

<b>NRC FORM 313</b> (8-1999) 10 CFR 30, 32, 33 34, 35, 36, 39 and 40	<b>U. S. NUCLEAR REGULATORY COMMISSION</b>	APPROVED BY OMB: NO. 3150-0120 EXPIRES: 10/31/2005	Estimated burden per response to comply with this mandatory information collection request 7.4 hours. Submittal of the application is necessary to determine that the applicant is qualified and that adequate procedures exist to protect the public health and safety. Send comments regarding burden estimate to the Records Management Branch (T-6 E8), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to bjs1@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0120), 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, NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.
<b>APPLICATION FOR MATERIAL LICENSE</b>			

**INSTRUCTIONS: SEE THE APPROPRIATE LICENSE APPLICATION GUIDE FOR DETAILED INSTRUCTIONS FOR COMPLETING APPLICATION. SEND TWO COPIES OF THE ENTIRE COMPLETED APPLICATION TO THE NRC OFFICE SPECIFIED BELOW.**

<b>APPLICATION FOR DISTRIBUTION OF EXEMPT PRODUCTS FILE APPLICATIONS WITH:</b> DIVISION OF INDUSTRIAL AND MEDICAL NUCLEAR SAFETY OFFICE OF NUCLEAR MATERIALS SAFETY AND SAFEGUARDS U. S. NUCLEAR REGULATORY COMMISSION WASHINGTON, DC 20555-0001  <b>ALL OTHER PERSONS FILE APPLICATIONS AS FOLLOWS:</b> <b>IF YOU ARE LOCATED IN:</b>  CONNECTICUT, DELAWARE, DISTRICT OF COLUMBIA, MAINE, MARYLAND, MASSACHUSETTS, NEW HAMPSHIRE, NEW JERSEY, NEW YORK, PENNSYLVANIA, RHODE ISLAND, OR VERMONT, SEND APPLICATIONS TO:  LICENSING ASSISTANT SECTION NUCLEAR MATERIALS SAFETY BRANCH U.S. NUCLEAR REGULATORY COMMISSION, REGION I 475 ALLENDALE ROAD KING OF PRUSSIA, PA 19406-1415  ALABAMA, FLORIDA, GEORGIA, KENTUCKY, MISSISSIPPI, NORTH CAROLINA, PUERTO RICO, SOUTH CAROLINA, TENNESSEE, VIRGINIA, VIRGIN ISLANDS, OR WEST VIRGINIA, SEND APPLICATIONS TO:  SAM NUNN ATLANTA FEDERAL CENTER U. S. NUCLEAR REGULATORY COMMISSION, REGION II 61 FORSYTH STREET, S.W., SUITE 23T85 ATLANTA, GEORGIA 30303-8931	<b>IF YOU ARE LOCATED IN:</b>  ILLINOIS, INDIANA, IOWA, MICHIGAN, MINNESOTA, MISSOURI, OHIO, OR WISCONSIN, SEND APPLICATIONS TO:  MATERIALS LICENSING SECTION U.S. NUCLEAR REGULATORY COMMISSION, REGION III 801 WARRENVILLE RD. LISLE, IL 60532-4351  ALASKA, ARIZONA, ARKANSAS, CALIFORNIA, COLORADO, HAWAII, IDAHO, KANSAS, LOUISIANA, MONTANA, NEBRASKA, NEVADA, NEW MEXICO, NORTH DAKOTA, OKLAHOMA, OREGON, PACIFIC TRUST TERRITORIES, SOUTH DAKOTA, TEXAS, UTAH, WASHINGTON, OR WYOMING, SEND APPLICATIONS TO:  NUCLEAR MATERIALS LICENSING SECTION U.S. NUCLEAR REGULATORY COMMISSION, REGION IV 611 RYAN PLAZA DRIVE, SUITE 400 ARLINGTON, TX 76011-8064
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RECEIVED REGION I

