

Cardinal Health
6464 Canoga Avenue
Woodland Hills, CA 91367
tel 818.737.4000
fax 818.737.4848

www.cardinal.com



March 11, 2005

Mr. Jim Montgomery
U.S. Nuclear Regulatory Commission
611 Ryan Plaza Drive, Suite 400
Arlington, Texas 76011-8064

RE: Amendment Request for License 04-26507-01MD, Cardinal Health, Woodland Hills, CA.

Dear Mr. Montgomery:

As discussed in previous conversations with both you and Ms. Katanic, the Quality & Regulatory Department for the Cardinal Health Nuclear Pharmacy Services business will be moving to Dublin, Ohio. Members of the Woodland Hills staff will be transitioning to Ohio over the next few months, with the entire Department moving by June 30, 2005. The new address for the above referenced license after June 30, 2005, will be:

Cardinal Health
Nuclear Pharmacy Services
7000 Cardinal Place
Dublin, Ohio 43017

Cardinal Health commits to maintaining the functionality of the Quality and Regulatory Department, including both the corporate Health Physics staff and the field based audit staff. Additionally, Paul Gotti, BCNP (former Director of Compliance and Auditing), will rejoin Cardinal Health as the new Corporate Radiation Safety Officer. No other radiation safety programs will occur.

As discussed previously, Cardinal Health realizes this may cause the transfer of the multi-facility license to another NRC Region. We look forward to working with the NRC to make this a smooth transition if the NRC deems it necessary to move the oversight of the license.

If there are any questions regarding this request, please contact me at (818) 737-4491.

Sincerely,

Kory Kodimer, Ph.D.
Manager, Health Physics
Nuclear Pharmacy Services

cc: NRC Facility Radiation Safety Officers
NRC Consolidated Amendment Request File (3)

SSSP Review Comp. Pub. Av. Non-Sensitive No 470527

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BETWEEN:

License Fee Management Branch, ARM
and
Regional Licensing Sections

(FOR LEMS USE)
INFORMATION FROM LTS

Program Code: 02500
Status Code: 0
Fee Category: 3C 3P 2B
Exp. Date: 20110831
Fee Comments: 3P = SERVICE FOR OTHERS
Decom Fin Assur Req'd: N
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LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED

Applicant/Licensee: CARDINAL HEALTH
Received Date: 20050330
Docket No: 3033224
Control No.: 470527
License No.: 04-26507-01MD
Action Type: Amendment

2. FEE ATTACHED

Amount: _____
Check No.: _____

3. COMMENTS

Signed Collette M. Menden
Date 5/19/05

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 _____