
WEST SHORE CARDIOLOGY CONSULTANTS, P.C.

CARDIOLOGY CONSULTATION
CARDIAC CATHETERIZATION
CORONARY ANGIOPLASTY
NUCLEAR CARDIOLOGY
TREADMILL EXERCISE TESTING
COLOR FLOW DOPPLER ECHO
HOLTER ECG MONITORING

CARL J. GEBUHR, M.D., F.A.C.C.
RALPH G. RYAN, M.D., F.A.C.C.
MARK E. MEENGs, M.D., F.A.C.C.
JOHN F. SKALLERUP, M.D.
GREGORY A. BERNATH, M.D.

August 17, 1987

Mr. John Medera
USNRC
799 Roosevelt Road
Glen Ellyn, Illinois 60137

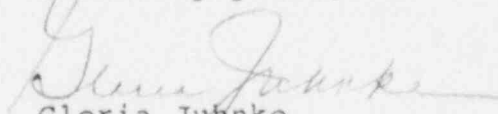
Dear Mr. Medera:

I have enclosed the items that you requested to
to complete Dr. Ryan's nuclear license.

1. Revised preceptor statement
2. Curriculum Vitae - Charles H. Rose

Please amend our request (control #83650) to add
Ralph G. Ryan, M.D. to our nuclear license number
21-24873-01.

Sincerely yours,


Gloria Juhnke
Business Manager

Enclosures

8801280221 870831
REG3 LIC30
21-24873-01 PDR

RECEIVED

AUG 20 1987

REGION III

AUG 20 1987

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

Ralph G. Ryan, MD

STREET ADDRESS

1560 E. Sherman Blvd. # 215

CITY

Muskegon,

STATE

MI

ZIP CODE

49444

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.

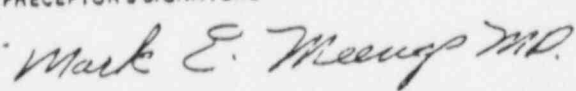
3-Adequate period of training to enable physician to manage radioactive patients and follow patients through diagnosis and/or course of treatment.

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		
	DETERMINATION OF BLOOD AND BLOOD PLASMA VOLUME		
	LIVER FUNCTION STUDIES		
	FAT ABSORPTION STUDIES		
	KIDNEY FUNCTION STUDIES		
	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		
OTHER			
Tc-99m	BRAIN IMAGING		
	CARDIAC IMAGING	100	
	THYROID IMAGING		
	SALIVARY GLAND IMAGING		
	BLOOD POOL IMAGING		
	PLACENTA LOCALIZATION		
	LIVER AND SPLEEN IMAGING		
	LUNG IMAGING		
	BONE IMAGING		
OTHER			

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 (Sodium Iodide)	TREATMENT OF POLYCYTHEMIA VERA, LEUKEMIA, AND BONE METASTASES		Pyrophosphate for Myocardial scans
P-32 (Calcium Iodide)	INTRACAVITARY TREATMENT		
I-131	TREATMENT OF THYROID CARCINOMA		
	TREATMENT OF HYPERTHYROIDISM		
As-198	INTRACAVITARY TREATMENT		
Co-60 or Cs-137	INTERSTITIAL TREATMENT		
	INTRACAVITARY TREATMENT		
I-125 or In-192	INTERSTITIAL TREATMENT		
Co-60 or Cs-137	TELETHERAPY TREATMENT		
Sr-90	TREATMENT OF EYE DISEASE		
	RADIOPHARMACEUTICAL PREPARATION	10	
Mo-99/ Tc-99m	GENERATOR	10	
Sn-113/ In-113m	GENERATOR		
Tc-99m	REAGENT KITS		
Other			
Tl 201 Chloride	Stress Testing	500	

3. DATES AND TOTAL NUMBER OF HOURS RECEIVED IN CLINICAL RADIOISOTOPE TRAINING				
Dec 8-19 1986	Feb 2-13 1987	April 6-30 1987	604 hours	
Jan 5-16 1987	Feb 16-18 1987	May 1-10 1987		
Jan 19-20 1987	Feb 24-27 1987			
Jan 27-30 1987	Mar 2-31 1987			

4. THE TRAINING AND EXPERIENCE INDICATED ABOVE WAS OBTAINED UNDER THE SUPERVISION OF:		5. PRECEPTOR'S SIGNATURE	
a. NAME OF SUPERVISOR			
b. NAME OF INSTITUTION			
c. MAILING ADDRESS			
d. CITY		7. PRECEPTOR'S NAME (Please type or print)	
e. STATE		Mark E. Meengs, M.D.	
f. MATERIALS LICENSE NUMBER(S)		8. DATE	
21-02187-01		5/11/87	

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

EDUCATION

Ferris State College - B.S. Science - Biology Major, Chemistry/Physics Minor - 1961
Central Michigan University - M.A. Biology - Radiation Biology - 1964
University of North Carolina - M.S.P.H. - Public Health - Radiation Physics/Health Physics - 1966
Columbia Pacific University - Ph.D. Management/Education - To be completed.

