### ACCEPTANCE REVIEW MEMO (ARM)

Licensee:	Pacific Radiopharmacy License No.: 53-16991-01MD			
Docket No.:	030-12031	Mail Control No.: 471246		
Type of Actio	n: Amend Date of Requested Action: 01-29-07			
Reviewer Assigned:	Roberto	ARM reviewer(s): Torres		
Response	Deficiencies Noted During Acceptance Review			
	<ol> <li>Open ended possession limits. Limit possession. Submit inventory.</li> <li>Submit copies of most recent leak test results.</li> <li>Add - delete IC license condition. Add IC paragraph in cover letter.</li> <li>Split license from cover letter. Add SUNSI marking to license.</li> <li>Ask the licensee if they have any type-amount of EPAct Material.</li> </ol>			

1. Need copy of active license of Mr. Caplan to practice pharmacy.

### **Reviewer's Initials:**

Date:

□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
TYes INO Non-Publicly Available, Sensitive if <u>any</u> 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: Date: Date:

### **Pre-Licensing Screening**

N

N

Applicant Information: Control No. 471246			
Name: Pacific Radiopharmacy	Type of Request: Amend Program Code(s):		
Location: HI	License No.: 53-16991-01MD	Docket No.: 030-12031	

### 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 Yes or (Screening Criteria). Sign and date the completed step-sheet and add it as the sensitive and non-publicly available OAR in ADAMS. If a No "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.

Α.	The request is from a new applicant.
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В.	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.	2
C.	The applicant requested certain radionuclides and quantities that equal or exceed the Risk	.1

The applicant requested certain radionuclides and guantities that equal or exceed the Risk Significant Quantity (TBq) values in the table, below, that have been "highlighted" by the reviewer

### Table of Risk Significant Quantities

(Calegory 2 Quantities, IAEA Salety Guide No. KS-G-1.9			9, Categorization of Radioactive Sources, August 2005)		
Radionuclide	Risk Significant Quantity (TBq <sup>1</sup> )	Risk Significant Quantity (Ci <sup>1</sup> )	Radionuclide	Risk Significant Quantity (TBq <sup>1</sup> )	Risk Significant Quantity (Ci¹)
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 <sup>2</sup>	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
lr-192	0.8	22	Yb-169	3	81

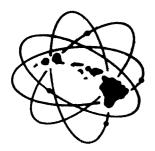
(Category 2 Quantities, IAEA Safety Guide No. RS-G-1.9, Categorization of Radioactive Sources, August 2005)

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 Rulemultiple 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: MIC 2/8/07

License Reviewer and Date



## PACIFIC RADIOPHARMACY, LTD.

347 NORTH KUAKINI STREET \* HONOLULU, HAWAII 96817 TELEPHONE (808) 737-9580 EVED

FEB - 2 2007 DNMS

January 29, 2007

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

Subject: License Amendment NRC License No. 53-16991-01MD Docket No. 030-12031

Dear License Reviewer:

We wish to amend our byproduct materials license to add Steven Caplan, R.Ph. as an Authorized Nuclear Pharmacist. We have enclosed NRC Form 313A(ANP), which details his training and experience.

If you require any additional information please contact our Radiation Safety Officer, Ronald Frick at 808-373-7009.

