

NUCLEAR DIAGNOSTICS, P.C.

2440 Whitney Avenue
Hamden, Connecticut 06518
(203) 281-1017 • Fax (203) 281-1690

RECEIVED
REGION 1

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December 10, 2004

Nuclear Regulatory Commission
Division of Nuclear Materials Safety
Region I
King of Prussia, Pennsylvania 19406

03032582

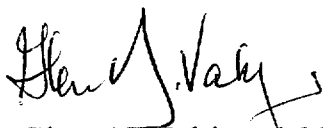
Subject: OFFICE CLOSING (*license # 06-28707-01*)

To whom it may concern,

I am writing to inform you of the closing of my practice at 2440 Whitney Avenue, Hamden, CT. I am pursuing another job opportunity out of state and, effective immediately, wish to terminate my radioactive materials license # 06-28707-01. Short-lived isotopes in my possession have been allowed to decay in storage until reaching background activity. They have been disposed of as biohazardous waste and removed from the premises by Stericycle. Cardinal Health has removed all sealed sources from the premises and disposal certificates are enclosed. Radiation wipes and surveys have been performed. Documented results of these surveys are also enclosed as well as NRC Form 314. Should you have the need to contact me for any additional information, please feel free to call me at (203)281-1017. My forwarding address after January 1, 2005 will be: ~~322~~ Old River Road, Fortson, GA.

3200

Respectfully,



Glen A. Vahjen, M.D.
Nuclear Diagnostics, P.C.
Enclosures (2)

136256
NMSS/RGNI MATERIALS-002

(6-2004)
10 CFR 30.36(j)(1); 40.42(j)(1);
70.38(j)(1); and 72.54(j)(1)

CERTIFICATE OF DISPOSITION OF MATERIALS

Estimated burden per response to comply with this mandatory collection request: 30 minutes. This submittal is used by NRC as part of the basis for its determination that the facility is released for unrestricted use. Send comments regarding burden estimate to the Records and FOIA/Privacy Services Branch (T-5 F52), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to infocollects@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0028), Office of Management and Budget, Washington, DC 20503. If a means used to impose an information collection does not display a currently valid OMB control number, the NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.

LICENSEE NAME AND ADDRESS

Glen A. Vahjen, M.D.
2440 Whitney Ave.
Hamden, CT 06518

LICENSE NUMBER

06-28707-01

DOCKET NUMBER

03032582

LICENSE EXPIRATION DATE

March 31, 2012

A. LICENSE STATUS (Check the appropriate box)

☐ This license has expired.

☒ This license has not yet expired; please terminate it.

B. DISPOSAL OF RADIOACTIVE MATERIAL

(Check the appropriate boxes and complete as necessary. If additional space is needed, provide attachments)

The licensee, or any individual executing this certificate on behalf of the licensee, certifies that:

☐ 1. No radioactive materials have ever been procured or possessed by the licensee under this license.

☒ 2. All activities authorized by this license have ceased, and all radioactive materials procured and/or possessed by the licensee under this license number cited above have been disposed of in the following manner.

☒ a. Transfer of radioactive materials to the licensee listed below:

sealed sources → Cardinal Health (see enclosed)

☒ b. Disposal of radioactive materials:

☒ 1. Directly by the licensee:

Decay in Storage

☐ 2. By licensed disposal site:

☐ 3. By waste contractor:

☒ c. All radioactive materials have been removed such that any remaining residual radioactivity is within the limits of 10 CFR Part 20, Subpart E, and is ALARA.

C. SURVEYS PERFORMED AND REPORTED

☒ 1. A radiation survey was conducted by the licensee. The survey confirms:

☒ a. the absence of licensed radioactive materials

☐ b. that any remaining residual radioactivity is within the limits of 10 CFR 20, Subpart E, and is ALARA.

☒ 2. A copy of the radiation survey results:

☒ a. is attached; or ☐ b. is not attached (Provide explanation); or ☐ c. was forwarded to NRC on: _____ Date

☐ 3. A radiation survey is not required as only sealed sources were ever possessed under this license, and

☐ a. The results of the latest leak test are attached; and/or ☐ b. No leaking sources have ever been identified.

The person to be contacted regarding the information provided on this form:

NAME: Glen Vahjen MD TITLE: RSO / President TELEPHONE (Include Area Code): (803) 281-1017 E-MAIL ADDRESS:

Mail all future correspondence regarding this license to:

3200 Old River Rd, Fortson, GA

C. CERTIFYING OFFICIAL

I CERTIFY UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT

PRINTED NAME AND TITLE

Glen A. Vahjen, M.D.

SIGNATURE

Glen A. Vahjen

DATE

12/24/04

WARNING: FALSE STATEMENTS IN THIS CERTIFICATE MAY BE SUBJECT TO CIVIL AND/OR CRIMINAL PENALTIES. NRC REGULATIONS REQUIRE THAT SUBMISSIONS TO THE NRC BE COMPLETE AND ACCURATE IN ALL MATERIAL RESPECT. 18 U.S.C. SECTION 1001 MAKES IT A CRIMINAL OFFENSE TO MAKE A WILLFULLY FALSE STATEMENT OR REPRESENTATION TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES AS TO ANY MATTER WITHIN ITS JURISDICTION.

