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REGION 1

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March 31, 2005

Licensing Assistance Team  
Division of Nuclear Materials Safety  
U.S. Nuclear Regulatory Commission, Region 1  
475 Allendale Road  
King of Prussia, PA 19406-1415

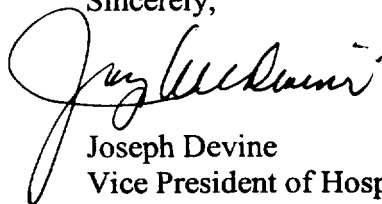
Re: NRC License Amendment for New RSO for the following NRC license number  
SNM-1690 Kennedy Health System - Stratford  
67002427

To Whom It May Concern:

Please amend our radioactive materials license regarding Coratomic pacemakers, to change our radiation safety officer from Libby Cone, MD, to Lester Tripp, MS. Mr. Tripp is RSO for the Kennedy Health System, Stratford, materials license #29-12167-01.

If you have any questions, please contact Lester Tripp at 856-582-3008.

Sincerely,



Joseph Devine  
Vice President of Hospital Services

**Cherry Hill**

2201 Chapel Avenue West  
Cherry Hill, NJ 08002  
TEL 856-488-6500

**Stratford**

18 East Laurel Road  
Stratford, NJ 08084  
TEL 856-346-6000

**Washington Township**

435 Hurville-Cross Keys Rd.  
Turnersville, NJ 08012  
TEL 856-582-2500

136883  
NMCS/RGNI MATERIALS-002

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

3/31/2005, and to inform you that the initial processing which includes an administrative review has been performed.

☒ Amendment SNM-1690  
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 136883.  
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  
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Program Code: 22160  
Status Code: 0  
Fee Category: EX 7C  
Exp. Date: 20121031  
Fee Comments: PACEMAKER/29-12167-01  
Decom Fin Assur Req'd: N  
.....

LICENSE FEE TRANSMITTAL

A. REGION I

1. APPLICATION ATTACHED

Applicant/Licensee: KENNEDY HEALTH SYSTEM  
Received Date: 20050415  
Docket No: 7002427  
Control No.: 136883  
License No.: SNM-1690  
Action Type: Amendment

2. FEE ATTACHED

Amount: /

Check No.:         

3. COMMENTS

Signed Refresca Junod

Date 4/22/2005

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 \_\_\_\_\_