



Radiation Safety Office

K-3

March 19, 2007

Michelle Simmons
U.S. Nuclear Regulatory Commission
Region 1
475 Allendale Road
King of Prussia, PA 19406

re: License No. 37-28359-01
Crocket No. 03031046


Dear Ms. Simmons:

Attached please find the following documents in support of the request to terminate the above referenced license:

- Federal Express tracking information showing delivery of spent $^{99m}\text{Tc}/^{99}\text{Mo}$ generators (2)
- Letter and waste manifest showing receipt of radioactive waste
- Survey of brachytherapy source storage area

If you have any questions or need any additional information, please feel free to contact me.

Sincerely,


Kent Lambert, CHP
Director, Radiation Safety

140242
NMSS/RGN1 MATERIALS-002

*Bionomics,
Inc.*

P.O. Box 817 — Kingston, TN 37763 — (865) 220-8501

March 16, 2007

Ms. Anne Marie DeCristoforo
Graduate Hospital
Tuttleman Center, Lower Level
1840 South Street
Philadelphia, PA 19146

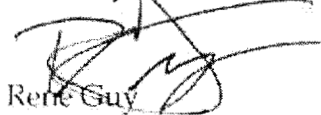
Dear Ms. Anne Marie DeCristoforo,

As required by 10 CFR Part 20 (Appendix G), this letter is notification that Bionomics, Inc. has received the shipment recently picked up at your facility on **March 15, 2007**. Attached you will find a copy of your NRC Form 540, the only change from the original is in Item No. 9 "*signature*" which identifies that Bionomics, Inc. is acknowledging receipt of waste from your facility.

Please keep this with your original, as well as future disposal certifications.

If you have any questions please feel free to contact me at (865) 220-8501.

Sincerely,



Rene Guy
Administrative Manager

Cc: File BIO-08-07

NRC FORM 640 (6-2004) U.S. NUCLEAR REGULATORY COMMISSION UNIFORM LOW-LEVEL RADIOACTIVE WASTE MANIFEST SHIPPING PAPER		5. SHIPPER - NAME AND FACILITY <i>Bionomics For</i> GRADUATE HOSPITAL 1840 SOUTH ST. PHILADELPHIA, PA 19146 <small>USER PERMIT NUMBER</small> <small>SHIPMENT NUMBER</small>		<small>SHIPPER ID NUMBER</small> <i>BID-08-07</i> <input checked="" type="checkbox"/> <small>COLLECTOR</small> <input type="checkbox"/> <small>PROCESSOR</small> <input type="checkbox"/> <small>GENERATOR TYPE (Specify)</small>		7. NRC FORM 640 AND 640A <small>PAGE 1 OF</small> <small>NRC FORM 541 AND 541A</small> <i>1</i> <small>PAGE(S)</small> <small>NRC FORM 542 AND 542A</small> <i>8</i> <small>PAGE(S)</small> <small>ADDITIONAL INFORMATION</small>		8. MANIFEST NUMBER <small>(Use this number on all continuation pages)</small> <i>31507B</i>	
1. EMERGENCY TELEPHONE NUMBER (include Area Code) <i>(865) 220-8520</i> <small>ORGANIZATION</small> <i>BIONOMICS, INC</i>		<small>CONTACT</small> <i>ANN MARIE DE CASTRO</i> 6. CARRIER - Name and Address <i>Bionomics, Inc</i> <i>1550 BEAR CREEK RD</i> <i>OAK RIDGE TN 37830</i>		<small>TELEPHONE NUMBER (include Area Code)</small> <i>(215) 873-7350</i> <small>EPA ID NUMBER</small> <i>TND982116193</i> <small>SHIPPING DATE</small> <i>3/15/07</i>		<small>8. CONSIGNEE - Name and Facility Address</small> <i>BIONOMICS, INC</i> <i>1550 BEAR CREEK RD</i> <i>OAK RIDGE TN 37830</i> <small>SIGNATURE - Authorized consignee acknowledging waste receipt</small> <i>Paul Nupper</i> <small>DATE</small> <i>3/16/07</i>		<small>CONTACT</small> <i>JOHN MCCORMICK</i> <small>TELEPHONE NUMBER (include Area Code)</small> <i>(865) 220-8520</i> <small>SIGNATURE - Authorized carrier acknowledging waste receipt</small> <i>[Signature]</i> <small>DATE</small> <i>3/15/07</i>	
2. IS THIS AN "EXCLUSIVE USE" SHIPMENT? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		3. TOTAL NUMBER OF PACKAGES IDENTIFIED ON THIS MANIFEST <i>1</i>		4. DOES EPA REGULATED WASTE REQUIRING A MANIFEST ACCOMPANY THIS SHIPMENT? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <small>If "Yes," provide Manifest Number</small>		<small>EPA MANIFEST NUMBER</small> <i>N/A</i>		10. CERTIFICATION <small>This is to certify that the herein-named materials are properly classified, described, packaged, marked, and labeled and are in proper condition for transportation according to the applicable regulations of the Department of Transportation. This also certifies that the materials are classified, packaged, marked, and labeled and are in proper condition for transportation and disposal as described in accordance with the applicable requirements of 10 CFR Parts 20 and 61, or equivalent state regulations.</small>	
<small>11. U.S. DEPARTMENT OF TRANSPORTATION DESCRIPTION (including proper shipping name, hazard class, UN ID number, and any additional information)</small> <i>RADIOACTIVE MATERIAL, TYPE A PACKAGES, 7, UN2915</i>		<small>12. DOT LABEL RADIOACTIVE</small> <i>YELLOW-A</i>		<small>13. TRANSPORT INDEX</small> <i>5.4</i>		<small>14. PHYSICAL AND CHEMICAL FORM</small> <i>SOLID/OXIDES Cs137</i>		<small>15. INDIVIDUAL RADIONUCLIDES</small> <i>CS137</i>	
<small>16. TOTAL PACKAGE ACTIVITY IN SI UNITS</small> <i>14915,47</i>		<small>17. LEAKAGE CLASS</small> <i>N/A</i>		<small>18. TOTAL WEIGHT OR VOLUME (Use appropriate units)</small> <i>0.1148m³</i>		<small>19. IDENTIFICATION NUMBER OF PACKAGE</small> <i>GH-1</i>			
<small>FOR CONSIGNEE USE ONLY</small>									