Sincerely,

flent

# Na 471246

NRC FORM 313 (10-2005) 10 CFR 30, 32, 33, 34, 35, 36, 39, and 40 APPLICATION FOR MATERIAL LICENSE	APPROVED BY OMB: NO. 3150-0120 EXPIRES: 10/31/2008 Estimated burden per response to comply with this mandatory collection request: 4.4 hours. Submittal of the application is necessary to determine that the applicant is gualified and that adequate procedures exist to protect the public health and safety Send comments regarding burden estimate to the Records and FOIA/Privacy Services Branch (T-5 F53), U.S. Nuclear Regulatory Commission, Washington, 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, (3150-0120), Office of Managemeni and Budget, Washington, DC 20503. If a means used to impose an information collection does not display a currently valid OMB control number, the NRC may no conduct or sponsor, and a person is not required to respond to, the information
INSTRUCTIONS: SEE THE APPROPRIATE LICENSE APPLICATION GU	JIDE FOR DETAILED INSTRUCTIONS FOR COMPLETING APPLICATION.
APPLICATION FOR DISTRIBUTION OF EXEMPT PRODUCTS FILE APPLICATIONS WITH:	IF YOU ARE LOCATED IN:
DIVISION OF INDUSTRIAL AND MEDICAL NUCLEAR SAFETY OFFICE OF NUCLEAR MATERIALS SAFETY AND SAFEGUARDS U.S. NUCLEAR REGULATORY COMMISSION WASHINGTON, DC 20555-0001	ILLINOIS, INDIANA, IOWA, MICHIGAN, MINNESOTA, MISSOURI, OHIO, OR WISCONSIN, SEND APPLICATIONS TO:
ALL OTHER PERSONS FILE APPLICATIONS AS FOLLOWS:	MATERIALS LICENSING BRANCH U.S. NUCLEAR REGULATORY COMMISSION, REGION III 2443 WARRENVILLE ROAD, SUITE 210 LISLE, IL 60532-4352
IF YOU ARE LOCATED IN:	
ALABAMA, CONNECTICUT, DELAWARE, DISTRICT OF COLUMBIA, FLORIDA, GEORGIA, KENTUCKY, MAINE, MARYLAND, MASSACHUSETTS, MISSISSIPPI, NEW HAMPSHIRE, NEW JERSEY, NEW YORK, NORTH CAROLINA, PENNSYLVANIA, PUERTO RICO, RHODE ISLAND, SOUTH CAROLINA, TENNESSEE, VERMONT, VIRGINIA, VIRGIN ISLANDS, OR WEST VIRGINIA, SEND APPLICATIONS TO:	ALASKA, ARIZONA, ARKANSAS, CALIFORNIA, COLORADO, HAWAII, IDAHO, KANSAS, V LOUISIANA, MONTANA, NEBRASKA, NEVADA, NEW MEXICO, NORTH DAKOTA, OKLAHOMA, OREGON, PACIFIC TRUST TERRITORIES, SOUTH DAKOTA, TEXAS, UTAH, WASHINGTON, OR WYOMING, SEND APPLICATIONS TO:
LICENSING ASSISTANCE TEAM DIVISION OF NUCLEAR MATERIALS SAFETY U.S. NUCLEAR REGULATORY COMMISSION, REGION I 475 ALLENDALE ROAD KING OF PRUSSIA, PA 19406-1415	NUCLEAR MATERIALS LICENSING BRANCH U.S. NUCLEAR REGULATORY COMMISSION, REGION IV 611 RYAN PLAZA DRIVE, SUITE 400 ARLINGTON, TX 76011-4005
PERSONS LOCATED IN AGREEMENT STATES SEND APPLICATIONS TO THE U.S. NUCLEA MATERIAL IN STATES SUBJECT TO U.S.NUCLEAR REGULATORY COMMISSION JURISDIC	
1. THIS IS AN APPLICATION FOR (Check appropriate item) A. NEW LICENSE B. AMENDMENT TO LICENSE NUMBER C. RENEWAL OF LICENSE NUMBER	<ol> <li>NAME AND MAILING ADDRESS OF APPLICANT (Include ZIP code)</li> <li>Pacific Radiopharmacy, Ltd.</li> <li>347 North Kuakini Street</li> <li>Honolulu, HI 96817</li> </ol>
3. ADDRESS WHERE LICENSED MATERIAL WILL BE USED OR POSSESSED Same as 2.	4. NAME OF PERSON TO BE CONTACTED ABOUT THIS APPLICATION Ronald Frick, M.S., CHP, DABR
	TELEPHONE NUMBER (808) 373-7009
SUBMIT ITEMS 5 THROUGH 11 ON 8-1/2 X 11" PAPER. THE TYPE AND SCOPE OF INFORM	AT ION TO BE PROVIDED IS DESCRIBED IN THE LICENSE APPLICATION GUIDE.
<ol> <li>RADIOACTIVE MATERIAL         <ul> <li>Element and mass number;</li> <li>chemical and/or physical form; and c. maiximum amount             which will be possessed at any one time.</li> </ul> </li> </ol>	6. PURPOSE(S) FOR WHICH LICENSED MATERIAL WILL BE USED.
7. INDIVIDUAL(S) RESPONSIBLE FOR RADIATION SAFETY PROGRAM AND THEIR TRAINING EXPERIENCE.	8. TRAINING FOR INDIVIDUALS WORKING IN OR FREQUENTING RESTRICTED AREAS.
9. FACILITIES AND EQUIPMENT.	10. RADIATION SAFETY PROGRAM.
11. WASTE MANAGEMENT.	12. LICENSE FEES (See 10 CFR 170 and Section 170.31) FEE CATEGORY 3C AMOUNT S 0.00
UPON THE APPLICANT.	AT ALL STATEMENTS AND REPRESENTATIONS MADE IN THIS APPLICATION ARE BINDING THE APPLICANT, NAMED IN ITEM 2, CERTIFY THAT THIS APPLICATION IS PREPARED IN , 35 , 36, 39, AND 40, AND THAT ALL INFORMATION CONTANED HEREIN IS TRUE AND
	RIMINAL OFFENSE TO MAKE A WILLFULLY FALSE STATEMENT OR REPRESENTATION TO
CERTIFYING OFFICER TYPED/PRINTED NAME AND TITLE Gregg Oishi, President	SIGNATURE THE SIGNATURE THE SIGNATURE THE SIGNATURE
s	
APPROVED BY DATE	<b>h</b> 471246