SEALED SOURCE DISPOSAL INVENTORY

DATE: 12/02/04

TECHNOLOGIST: Tracy F. Merola, CNMT, RT(N)

| SOURCE | ACQ DATE | MANUF. | MODEL# | SERIAL# | EST.mCi | WIPE (DPM) |
|--------|----------|--------|--------|---------|---------|---------------|
|--------|----------|--------|--------|---------|---------|---------------|

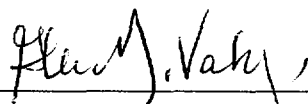
Co-57:

| | | | | | | |
|-----------|--------|--------|--------------|---------|--------|---|
| FLOOD | 12/01 | IPL | SFL18C05710M | 874-48 | .67mCi | 0 |
| E-VIAL | 9/6/02 | IPL | SRV0575M | 9344816 | .69mCi | 2 |
| SPOTS (2) | 5/00 | SYNCOR | 667661 | | <50uCi | 1 |

CS-137:

| | | | | | | |
|--------------------|------|--------|----------|---------------|---------|---|
| E-VIALS | 2/92 | NUC.AS | 67-356 | AOO99 | .159 | 8 |
| | 2/95 | DUPONT | NES-356 | S356030010 | .171 | 2 |
| ROD | 4/95 | DUPONT | NES-139S | NES139S022795 | .03 | 0 |
| BUTTON SOURCES (2) | | | | | < 50uCi | |

SIGNATURE RSO: _____


GLEN A. VAHJEN, M.D.

ALL SEALED SOURCES HAVE BEEN SENT TO CARDINAL HEALTH FOR DISPOSAL

AREA SURVEYS AND WIPES

Date: December 7, 2004

| <u>AREA</u> | <u>METER READING</u> (mR/hr) | <u>WIPE TEST</u> (dpm) |
|-----------------|---------------------------------|---------------------------|
| ISOTOPE PREP | .01 | 4 |
| ISOTOPE STORAGE | .01 | 0 |
| NESAR STORAGE | .01 | 0 |
| GE STARCAM | .01 | 6 |
| INJECTING TABLE | .01 | 0 |
| BACKGROUND | .01 | |

1. *All wipe tests were analyzed using the NDI 62 (NaI crystal with rate meter) system.*


(model # 88078; s/n 840142)

2. *All area surveys were done using:*

Ludlum 14C survey meter (s/n 90912)

Ludlum 44-7 detector (s/n 08544)

Person performing surveys: Tracy F. Merola, CNMT



Radiation Safety Officer: Glen A. Vahjen, M.D.





CardinalHealth

Cardinal Health
Nuclear Pharmacy Services
628 Hebron Ave. Bldg.4
Glastonbury, CT 06033
tel 800-695-0354
tel 860-657-2520
www.cardinal.com

December 29, 2004

Nuclear Diagnostics
2440 Whitney Avenue
1st Floor
Hamden, CT 06518

ATTENTION RADIATION SAFETY OFFICER

This letter confirms the return for disposal of the following returned sources:

Co-57 Flood Source
Serial Number: 874-48

Co-57 Vial Source
Serial Number: 9344816

Co-57 Spot markers x 2

Cs-137 Vial Sources
Serial Number: A0099, S356030010

Cs-137 Rod Source
Serial Number: NES139S022795

The sources were returned on December 23 and 29, 2004 to Isotope Products
Laboratories,
1800 No. Keystone Street, Burbank, CA 91504.

Two Cs137 button sources have been retained at Cardinal Health NPS.

Wipe tests were performed at clinic by technologist.

This is to acknowledge the receipt of your letter/application dated

12/10/2004 ^{12/24/2004} and to inform you that the initial processing which includes an administrative review has been performed.

☒ (Term) 06-28707-01
There were no administrative omissions. Your application was assigned to a technical reviewer. Please note that the technical review may identify additional omissions or require additional information.

☐ Please provide to this office within 30 days of your receipt of this card

A copy of your action has been forwarded to our License Fee & Accounts Receivable Branch, who will contact you separately if there is a fee issue involved.

Your action has been assigned Mail Control Number 136256.
When calling to inquire about this action, please refer to this control number.
You may call us on (610) 337-5398, or 337-5260.

BETWEEN:

License Fee Management Branch, ARM
and
Regional Licensing Sections

: (FOR LFMS USE)
: INFORMATION FROM LTS
: -----

: Program Code: 02200
: Status Code: 0
: Fee Category: 7C
: Exp. Date: 20120331
: Fee Comments: _____
: Decom Fin Assur Req'd: N
:

LICENSE FEE TRANSMITTAL

A. REGION **I**

1. APPLICATION ATTACHED

Applicant/Licensee: VAHJEN, GLEN A., M.D.
Received Date: 20050107
Docket No: 3032582
Control No.: 136256
License No.: 06-28707-01
Action Type: Termination

2. FEE ATTACHED

Amount: _____
Check No.: _____

3. COMMENTS

Signed *Rebecca J. Ford*
Date 11/01/2005

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

1. Fee Category and Amount: _____

2. Correct Fee Paid. Application may be processed for:

Amendment _____
Renewal _____
License _____

3. OTHER _____

Signed _____
Date _____