

ACCEPTANCE REVIEW MEMO (ARM)

Licensee: North Hawaii Community Hospital

License No.: 53-29099-01

Docket No.: 030-34081

Mail Control No.: 471204

Type of Action: Notify

Date of Requested Action: 11-29-06

Reviewer Assigned:

ARM reviewer(s): Torres

Response	Deficiencies Noted During Acceptance Review
	<input type="checkbox"/> Open ended possession limits. Limit possession. Submit inventory. <input type="checkbox"/> Submit copies of most recent leak test results. <input type="checkbox"/> Add - delete IC license condition. Add IC paragraph in cover letter. <input type="checkbox"/> Split license from cover letter. Add SUNSI marking to license. <input type="checkbox"/> Ask the licensee if they have any type-amount of EPAct Material.

Reviewer's Initials: _____

Date: _____

- [Handwritten initials]
- Yes No Unrestricted release Group 2 or >: Transfer memo to FCDB within 10 days.
 - Yes No Decommissioning notification should be completed within 30 days.
 - Yes No Termination request < 90 days from date of expiration
 - Yes No Expedite (medical emergency, no RSO, location of use/storage not on license, RAM in possession not on license, other)
 - Yes No TAR needed to complete action.

Branch Chief's and/or Sr. HP's Initials: _____

Date: _____

SUNSI Screening according to RIS 2005-31

Yes No **Non-Publicly Available, Sensitive** if any item below is checked

General guidance:

- _____ RAM = or > than Category 3 (Table 1, RIS 2005-31), use Unity Rule
- _____ Exact location of RAM (whether = or > than Category 3 or not)
- _____ Design of structure and/or equipment (site specific)
- _____ Information on nearby facilities
- _____ Detailed design drawings and/or performance information
- _____ Emergency planning and/or fire protection systems

Specific guidance for medical, industrial and academic (above Category 3):

- _____ RAM quantities and inventory
- _____ Manufacturer's name and model number of sealed sources & devices
- _____ Site drawings with exact location of RAM, description of facility
- _____ RAM security program information (locks, alarms, etc.)
- _____ Emergency Plan specifics (routes to/from RAM, response to security events)
- _____ Vulnerability/security assessment/accident-safety analysis/risk assess
- _____ Mailing lists related to security response

Branch Chief's and/or Sr. HP's Initials: ATTZ

Date: 12/4/06

Pre-Licensing Screening

Applicant Information:

Control No. 4712004

Name: North Hawaii Community Hospital	Type of Request: Amend Program Code(s):
Location: HI	License No.: 53-29099-01 Docket No.: 030-34081

STEP 1—Radioactive Materials and Quantities Requested:

Instructions for Step 1: Complete Step 1 for all applications. If all your responses in Step 1 are "No" then do not complete Step 2 (Screening Criteria). Sign and date the completed step-sheet and add it as the sensitive and non-publicly available OAR in ADAMS. If a "yes" response is indicated for any item in Step 1, also complete Step 2. If the type of use is subject to a Security Order or the requirements for increased controls, complete Step 3 (Item A or Item B) without delay.	Yes or No
A. The request is from a new applicant.	No
B. NUREG-1556, Volume 20, Section 4.9 indicates a licensing site visit is needed for the requested type of use, e.g., (1) Type A broad scope license, (2) panoramic irradiator containing > 10000 curies, (3) manufacturers or distributors using unsealed radioactive material or significant quantities of sealed material, (4) radioactive waste brokers, (5) radioactive waste incinerators, (6) commercial nuclear laundries, and (7) any other application that in the judgement of the reviewer and cognizant supervisor involves complex technical issues, complex safety questions, or unprecedented issues that warrant a site visit.	No
C. The applicant requested certain radionuclides and quantities that equal or exceed the Risk Significant Quantity (TBq) values in the table, below, that have been "highlighted" by the reviewer	No

Table of Risk Significant Quantities

(Category 2 Quantities, IAEA Safety Guide No. RS-G-1.9, Categorization of Radioactive Sources, August 2005)

Radionuclide	Risk Significant Quantity (TBq ¹)	Risk Significant Quantity (Ci ¹)	Radionuclide	Risk Significant Quantity (TBq ¹)	Risk Significant Quantity (Ci ¹)
Am-241	0.6	16	Pm-147	400	11,000
Am-241/Be	0.6	16	Pu-238	0.6	16
Cf-252	0.2	5.4	Pu-239/Be	0.6	16
Cm-244	0.5	14	Ra-226 ²	0.4	11
Co-60	0.3	8.1	Se-75	2	54
Cs-137	1	27	Sr-90 (Y-90)	10	270
Gd-153	10	270	Tm-170	200	5,400
Ir-192	0.8	22	Yb-169	3	81

¹ The primary values are TBq. The curie (Ci) values are for informational purposes only.
² The Atomic Energy Act, as amended by the Energy Policy Act of 2005, authorizes NRC to regulate Ra-226 and NRC is in the process of amending its regulations for discrete sources of Ra-226.

