



West Jersey Hospital - Marlton Division  
Office of Radiation Physics  
90 Brick Road  
Marlton, NJ 08053

(856) 355-6282 fax (856) 355-6121

March 9, 2005

Sandy Gabriel, Senior Health Physicist  
Nuclear Materials Safety Branch  
U.S. NRC Region I  
475 Allendale Road  
King of Prussia, PA 19406-1415

Reference: NRC License #29-01862-02, Virtua-West Jersey Hospitals

03002443

Dear Sandy:

Virtua Health - West Jersey Hospital System wishes to notify the NRC of the removal of several Authorized Users from our materials license due to various reasons listed. Please amend our license as appropriate:

Authorized User	Approved Uses	Reason for removal
Joseph Centrone, MD	35.100; 35.200; 35.300; 35.400	Deceased
Robert Steeb, MD	35.100; 35.200; 35.300; 35.400	Deceased
Hikon Chon, MD	35.100; 35.200; 35.300; 35.400	Retired
Paul S. Sirotta	35.100; 35.200; 1-131 hyperthyroid	Left practice
Albert S. Denittis, MD, MS	35.400	Relocated, left practice
Harry Lessig, MD	35.100; 35.200; 35.300	Left practice

Should you have any questions please feel free to contact me at (856) 355-6282. Thank you for your assistance.

Sincerely,  
VIRTUA - WEST JERSEY HEALTH SYSTEM

  
Daniel J. Januseski, MS  
Radiation Safety Officer

136450  
NMSS/RGNI MATERIALS-002

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

3/9/2005, and to inform you that the initial processing which includes an administrative review has been performed.

☒ Amendment 29-01862-02 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 136650.  
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: : (FOR LFMS USE)  
: INFORMATION FROM LTS  
: -----  
:   
License Fee Management Branch, ARM : Program Code: 02120  
and : Status Code: 0  
Regional Licensing Sections : Fee Category: 7C  
: Exp. Date: 20101231  
: Fee Comments: CODE 23  
: Decom Fin Assur Req'd: N  
: .....

LICENSE FEE TRANSMITTAL

A. REGION I

1. APPLICATION ATTACHED

Applicant/Licensee: VIRTUA HEALTH SYS.WEST JERSEY HOSP.  
Received Date: 20050310  
Docket No: 3002443  
Control No.: 136650  
License No.: 29-01862-02  
Action Type: Amendment

2. FEE ATTACHED

Amount: /  
Check No.: /

3. COMMENTS

Signed Rebecca J. Ford  
Date 3/24/2008

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 \_\_\_\_\_