TECHNICAL TRAINING

Medical Radiologic Technology - Certificate - Blodgett Memorial Hospital - 1957
Industrial Ventilation - Certificate - North Carolina State University - 1966

PROFESSIONAL CREDENTIALING

Registered - Medical Radiologic Technology - RTX (ARRT), 1960
Registered - Nuclear Medicine Technology - RTNM (ARRT), 1961
Registered - Radiography - RT (ARCRT), 1981
Certified - Nuclear Medical Technology - NMT (ASCP), 1961
Certified - Nuclear Medicine Technology - CNMT (NMTCB), 1980
Diplomate - Physics/Instrumentation - D. (ABSNM), 1980
Certified - Education - Michigan Board of Education, 1962
Certified - Education - Ohio Board of Education, 1963
Certified - Education - California Board of Education, 1981
Licensed - Licensee & User - U.S. Nuclear Regulatory Commission - 1973

OTHER PROFICIENCIES

Board Eligible - American Board of Health Physics - Health Physics, 1979
Board Eligible - American College of Radiology - Medical Physics, 1978
Board Eligible - Board of Certified Safety Professionals - 1979
Member - Governor's Commission on Physician's Assistants - Michigan - 1974

PROFESSIONAL MEMBERSHIPS

American Association of Physicists in Medicine	American College of Medical Imaging
American College of Nuclear Medicine	American Hospital Radiology Administrators
American Nuclear Society	American Public Health Association
American Society of Radiologic Technologists	American Society for Training & Development
Clinical Radioassay Society	Computerized Tomography Society
College of Radiological Sciences	Health Physics Society
Hospital Financial Management Association	Society of Radiological Engineering
Society of Nuclear Medicine - Active	Technologist Section - Society of Nuclear Medicine

Charles H. Rose 364-38-8059

Radioisotope Handling Experience

Radioisotope	Form(Use)	Amount,mCi	Reference
3 H	liquid(InVitro)	0.10	4,5,6,7
14 C	liquid(InVitro)	0.10	2,4,5,6,7
18 F	liquid(Med.Diag)	200.00	4,5,6
32 P	Reasearch,Liquid(Diag.&Ther)	50.00	2,3,4,5,6
42 K	Liquid(Daig.)	10.00	4
57 Co	Sealed(QC),Liquid(InVitro)	30.00	4,5,6,7,8
58 Co	Liquid(InVitro)	1.00	5,6
60 Co	Sealed(QC&Ther)Liq.(Diag)	8,000.00	4,5,6,7,8
67 Ga	Liquid(Med.Diag)	20.00	4,5,6
75 Se	Liquid(Med.Daig)	20.00	4,5,6
99 Mo	Generator(Prod.99mTc)	1,500.00	4,5,6
99m Tc	Liquid(Med.Daig)	1,200.00	4,5,6
111 In	Liquid(Med.Diag)	100.00	6
123 I	Liquid(Med.Diag)	50.00	4,5,6
125 I	Liquid(Med.Diag)	20.00	4,5,6
127 I	Liquid(Med.Diag)	30.00	5,6
131 I	Liquid(Daig&Ther)	250.00	4,5,6
133 Ba	Sealed(QC)(Cal)	1.00	2,3,4,5,6,7,8
137 Cs	Sealed(QC)(Cal)	50.00	2,3,4,5,6,7,8
197 Hg	Liquid(Med.Diag)	100.00	5,6
198 Au	Liquid(Diag&Ther)	125.00	4,5,6
201 Tl	Liquid(Diag)	70.00	7,8
203 Hg	Liquid(Med.Diag)	160.00	4,5
210 Po	Sealed(QC&Cal)	1.00	6,7
226 Ra	Sealed(QC&Cal)	400.00	1,5,6,7

Reference Code:

1. Blodgett Memorial Hospital, Grand Rapids, Michigan
2. Central Michigan University, Mt.Pleasant, Michigan
3. University of North Caroloina, Chapel Hill, N. Carolina
4. University of Michigan, Ann Arbor, Michigan
5. Hurley Hospital, Flint, Michigan
6. Providence Hospital, Southfield, Michigan
7. Raidioogical Science Corporation, Flushing, Michigan
8. General Electric, Medical Systems Division, Milwaukee, Wisconsin

CONVERSATION RECORD

TIME

10:00 @

DATE

8/4/87

TYPE

☐ VISIT

☐ CONFERENCE

☒ TELEPHONE

☐ INCOMING

☒ OUTGOING

ROUTING

NAME/SYMBOL

INT

Location of Visit/Conference:

NAME OF PERSON(S) CONTACTED OR IN CONTACT WITH YOU

Mark Meengs, MD.

ORGANIZATION (Office, dept., bureau, etc.)

West Shore Cardiology

TELEPHONE NO.

616/739-9427

SUBJECT

Gloria Juhnke, Mgr.

CN 83650

SUMMARY

① Need name of Instructor(s) at Nuclear Medical Education Program and his/her qualifications (M.D. etc.)

② Dr. Ryan needs to have at least 500 hrs. of clinical training in accordance with New Part 35 subpart J.

ACTION REQUIRED

30 days CN 83650

NAME OF PERSON DOCUMENTING CONVERSATION

SIGNATURE

JR Made

DATE

8/4/87

ACTION TAKEN

SIGNATURE

TITLE

DATE