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REGION I

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March 30, 2005

U.S. NRC Region I  
475 Allendale Road  
King of Prussia, PA 19406-1415

Re: License No. 45-23001-01 03020156

To Whom It May Concern:

Please be advised that Norton HMA, Inc. d/b/a Wise Regional Medical Center has changed its name to Norton HMA, Inc. d/b/a **Mountain View Regional Medical Center**. All other information (address and Radiation Safety Officer) remains the same.

Sincerely,

Jamie W. Guin, Jr.  
CEO

Enclosure: copy of current materials license

136847  
NMSS/RGNI MATERIALS-002

Duplicate

■ MATERIALS LICENSE ■

Duplicate

Pursuant to the Atomic Energy Act of 1954, as amended, the Energy Reorganization Act of 1974 (Public Law 93-438), and Title 10, Code of Federal Regulations, Chapter I, Parts 30, 31, 32, 33, 34, 35, 36, 39, 40, and 70, and in reliance on statements and representations heretofore made by the licensee, a license is hereby issued authorizing the licensee to receive, acquire, possess, and transfer byproduct, source, and special nuclear material designated below; to use such material for the purpose(s) and at the place(s) designated below; to deliver or transfer such material to persons authorized to receive it in accordance with the regulations of the applicable Part(s). This license shall be deemed to contain the conditions specified in Section 183 of the Atomic Energy Act of 1954, as amended, and is subject to all applicable rules, regulations, and orders of the Nuclear Regulatory Commission now or hereafter in effect and to any conditions specified below.

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| <p>Licensee</p> <p>1. Wise Regional Medical Center</p> <p>2. Third Street, N.E.<br/>Norton, Virginia 24273</p> | <p>In accordance with the letter dated January 10, 2005,</p> <p>3. License No. 45-23001-01 is amended in its entirety to read as follows:</p> <p>4. Expiration Date: September 30, 2014</p> <p>5. Docket No. 030-20156</p> |
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|--|---|--|
| <p>6. Byproduct, source, and/or special nuclear material</p> <p>A. Any byproduct material permitted by 10 CFR 35.100</p> <p>B. Any byproduct material permitted by 10 CFR 35.200</p> <p>C. Any byproduct material permitted by 10 CFR 35.300</p> | <p>7. Chemical and/or physical form</p> <p>A. Any</p> <p>B. Any</p> <p>C. Any</p> | <p>8. Maximum amount that licensee may possess at any one time under this license</p> <p>A. As needed</p> <p>B. As needed</p> <p>C. 1000 millicuries</p> |
|--|---|--|

9. Authorized use:
- A. Any uptake, dilution and excretion study permitted by 10 CFR 35.100.
  - B. Any imaging and localization study permitted by 10 CFR 35.200.
  - C. Any diagnostic study or therapy procedure permitted by 10 CFR 35.300.

CONDITIONS

- 10. Licensed material may be used or stored only at the licensee's facilities located at Third Street, N.E., Norton, Virginia.
- 11. The Radiation Safety Officer for this license is Kathleen A. DePonte, M.D.

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**MATERIALS LICENSE  
SUPPLEMENTARY SHEET**

License No.

4E23001-01

Docket No.

030-20156

Amendment No. 10

12. Licensed material is only authorized for use by, or under the supervision of:

A. Individuals permitted to work as an authorized user in accordance with 10 CFR 35.13 and 35.14.

B. The following individuals are authorized users for medical use as indicated:

Authorized Users

Material and Use

Kathleen A. DePonte, M.D.

35.100; 35.200; 35.300

13. In addition to the possession limits in Item 8, the licensee shall further restrict the possession of licensed material to quantities below the minimum limit specified in 10 CFR 30.35(d) for establishing decommissioning financial assurance.

14. The licensee is authorized to transport licensed material in accordance with the provisions of 10 CFR Part 71, "Packaging and Transportation of Radioactive Material."

15. Except as specifically provided otherwise in this license, the licensee shall conduct its program in accordance with the statements, representations, and procedures contained in the documents, including any enclosures, listed below. This license condition applies only to those procedures that are required to be submitted in accordance with the regulations. Additionally, this license condition does not limit the licensee's ability to make changes to the radiation protection program as provided for in 10 CFR 35.26. The U.S. Nuclear Regulatory Commission's regulations shall govern unless the statements, representations, and procedures in the licensee's application and correspondence are more restrictive than the regulations.

A. Application dated March 29, 2004 (ML040930153)

B. Letter dated January 10, 2005 (ML050260145)

For the U.S. Nuclear Regulatory Commission

*Original signed by Michelle Beardsley*

Date January 26, 2005

By

Michelle Beardsley

Medical Branch

Division of Nuclear Materials Safety

Region I

King of Prussia, Pennsylvania 19406

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

3/30/2005, and to inform you that the initial processing which includes an administrative review has been performed.

Amendment 45-23001-01 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** 136847.  
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: 0  
: Fee Category: 7C  
: Exp. Date: 20140930  
: Fee Comments: CODE 23  
: Decom Fin Assur Req'd: N  
:.....

LICENSE FEE TRANSMITTAL

A. REGION I

1. APPLICATION ATTACHED

Applicant/Licensee: BON SECOURS ST. MARY'S HOSP., INC.  
Received Date: 20050411  
Docket No: 3020156  
Control No.: 136847  
License No.: 45-23001-01  
Action Type: Amendment

2. FEE ATTACHED

Amount: /  
Check No.: /

3. COMMENTS

Signed Rebecca Jund  
Date 4/19/2005

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 \_\_\_\_\_