

April 10, 2005

030 11222

RE: Amendment to NRC License number 37-16554-01

Licensing Assistant Section Nuclear Materials Safety Branch U.S. Nuclear Regulatory Commission, Region I 475 Allendale Road King of Prussia, PA 19406-1415

To Whom It May Concern:

We would like to remove the following Authorized Users from our materials license.

William B. Miller, Jr., M.D.	Richard E. Kraus, M.D.
Stanley P. Laucks, Jr., M.D.	F.C. Newton, M.D.
Thomas Peiffer, M.D.	Marc G. Soble, M.D.
Michael J. Mandell, M.D.	Andrew J. Behnke, M.D.
Heng F. Lim, M.D.	

If you require any additional information concerning this amendment request, please contact Doug Heim, our consultant physicist, at (570) 452-6475.

Sincerely,

Sester Romaine Niemeyer SCC

Sister Romaine Niemeyer, SCC President and CEO

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A Service of Holy Spirit Health System 503 North 21st Street • Camp Hill, PA 17011-2288 (717) 763-2100

MACC/ROM MATERIALS-032

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

 $\frac{4 \left( \omega \right) \left( 2 \cos 5 \right)}{1 \cos 5}$ , and to inform you that the initial processing which includes an administrative review has been performed.

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.

136887 Your action has been assigned Mail Control Number When calling to inquire about this action, please refer to this control number. You may call us on (610) 337-5398, or 337-5260.

NRC FORM 532 (RI) (6-96)

Sincerely, Licensing Assistance Team Leader

	: (FOR LFMS USE)
	: INFORMATION FROM LTS
BETWEEN:	:
	:
License Fee Management Branch, ARM	: Program Code: 02120
and	: Status Code: 0
Regional Licensing Sections	: Fee Category: 7C
	: Exp. Date: 20131031
	: Fee Comments: CODE 21
	: Decom Fin Assur Reqd: N

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LICENSE FEE TRANSMITTAL

I A. REGION

- 1. APPLICATION ATTACHED
- Applicant/Licensee:HOLY SPIRIT HOSPITALReceived Date:20050415Docket No:3011222Control No.:136887License No.:37-16554-01Action Type:Amendment
- 2. FEE ATTACHED
  - Amount: \_\_\_\_\_
- 3. COMMENTS

Signed 1 412 m Date

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 \_\_\_\_\_\_