Scale 3/8" = 1'

SAINT JOSEPH HOSPITAL OF MISHAWAKA  
MEDICAL LABORATORY



Area 1 ... unused "Bactec" vials will be stored at this location in a secured, properly labeled cabinet.

Area 2 The use of I-131 and Cr-51 radiopharmaceuticals will be confined to this area.

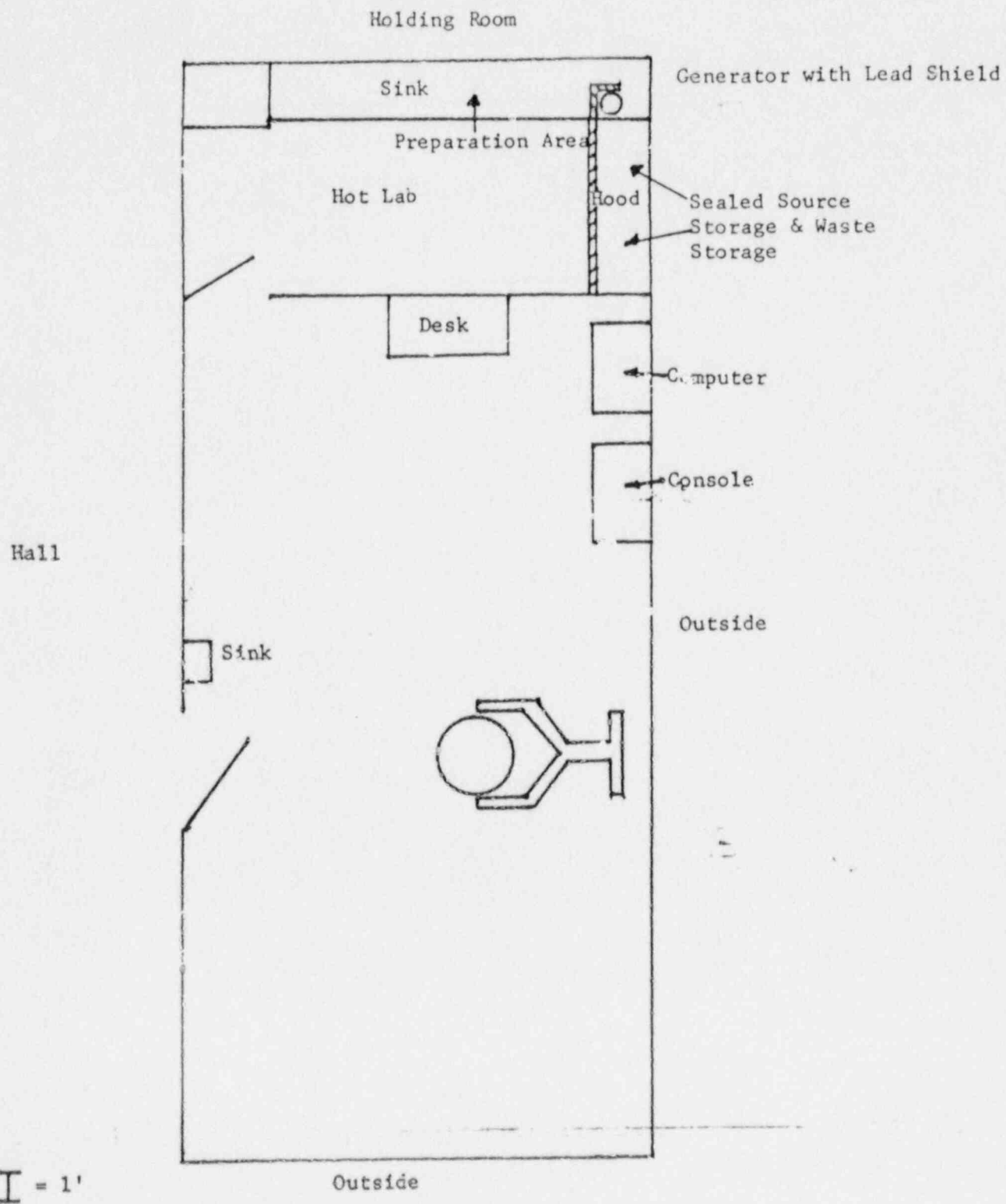
1. All "Radioactive" labeled containers were removed from the lab.
2. Room survey with a Victoreen G-M Meter showed no area reading above background level (Bkg = 0.01mR/hr.).
3. Wipe testing of areas 1 and 2 were negative for removable contamination.

*John D. Schen, Ph.D.*

"Source and Contamination Survey"



ATTACHMENT 7A  
Imaging and Hot Lab Areas



CONTROL NO. 83465