1 THIS IS AN APPLICATION FOR (Check appropriate item) <input type="checkbox"/> A NEW LICENSE <input type="checkbox"/> B AMENDMENT TO LICENSE NUMBER _____ <input checked="" type="checkbox"/> C RENEWAL OF LICENSE NUMBER <u>45-19057-01</u>	2 NAME AND MAILING ADDRESS OF APPLICANT (include Zip code) HCA Montgomery Regional Hospital 3700 South Main Street Blacksburg, Virginia 24060-9004
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3 ADDRESS(ES) WHERE LICENSED MATERIAL WILL BE USED OR POSSESSED HCA Montgomery Regional Hospital 3700 South Main Street Blacksburg, Virginia 24060-9004	4 NAME OF PERSON TO BE CONTACTED ABOUT THIS APPLICATION James P. Nunn (Physics Assoc.)  TELEPHONE NUMBER (540) 563-0165
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SUBMIT ITEMS 5 THROUGH 11 ON 8-1/2 X 11" PAPER THE TYPE AND SCOPE OF INFORMATION TO BE PROVIDED IS DESCRIBED IN THE LICENSE APPLICATION GUIDE

5 RADIOACTIVE MATERIAL a. Element and mass number, b. chemical and/or physical form, and c. maximum amount which will be possessed at any one time.	6 PURPOSE(S) FOR WHICH LICENSED MATERIAL WILL BE USED
7 INDIVIDUAL(S) RESPONSIBLE FOR RADIATION SAFETY PROGRAM AND THEIR TRAINING EXPERIENCE	8 TRAINING FOR INDIVIDUALS WORKING IN OR FREQUENTING RESTRICTED AREAS
9 FACILITIES AND EQUIPMENT.	10 RADIATION SAFETY PROGRAM.
11 WASTE MANAGEMENT	12 LICENSEE FEES (See 10 CFR 170 and Section 170.31) FEE CATEGORY _____ AMOUNT ENCLOSED \$ <u>NA</u>

13. CERTIFICATION (Must be completed by applicant) THE APPLICANT UNDERSTANDS THAT ALL STATEMENTS AND REPRESENTATIONS MADE IN THIS APPLICATION ARE BINDING UPON THE APPLICANT.  
 THE APPLICANT AND ANY OFFICIAL EXECUTING THIS CERTIFICATION ON BEHALF OF THE APPLICANT, NAMED IN ITEM 2, CERTIFY THAT THIS APPLICATION IS PREPARED IN CONFORMITY WITH TITLE 10, CODE OF FEDERAL REGULATIONS, PARTS 30, 32, 33, 34, 35, 36, 39 AND 40, AND THAT ALL INFORMATION CONTAINED HEREIN IS TRUE AND CORRECT TO THE BEST OF THEIR KNOWLEDGE AND BELIEF.  
 WARNING 18 U.S.C. SECTION 1001 ACT OF JUNE 25, 1948 62 STAT. 749 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.

CERTIFYING OFFICER - TYPED/PRINTED NAME AND TITLE Ward Stevens, CEO	SIGNATURE 	DATE 2/1/2005
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FOR NRC USE ONLY

TYPE OF FEE	FEE LOG	FEE CATEGORY	AMOUNT RECEIVED	CHECK NUMBER	COMMENTS
			\$		
APPROVED BY _____				DATE _____	

136394

HCA Montgomery Regional Hospital Blacksburg, Virginia  
 U.S. Nuclear Regulatory Commission License # 45-19057-01  
 Supplement to USNRC Form 313, Items 5 through 11

5. Radioactive material.

a. Radioactive material: We request approval for the radioactive materials, forms, and maximum amounts in the table below.

Byproduct Material	Chemical/Physical Form	Maximum Amount
Any byproduct material identified in 10 CFR 35.100	Any unsealed byproduct material identified in 10 CFR 35.100	As needed
Any byproduct material identified in 10 CFR 35.200	Any unsealed byproduct material identified in 10 CFR 35.200	As needed
Any byproduct material identified in 10 CFR 35.300	Any unsealed byproduct material identified in 10 CFR 35.300	As needed

b. Sealed sources and devices: Not applicable.

c. Recordkeeping for decommissioning and financial assurance: Response not required.