Calculations of the Total Activity or the Unity Rule are attached to document whether or not the screening criteria in Step 2 were also completed to evaluate the application. NOTE—If an amendment of an existing license is being requested, the calculations will include the previously authorized quantities for the radionuclide(s).	Yes, No, or Not Applicable (NA)
Total Activity—multiple activities are requested for a single radionuclide and the sum of the activities equals or exceeds the quantity of concern for the radionuclide	—
Unity Rule—multiple radionuclides are requested and the sum of the ratios equals or exceeds unity, e.g., [(total activity for radionuclide A) ÷ (risk significant quantity for radionuclide A)] + [(total activity for radionuclide B) ÷ (risk significant quantity for radionuclide B)] ≥ 1.0.	—

Signature and Date for Step 1:

12/14/06

License Reviewer and Date

November 29, 2006

U.S. Nuclear Regulatory Commission, Region IV
611 Ryan Plaza Drive, Suite 400
Arlington, TX 76011-8064

RECEIVED

DEC 11 2006

DNMS

Subject: Notification
NRC License No. 53-29099-01
Docket No. 030-34081

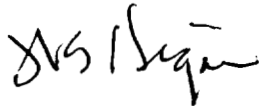
Dear License Reviewer:

ATC
Lee Miyasato, M.D. is no longer working at our facility. Please remove his name from our license.

We have approved A. Stan Maynard, M.D. as an authorized user for byproduct material listed in 10 CFR 35.100, 35.200, and 35.300. Dr. Maynard is currently authorized for these uses under South Carolina Department of Health and Environmental Control License No. 023 issued to Anderson Area Medical Center. A copy of this license is attached.

Please contact our Radiation Safety Consultant, Ronald Frick, at 808-373-7009 if you require additional information.

Sincerely,



Wayne Higaki
Assistant Vice President

Enclosures

Page 1 of 2 Pages

SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL
Radioactive Material License
Supplementary Sheet

License No. 023
 Amendment No. 57

Anderson Area Medical Center
 800 North First Street
 Anderson, SC 29621

In accordance with letter dated August 22, 2005, signed by Kathy Hood, S.C. Radioactive Material License No. 023 is hereby **AMENDED**:

TO CHANGE:

Condition 12.

12. Authorized Users:

- A. David H. Holt, M.D. for medical uses identified in RHA 4.9.1, RHA 4.10.1, RHA 4.11.1 and RHA 2.4.3, Department Regulation 61-63.
- B. Thomas U. Tuten, M.D. for medical uses identified in RHA 4.9.1, RHA 4.10.1, RHA 4.11.1 and RHA 2.4.3, Department Regulation 61-63.
- C. Bruce M. Burns, M.D. for medical uses identified in RHA 4.9.1, RHA 4.10.1, RHA 4.11.1 and RHA 2.4.3, Department Regulation 61-63.
- D. W. Victor Tomlinson, M.D. for medical uses identified in RHA 4.11.1 and RHA 4.13.1, Department Regulation 61-63; and the Guidant Galileo Intravascular Radiotherapy System for the treatment of coronary arteries for in-stent restenosis lesions.
- E. Ravinder Malik, M.D. for medical uses identified in RHA 4.11.1 and RHA 4.13.1, Department Regulation 61-63; and the Guidant Galileo Intravascular Radiotherapy System for the treatment of coronary arteries for in-stent restenosis lesions.
- F. Joseph Yon, M.D. for medical uses identified in RHA 4.9.1, RHA 4.10.1, RHA 4.11.1 and RHA 2.4.3, Department Regulation 61-63.
- G. Paige S. Huber, M.D. for medical uses identified in RHA 4.9.1, RHA 4.10.1, RHA 4.11.1 and RHA 2.4.3, Department Regulation 61-63.
- H. Keremy MacDonald, M.D. for medical uses identified in RHA 4.13.1, Department Regulation 61-63; and the Guidant Galileo Intravascular Radiotherapy System for the treatment of coronary arteries for in-stent restenosis lesions.
- I. Rhonda Duncan, M.D. for medical uses identified in RHA 4.10.1, Department Regulation 61-63.
- J. John R. Wendt, M.D. for cardiology uses pursuant to RHA 4.10.1, Department Regulation 61-63.

