COLLEEN CAROL CASEY MATERIALS LICENSING BRANCH UNITED STATES NUCLEAR REGULATORY COMMISSION

REGION III

2443 WARRENVILLE ROAD STE 210 LISLE. ILLINOIS 60532-4352

OFFICE: (630)-829-9841 FAX: (630) 829-9782 or (630) 515-1259

| ACTUALLY FAXED? YES. | Call Center person | DATE (a 6: V7p. September 2, 2005 | |
|-------------------------------|------------------------------|------------------------------------|--|
| NAME OF PERSON(S) CONTACTED | ORGANIZATION | TELEPHONE NO. | |
| James Botti, MS, proposed RSO | for St. John Macomb Hospital | 734-662-3197 | |
| SUBJECT | Control No.: 314270 | | |

SUMMARY

We have reviewed your application dated March 10, 2005, and your letters dated March 10, 2005, July 27, 2005, and September 1, 2005, requesting renewal of your byproduct materials license and find that we need additional information as follows:

The letter dated July 27, 2005, requests that you be named "Nuclear Medicine RSO" for the license. I noted that this license currently has two RSOs, one for nuclear medicine and one for radiation therapy.

As NRC can no longer authorize multiple RSOs for medical use licenses, pursuant to a recent internal interpretation of 10 CFR 35.24, only one RSO can be named to this license. Please respond by advising us who should be the sole RSO for this license, you or Mr. Taylor.

2. The letter dated September 1, 2005, requested the removal of cesium-137 from your license. It is not clear whether your intention is to delete all authorization for materials in 10 CFR 35.400 of just cesium-137 Please clarify your specific intentions in this regard.

Please note that we will be unable to delete your authorization for either just cesium-137 brachytherapy materials or all materials in 10 CFR 35.400 until the following additional information is responded to:

a. Please clarify whether you ever possessed any cesium-137 or materials in 10 CFR 35.400 under this license. If you did not, please so state.

If you did, please provide the following:

1. Please submit a description and list of the cesium-137 inventory (manufacturer's name(s) and model nos.) or materials possessed under 10 CFR 35.400 and indicate when the last use of such materials took place (month and year).

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Please forward a copy of the final leak test results of the last sealed sources (especially cesium-137) possessed under 10 CFR 35.400. In lieu of submitting the final leak test results, a comprehensive close-out survey of areas where 10 CFR 35.400 materials were used/stored may be submitted.

The survey should consist of exposure rate measurements to show that all sources of radioactive material have been removed, and contamination checks of areas where radioactive materials were used or stored. Average radiation levels associated with surface contamination and removable contamination should not exceed those specified in our decontamination guide (if you do not have a copy of this document please let me know and a copy will be either be faxed or mailed to you).

Please submit the following information with your close-out survey:

- A diagram of the facility with survey and wipe test results keyed to specific locations.
- b. The name of the person performing the survey.
- The date the survey was performed.
- d. The instrument(s) used for exposure rate measurements and for analysis of the wipes.
- e. Background readings, each instruments' efficiency or correction factor and the radionuclide standards used to determine the efficiency/correction factor.
- f. The date(s) that the survey instruments were last calibrated.

Please forward a copy of the final disposition of cesium-137 or materials possessed under 10 CFR 35.400 and the acknowledgment of receipt from each recipient of said materials (vendors, other specific licensees who accepted transfer of sources, etc.). This is necessary to determine that the sources were disposed of to authorized recipients who were licensed to possess them.

As a room was used to store the cesium-137 or sealed sources possessed under 10 CFR 35.400, please advise us as to whether this room/is now decommissioned of all licensed materials and unrestricted in use. Advise us whether this room should be deleted from the license as an area of use, as defined in 10 CFR 35.2.

Please advise us if any authorized user authorizations will change a Change as a result of deleting either cesium-137 or all materials under 10 CFR 35.400.

The letter dated September 1, 2005, requests that Daniel Henry Macek, M.D. be restored as an Authorized User to your license because "he was inadvertly left off out previous amendment #50." Dr. Macek will be listed as an AU on your renewed

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3. NR license but please note that his name is listed on Amendment No. 50, excerpt attached. He was not included in your renewal application dated March 10, 2005, however. This is a no response item.

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Your application was silent with respect to continuing authorization for the use of materials in 10 CFR 31.11. Please clarify your specific intentions with respect to continued authorization of materials in 10 CFR 31.11.

Please note that we cannot delete authorization for materials in 10 CFR 31.11 nor can we authorize the release of the room(s) where you used materials in 10 CFR 31.11 for unrestricted use (even by other members of your staff) until we have received and reviewed a copy of the results of your close-out survey and your associated waste has been accounted for. Please also advise us if any authorized user authorizations will change if you do decide to request deletion of this material.

The survey should consist of exposure rate measurements to show that all sources of radioactive material have been removed, and contamination checks of areas where radioactive materials were used or stored. Average radiation levels associated with surface contamination and removable contamination should not exceed those specified in the enclosed decontamination guide. Please submit the following information with your close-out survey:

- a. A diagram of the facility with survey and wipe test results keyed to specific locations.
- b. The name of the person performing the survey.
- c. The date the survey was performed.
- d. The instrument(s) used for exposure rate measurements and for analysis of the wipes.
- e. Background readings and each instruments' efficiency or correction factor.
- f. The date(s) that the survey instruments were last calibrated.

Ja Subitem Nos. 6, 7, 8, and 9 H. I will delete this authorization in favor of incorporating it into the authorization for materials in 10 CFR 35.500. This is a no response item.