FORM 313A (ANP) <sup>16)</sup>	U.S. NUCLE	AR REGULATORY COMMISSION		
AUTHORIZED NUCLEAR PH EXPERIENCE AND PREC [10 CFR	CEPTOR AT		APPROVED B EXPIRES: 10/3	( OMB: NO. 3150-0 1/2008
e of Proposed Authorized Nuclear Pharmacis	st	State or Territory Where Licen	sed	
ven Caplan, R.Ph.		Hawaii		
		G AND EXPERIENCE two methods below)		
Training and Experience, including board the date of application or the individual n the required training and experience was education and experience related to the	nust have obtai s completed. P	ned related continuing educa rovide dates, duration, and d	ition and exper	ience since
1. Board Certification				
a. Provide a copy of the board certific	ation.			
b. Skip to and complete Part II Precep	otor Attestation.			
2. Structured Educational Program	for Proposed	Authorized Nuclear Pharma	acist	
a. Classroom and Laboratory Training			<u></u>	
Description of Training		ocation of Training	Clock Hours	Dates of Training*
Radiation physics and instrumentation	Certificate Prog	sity - Nuclear Pharmacy gram		4/15/06 - 9/21/06
Radiation protection	Purdue Univers Certificate Prog	sity - Nuclear Pharmacy gram		4/15/06 - 9/21/06
Mathematics pertaining to the use and measurement of radioactivity	Purdue Univers Certificate Prog	ity - Nuclear Pharmacy Iram		4/15/06 - 9/21/06
Chemistry of byproduct material for medical use	Purdue Univers Certificate Prog	sity - Nuclear Pharmacy gram		4/15/06 - 9/21/06
Radiation biology	Purdue Univers Certificate Prog	sity - Nuclear Pharmacy gramy		4/15/06 - 9/21/06
	Total Hour	r <b>s of Training:</b> >200 ho	ours	

### AUTHORIZED NUCLEAR PHARMACIST TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)

### 2. Structured Educational Program for Proposed Authorized Nuclear Pharmacist (continued)

### b. Supervised Practical Experience in a Nuclear Pharmacy.

Location of Experience/License or Permit Number of Facility	Clock Hours	Dates of Experience
Pacific Radiopharmacy, Ltd. NRC License #53-16991-01MD		March 2006 - January 2007
Pacific Radiopharmacy, Ltd. NRC License #53-16991-01MD		March 2006 - January 2007
Pacific Radiopharmacy, Ltd. NRC License #53-16991-01MD		March 2006 - January 2007
Pacific Radiopharmacy, Ltd. NRC License #53-16991-01MD		March 2006 - January 2007
Pacific Radiopharmacy, Ltd. NRC License #53-16991-01MD		March 2006 - January 2007
Total Hours of Experience: >50	)0 hours	
Ph.D.		
	Permit Number of Facility         Pacific Radiopharmacy, Ltd.         NRC License #53-16991-01MD         Pacific Radiopharmacy, Ltd.         NRC License #53-16991-01MD	Permit Number of Facility       Hours         Pacific Radiopharmacy, Ltd. NRC License #53-16991-01MD