6. Purpose(s) for which permitted material will be used. We request approval for the uses in the table below.

Categories	Uses
10 CFR 35.100	Medical use of unsealed byproduct material for uptake, dilution, and excretion studies for which a written directive is not required
10 CFR 35.200	Medical use of unsealed byproduct material for imaging and localization studies for which a written directive is not required
10 CFR 35.300	Medical use of unsealed byproduct material for imaging and localization studies for which a written directive is required

7. Individual(s) responsible for radiation safety program and their training and experience. We request approval for the current Radiation Safety Officer and authorized users as listed below.

a. Radiation Safety Officer: Michael R. Aronson, MD

b. Authorized users: Current authorized users as listed in the table below.

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Authorized User	Material and Use
Bertram J. Newmark, MD	35.100; 35.200
John-Lucky Hendric Tamminen, MD	35.100; 35.200
Michael R. Aronson, MD	35.100; 35.200
Philip Hanline, MD	35.100; 25.200; 35.300

- c. Authorized nuclear pharmacist: Response not required.
- d. Authorized medical physicist: Response not required.
- 8. Not applicable.
- 9. Facilities and equipment.
  - a. Facility diagram: We request approval for the facilities as shown on the attached facility diagrams. We have the same facilities as requested in our February 25, 1993 amendment letter.
    - (1) Sealed sources, while in storage, will be shielded as necessary to comply with 10 CFR 20 and ensure doses to personnel are ALARA (as low as reasonably achievable).
    - (2) When practical two delay methods (e.g., door locks, storage cabinets, or other delay method) will be used to secure sealed sources while in storage.
  - b. Radiation monitoring instruments will be calibrated by a person qualified to perform survey meter calibrations. Instruments used to perform required surveys will be based on NUREG-1556, Volume 9, Appendix K, "Equipment Selection" and Table K.1. We reserve the right to upgrade instruments as necessary as long as the upgraded instruments are adequate to measure the type and level of radiation being used.
  - c. Equipment used to measure dosages will be calibrated per nationally recognized standards or the manufacturer's instructions.
  - d. Dosimetry equipment - calibration and use: Response not required.
  - e. Other equipment and facilities: Response not required.
- 10. Radiation protection program.
  - a. Safety procedures and instructions: Response not required.

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b. Occupational dose: We will complete either a prospective evaluation demonstrating that unmonitored individuals are not likely to receive, in one year, a radiation dose in excess of 10% of the allowable limits in 10 CFR 20 or provide dosimetry per the "Criteria" and "Discussion" paragraphs in NUREG-1556, Volume 9, section 8.22.

c. Area surveys: We have developed and will implement and maintain written procedures for area surveys per 10 CFR 20.1101 that meet the requirements in 10 CFR 20.1501 and 10 CFR 35.70.

d. Safe use of unsealed radioactive material: We have developed and will implement and maintain procedures for safe use of unsealed radioactive material that meet the requirements of 10 CFR 20.1101 and 10 CFR 20.1301.

e. Spill procedures: We have developed and will implement and maintain written procedures for safe response to spills of permitted material per 10 CFR 20.1101.

