

Environmental Health and Safety

Telephone: (336) 716-9375 Fax: (336) 716-0588

June 14, 2006

Ms. Margaret M Doane, Deputy Director Office of International Programs Mail Stop: 4E21 US Nuclear Regulatory Commission One White Flint North 11555 Rockville Pike Rockville, MD 20852-2738

SUBJECT: IMPORTATION OF MDS NORDION GAMMACELL MODEL 1000 ELITE IRRADIATOR FROM CANADA

Dear Ms. Doane:

Per our recent telephone conversation, I am submitting this cover letter regarding Wake Forest University Health Science's purchase and installation of a radioactive source from Canada.

The authorized place of use for this source (PTRP Building Ala) is still under construction; plans call for its completion in early-mid September 2006. Later that month, MDS Nordion of Ottawa, Canada, will transport and install a Gammacell Model 1000 irradiator in Building Ala.

I have enclosed a copy of our recently amended broad scope medical license for your review. Item VV lists the isotope, physical form, maximum activity and authorized use; Condition 10I lists the authorized place of use for this radioactive material.

I appreciate your time and attention to this matter. If I may provide more information, please contact me at (336)716-1202 or by e-mail, dhowell@wfubmc.edu.

Sincerely,

David C Howell, Radiation Safety Officer Wake Forest University Baptist Medical Center

Enclosure: NRC Form 7

Copy of North Carolina Radioactive Material License No. 034-0158-1

RECEIVED OIP



NRC FORM 7 U.S. NUCLEAR REGULATORY COMMISSION						APPROVED BY OMB: NO. 3150-0027 EXPIRES: 05/31/2006							
(5-2003) 10 CFR 110						Estimated burden per response to comply with this mandatory collection request: 2.4 hours. This submittal is reviewed to ensure that the applicable statutory, regulatory, and							
							policy considerations are satisfied. Send comments regarding burden estimate to the Records Management Branch (T-6 E6), U.S. Nuclear Regulatory Commission, Washington,						
APPLICATION FOR LICENSE TO EXPORT							DC 20555-0001, or by internet e-mail to infocollects@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0027), Office of						
NUCLEAR MATERIAL AND EQUIPMENT							Management and Budget, Washington, DC 20503. If a means used to impose an						
(See Instructions on Reverse)							information collection does not display a currently valid OMB control number, the NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.						
1. APPLI		a. DATE	OF APPLICATION		NT'S REFERENCE			a DOCKET NUMBE	RU	b. LICENS	E NUMBER		
USE		June	14, 2006	034-0	158-1	2. NRC I	USE			12B	PT	153	
3. APPLICANT'S NAME AND ADDRESS							4. SUPPLIER'S NAME AND ADDRESS (Complete If applicant is not supplier)						
a. NAME Wake Forest University Health Sciences													
b. STREET ADDRESS (Facility Site)							a. NAME						
C/O EH&S - Medical Center Boulevard							MDS Nordion						
c CITY		(I. STATE	e. ZIP CODE	b. STREET ADDRESS								
	Winston-Salem			NC 27157-1023		447 March Road							
r telephone number g. FAX (336) 716-1202 (336) 716-05			it. E-MAIL 588 dhowell@wfubmo		c. CITY Ottawa, Ontario, CANADA				d. STATE	d. STATE e. ZIP CODE K2K 1X8			
			6. FINAL SHIP										
			SCHEDULI						9. CONTRACT NO.				
09/01/2006 12/31/2006							ı	12/31/2006		N/A			
		10. UL	TIMATE FOREIGN CO	NSIGNEE			11. ULTIMATE END USE						
a. NAME							(include plant or facility name)						
Wake Forest University Health Sciences						PTRP Building A1a 415 East Third Street							
b. STREET ADDRESS (Facility Site) C/O EH&S - Medical Center Boulevard						Winston-Salem, NC 27101							
a CITY d. COUNTRY													
Winston-Salem U						11a. DATE REQUIRED							
12. INTERMEDIATE FOREIGN CONSIGNEE							13. INTERMEDIATE END USE						
a. NAME													
N/A b. STREET ADDRESS (Facility Site)							N/A S T						
U. STREET PLUMESS (FRUITY SHR)							N/A B FF C F C F C F C F C F C F C F C F C						
a. CITY d. COUNTRY													
						13a. DATE REQUIRED							
		14. INTE	RMEDIATE FOREIGN	TE END USE			2	riì					
a. NAME N/A													
b. STREET ADDRESS (Facility Site)							N/A				ٔ پ	\circ \mid	
												一 一	
a. CITY d. COUNTRY													
						15a. DATE	REQU	IRED .					
16. COM CODE (Include chemical and physical form of nuclear material; give dollar nuclear equipment and components)						value of	18.	. MAX. ELEMENT WEIGHT	19. MAX. WT. %	20. MAX. WEK		21. UNIT	
									NZA	AL/A			
2.33.4	Cesium-137 Chemical form: Element							i	N/A	N/A			
	Physical form: Solid												
112.00													
22. FOREIG	N OBLIGATI	ONS BY C	OUNTRY AND PERCE	NTAGE (Us	e separate sheet if nece	essary)						· · · · · · · · · · · · · · · · · · ·	
			university	•-	•								
23. ADDITIO	ONAL INFOR	MATION	ON CONSIGNEES. FN	D USES. ANT	PRODUCT DESCRIPTIO	N (Use sen	arate	sheet if necessary)					
					adiator to deliver co					nples for n	nedical p	ourposes	
			al application to		samples. n conformity with Title	10 Codo o	f Fad	erel Regulationes as	nd that all !-	formation !-	thic and	cation is	
			her knowledge.	hisharan I		.v, voue 0		a.et LaAntenous! El	unet en li	vimeuva (N	ans appli	CEUCII 18	
25. AUTHORIZED OFFICIAL							b. TITLE						
1 Sun Gelf							Radiation Safety Officer						
NRC FORM 7 (5-2003) PRINTED ON RECYCLED										CLED PAPER			