RC FORM 313A (ANP)	U.S. NUCLEAR REGULATORY COMMISSION
0-2006)	AUTHORIZED NUCLEAR PHARMACIST TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)
	PART II – PRECEPTOR ATTESTATION
individual as	st be completed by the individual's preceptor. The preceptor does not have to be the supervising long as the preceptor provides, directs, or verifies training and experience required. If more than r is necessary to document experience, obtain a separate preceptor statement from each.
rst Section leck one of the fo	llowing:
<b>Board Certif</b>	ication
I attest th	at has satisfactorily completed the requirements in
	Name of Proposed Authorized Nuclear Plarmacist
	5.55(a)(1), (a)(2), and (a)(3) and has achieved a level of competency sufficient to function ently as an authorized nuclear pharmacist.
	OR
Structured [	ducational Program
✓ I attest th	
	Name of Proposed Authorized Nuclear Pharmacist
experienc	hal program consisting of both 200 hours of classroom and laboratory training, and practical the in nuclear pharmacy, as required by 10 CFR 35.55(b)(1) and has achieved a level of they sufficient to function independently as an authorized nuclear pharmacist.
ond Section	ring for preceptor attestation and signature:
I am an Auth	orized Nuclear Pharmacist for Pacific Radiopharmacy, Ltd.
53-16991-01M	
License//	Permit Number
e of Preceptor	Signature D/ Telephone Number Date
nt T. Phan, Ph.D.	henrit Mar 808-547-9580 Jan 29,2007
2/12/07	Reviewer's assessment
Stev	e Caplan meets the training and experience required .0 CFR 35.55(b)(1) and (b)(2) and can be named
by	ocfr 35.55 (b) (1) and (b) (2) and can be named
as 1	INP on liceuse 53-16991-01M.D.
	Roberto J. Torres

September 28, 2006 Phone 28, 2006 Per L. P. L.
as evidence of completion of the NUCLEAR PHARMACY CERTIFICATE PROGRAM September 28, 2006
Steven Caplan
This certificate is awarded to
SCHOOL OF PHARMACY AND PHARMACEUTICAL SCIENCES department of industrial and physical pharmacy division of nuclear pharmacy
PURDUE UNIVERSITY WEST LA FAYETTE, INDIANA

		EXPIRATION D	ате 1
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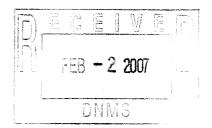
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Gamma Corporation

P.O. Box 240370, Honolulu, HI 96824



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Signed Date	3. OTHER	2. Correct Fee Paid. Application may t Amendment Renewal License	1. Fee Category and Amount:	B. LICENSE FEE MANAGEMENT BRANCH (Check when milestone	Signed Date	3. COMMENTS	2. FEE ATTACHED Amount: Check No.:	<ol> <li>APPLICATION ATTACHED         Applicant/Licensee: PACIFIC RADIOPH Received Date: 20070202 Docket No: 3012031 Control No.: 471246 License No.: 53-16991-01MD Action Type: Amendment     </li> </ol>	A. REGION	LICENSE FEE TRANSMITTAL	BETWEEN: License Fee Management Branch, ARM and Regional Licensing Sections
		be processed for:		when milestone O3 is entered $/\_/$ )	ollees Murashan			RADIOPHARMACY LTD. -01MD			(FOR LFMS USE) INFORMATION FROM LTS  Program Code: 02500 Status Code: 0 Fee Category: 3C Exp. Date: 20150630 Fee Comments: Decom Fin Assur Reqd: N