6. Will delete Condition No. 13, as it appears on Amendment No. 50, because 10 CFR 35.70 no longer exists as a regulatory requirement. This is a no response item.

Prematery Williams

Atem 8.15, Item 9 of your renewal application dated March 10, 2005, shows a facility diagram, including a room labelled "HDR room," marked G69. Your license does not authorize a HDR device. **Please explain this room marking**.

Item 8.19, Item 9 of your renewal application dated March 10, 2005, included a statement concerning calibration of dosimetry equipment and therapy sealed sources calibration procedures, see excerpt attached. This commitment does not appear to be applicable to your licensed program. **Please explain this**

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withdraw is .

commitment and, if necessary, advise us to withdraw it from your renewal application.

In accordance with 10 CFR 2.390 of the NRC's "Rules of Practice," a copy of this letter will be available electronically in the NRC Public Document Room or from the Publicly Available Records (PARS) component of NRC's document system (ADAMS). The NRC's document system is accessible from the NRC Web site at http://www.nrc.gov/reading-rm/adams.html.

ACTION REQUIRED

Submit the requested information within 8 calendar days (by September 10, 2005) or contact me to arrange a different response date or mechanism for resolving these discrepancies. Please reference control number **314270** to facilitate proper handling. Upon receipt of your response we will resume our review. Address your written response to my attention at the above address.

PLEASE DIRECT ANY QUESTIONS YOU MAY HAVE TO ME AT (630) 829-9841 or (800) 522-3025.

NAME OF PERSON DOCUMENTING CONVERSATION

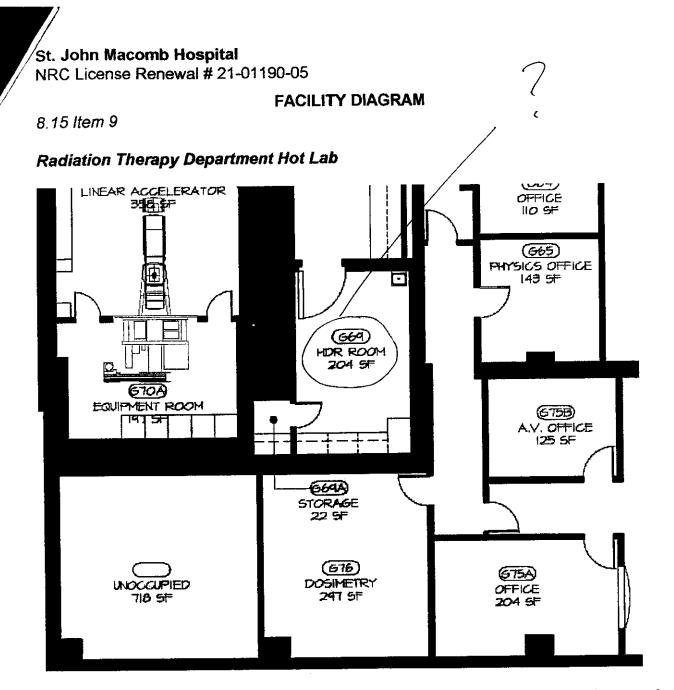
SIGNATURE

ollen Carol Casey

DATE

Colleen Carol Casey

September 2, 2005



All sealed sources are stored in shielded container in the storage. Access is restricted by lock and key to authorized personnel only.

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|---------------|---------------------------------------|--------------------------------|--|--|
| | | | License Number 21-01190-05 | |
| | MATERIALS LICENSE SUPPLEMENTARY SHEET | ; | Docket or Reference Number 030-02005 | |
| | | | Amendment No. 50 | |
| | S. Wagenburg, M.D. | | t 35.100, 35.200, 35.300, 35.500, 31.1 ium-153 in VANTAGE devices for med aphy. | |
| | H. J. Zeskind , M .D. | 31.11, i gadolin radiogr | 35.100, 35.200, 35.300, 35.400, 35.5 uranium depleted in uranium-235, and ium-153 in VANTAGE devices for me aphy. | |
| | G. L. Figacz, M.D. | R1Œ gadolin radiogr | 35.100, 35.200, 35.300, 35.500, 31. idm-253 in VANTAGE devices for me aphy. | |
| | Kevin O'Brien, M.D. | gadolin | 35.100, 35.200, 35.300, 35.500, 31. ium-1531 WAN (AGE devices for me | |
| | Amr Aref, M.D.F | 7,10 CF 10,235. | and uraniom depleted in ura | |
| | David G. Fry, M.D. | | MODINE 200, 3300, 35.500, 31. | |
| | Richard G. Hayes, M.D. | FF position radiogra | 100, 35.200, 35.300, 35.500, 31. unii 153 in VNNTAGE devices for me aphy. | |
| \rightarrow | Daniel Henry Macek, M.D. | VAN | 35.100, 35.200, 35.300, and gadolir TAGE devices for medical radiograph | |
| Pa | Paul Chuba, M.D. | 10 CFR 235. | 35.400 and uranium depleted in ura | |
| | Philip Adler, M.D. | | 35.100, 35.200, and gadolinium-153 GE devices for medical radiography. | |
| Lie | Linda Sue Rissman, D.O. | 10 CFR | 35.400. | |
| | Cynthia Holland Browne, Ph.D., M.D. | 10 CFF | 35,400. | |
| | Ahmed E. Ezz, M.D. | | : 35.300 (excluding iodine-131 for hyproid carcinoma treatments) and 35.40 | |
| | Zenon Zarewych, M.D. | 10 CFF | 35.100 and 35.200. | |

TRANSMISSION VERIFICATION REPORT

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UNITED STATES NUCLEAR REGULATORY COMMISSION REGION III

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