

**From:** Sandra Gabriel  
**To:** combinea@upmc.edu  
**Date:** Wed, Nov 2, 2005 10:27 AM  
**Subject:** Additional information for NRC amendment request; mail control 137834

License No.: 37-11562-01  
Docket No.: 03003143  
Control No.: 137834

To: Tony Combine

This is to follow up to our telephone conversation earlier today. Please provide the following additional information within 30 days. You may mail your response (signed by management) or fax it to 610-337-5269, referencing mail control 137834. Please leave a voicemail or e-mail message to alert me when you send the fax.

Please send an e-mail to confirm receipt of this message.

- 1) Confirm that both proposed authorized medical physicists (AMPs), Dineli Alahakone, M.S. and Alphonse Loper, M.S., will receive vendor training in use of your HDR unit before functioning independently as AMP.
- 2) For Alphonse Loper, M.S., provide a copy of the transcript from his master's degree. Also document the range of dates during which he has worked full-time under your supervision.

Per our telephone conversation, we will list these two individuals as AMP for HDR only and not for IVB. To remove the Novoste IVB authorization from your license, please submit documentation of receipt of the final sources by the vendor. You may do this either as part of the current amendment or in a future request.

Thank you for your help. If you have any questions, you may e-mail me or call at 610-337-5182.

Sandy Gabriel  
Senior Health Physicist  
Medical Branch  
NRC Region I

**Mail Envelope Properties** (4368DACD.F0D : 8 : 27167)

**Subject:** Additional information for NRC amendment request; mail control  
137834  
**Creation Date:** Wed, Nov 2, 2005 10:27 AM  
**From:** Sandra Gabriel  
**Created By:** [SLG2@nrc.gov](mailto:SLG2@nrc.gov)

**Recipients**

upmc.edu  
combinea ([combinea@upmc.edu](mailto:combinea@upmc.edu))

**Post Office**

**Route**  
upmc.edu

<b>Files</b>	<b>Size</b>	<b>Date &amp; Time</b>
MESSAGE	2423	Wednesday, November 2, 2005 10:27 AM

**Options**

**Expiration Date:** None  
**Priority:** Standard  
**Reply Requested:** No  
**Return Notification:** None  
  
**Concealed Subject:** No  
**Security:** Standard