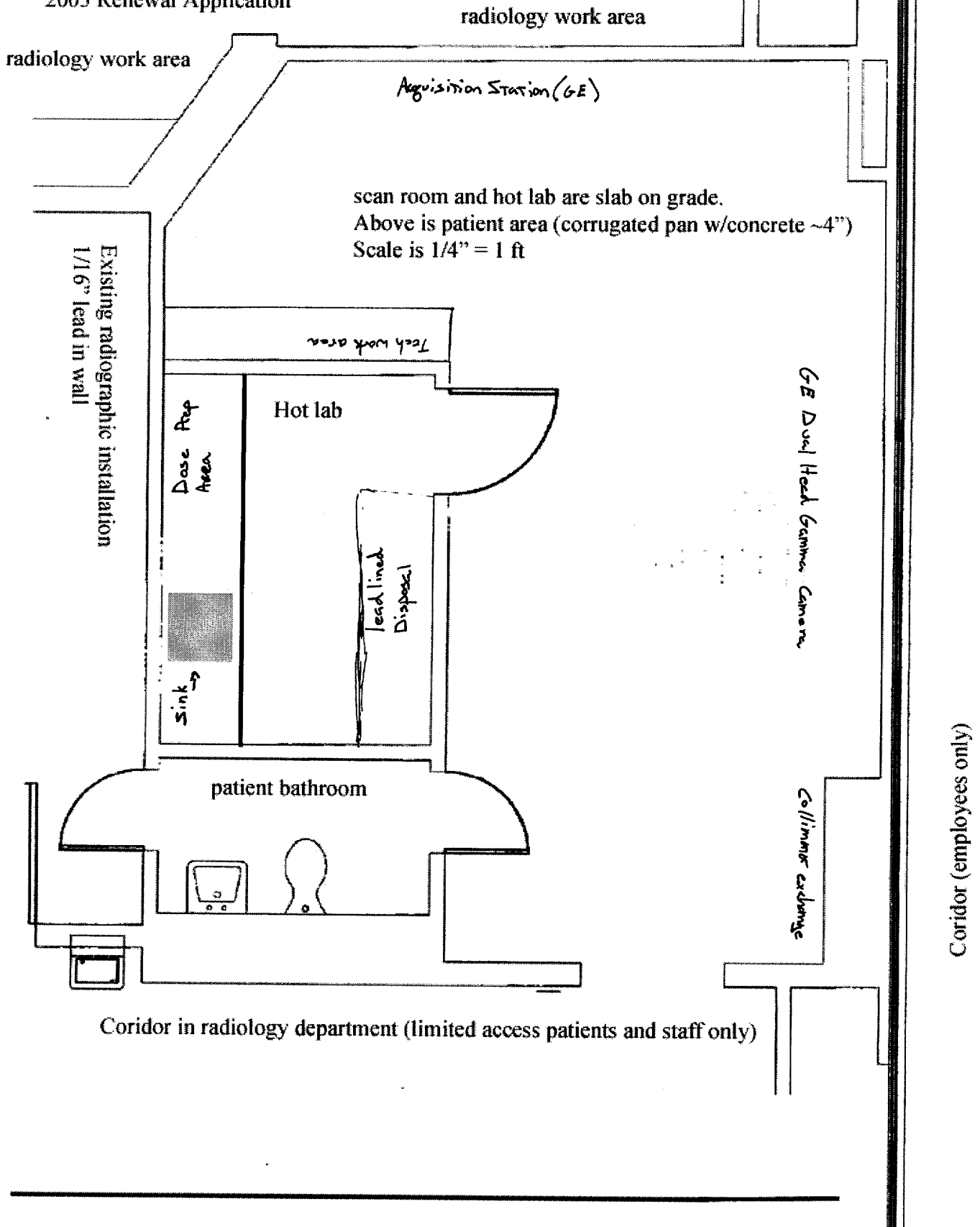
f. Installation, maintenance, adjustment, repair, and inspection of therapy devices containing sealed sources: Response not required.

g. Minimization of contamination: Response not required.

11. Waste management. We have developed and will implement and maintain written waste disposal procedures for permitted material per 10 CFR 20.1101 that also meet the requirements of the applicable section of Subpart K to 10 CFR 20 and 10 CFR 35.92.

Attachment:  
Facility diagrams

Item 9 Floor plan layout for Nuclear medicine Suite  
Montgomery Regional Hospital  
USNRC License # 45-19057-0'  
2005 Renewal Application



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

2/11/2005, and to inform you that the initial processing which includes an administrative review has been performed.

Renew 45-19057-01  
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

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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 136394.  
When calling to inquire about this action, please refer to this control number.  
You may call us on (610) 337-5398, or 337-5260.

(FOR LFMS USE)  
INFORMATION FROM LTS

BETWEEN:

License Fee Management Branch, ARM  
and  
Regional Licensing Sections

: Program Code: 02120  
: Status Code: 2  
: Fee Category: 7C  
: Exp. Date: 20050228  
: Fee Comments: CODE 33  
: Decom Fin Assur Reqd: N  
:.....

LICENSE FEE TRANSMITTAL

A. REGION I

1. APPLICATION ATTACHED

Applicant/Licensee: MONTGOMERY REGIONAL HOSPITAL  
Received Date: 20050202  
Docket No: 3015297  
Control No.: 136394  
License No.: 45-19057-01  
Action Type: Renewal

2. FEE ATTACHED

Amount: /  
Check No.: /

3. COMMENTS

Signed Rebecca Junod  
Date 2/2/2005

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 \_\_\_\_\_