DHEC 812 (11/81)

08/19/08 13:43 FAX 864 281 1415

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SOUTH CAROLINA DEPARTMENT OF HEALTH AND ENVIRONMENTAL CONTROL
Radioactive Material License
Supplementary Sheet

License No. 023
 Amendment No. 17

-
- K. Brent C. Stoll, M.D. for medical uses identified in RHA 4.10.1, Department Regulation 61-63.
 - L. Veena M. Chandler, M.D. for medical uses identified in RHA 4.10.1, Department Regulation 61-63.
 - M. Marion Timothy Wells, M.D. for medical uses identified in RHA 4.10.1, Department Regulation 61-63.
 - N. Brent McLaurin, M.D. for approved cardiology uses only pursuant to RHA 4.10.1, Department Regulation 61-63.
 - O. Paul R. Jones, M.D. for cardiology uses only pursuant to RHA 4.10.1, Department Regulation 61-63.
 - P. A. Stan Maynard, M.D. for medical uses identified in RHA 4.9.1, RHA 4.10.1 and RHA 4.11.1, Department Regulation 61-63.
 - Q. Monica Grier, M.D. for medical uses identified in RHA 4.9.1, RHA 4.10.1 and RHA 4.11.1, Department Regulation 61-63.
 - R. Satish Kumar Surabhi, M.D. for cardiology uses only pursuant to RHA 4.10.1, Department Regulation 61-63.

Date of Issuance: September 15, 2005

DHEC 812 (11/81)

For the South Carolina Department
of Health and Environmental Control

BY: 

T. Pearce O'Kelley, Chief
Bureau of Radiological Health

ARTHUR S MAYNARD III

LICENSE NUMBER
MD -

EXPIRATION DATE
01/31/2008

STATE OF HAWAII DEPARTMENT OF COMMERCE AND CONSUMER AFFAIRS
PHYSICIAN

ARTHUR S MAYNARD III

SIGNATURE
OF LICENSEE

Arthur S. Maynard III

12-14-06

DATE

This is to acknowledge the receipt of your letter/application dated 11-29-06, and to inform you that the initial processing, which includes an administrative review, has been performed.

There were no administrative omissions. Your application will be 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:

The action you requested is normally processed within days.

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.

Your action has been assigned **Mail Control Number** 471204.
When calling to inquire about this action, please refer to this mail control number.
You may call me at 817-860-8103.

Sincerely,

Colleen Murnahan

Licensing Assistant

BETWEEN:

License Fee Management Branch, ARM
and
Regional Licensing Sections

(FOR LFMS USE)
INFORMATION FROM LTS

Program Code: 02120
Status Code: 0
Fee Category: 7C
Exp. Date: 20110531
Fee Comments:
Decom Fin Assur Req'd: N

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED

Applicant/Licensee: NORTH HAWAII COMMUNITY HOSPITAL
Received Date: 20061211
Docket No.: 3034081
Control No.: 471204
License No.: 53-29099-01
Action Type: Amendment

2. FEE ATTACHED

Amount: _____
Check No.: _____

3. COMMENTS

Signed *Colleen Munnahan*
Date *12-13-06*

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 _____

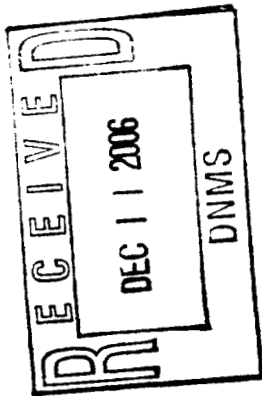
3. OTHER _____

Signed _____
Date _____



NORTH HAWAII
COMMUNITY HOSPITAL

P.O. BOX 2,000
KAMUELA, HAWAII 96741



ENTRANCE
\$ 00.39
MULTI-MEDIA PURCHASE

**US Nuclear Regulatory Commission Reg.IV
611 Ryan Plaza Drive, Suite 400
Arlington, TX 76011-8064**

76011+4003-00 C001