Track Shipments
Detailed Results

[? Quick Help](#)

Tracking number	849077358144	Reference	2004233 EXCEPTIONAL PARK
Signed for by	J.TORRES	Delivered to	Shipping/Receiving
Ship date	Mar 16, 2007	Service type	FedEx 2Day Service
Delivery date	Mar 19, 2007 9:57 AM	Master tracking number	<u>854147372206</u>
		Pieces	2 of 2





Status Delivered

Date/Time	Activity	Location	Details
Mar 19, 2007	9:57 AM Delivered		
	7:50 AM On FedEx vehicle for delivery	ELMSFORD, NY	
	7:40 AM At local FedEx facility	ELMSFORD, NY	
Mar 17, 2007	7:34 PM Arrived at FedEx location	NEWARK, NJ	
Mar 16, 2007	9:05 PM Left origin	PHILADELPHIA, PA	
	12:29 PM Picked up	PHILADELPHIA, PA	

[Signature proof](#) | [E-mail results](#) | [Track more shipments](#)

Subscribe to tracking updates (optional)

Your Name: Your E-mail Address:

E-mail address	Language	Exception updates	Delivery updates
<input type="text"/>	English 	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	English 	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	English 	<input type="checkbox"/>	<input type="checkbox"/>
<input type="text"/>	English 	<input type="checkbox"/>	<input type="checkbox"/>

Select format: HTML Text Wireless

**Add
personal
message:**

Not
available
for Wireless
or
non-English
characters.

By selecting this check box and the Submit button, I agree to these Terms and Conditions

Submit

Graduate Hospital Closeout Survey Report

Building & Room No.: Sealed Source Storage in Linac Room	Department: Radiation Oncology
Contact Person: Pat Glennon, Radiation Safety Officer	Phone Number and Address: 215-893-7066
Surveyor: Drexel Univ Radiation Safety Staff	Survey Date: March 15, 2007

Completed	Not Completed	Not Applicable	Closeout Checklist
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Radioactive material removed. Cabinets, freezers, refrigerators, drawers, etc. checked.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Thorough contamination survey performed for fixed and removable contamination throughout facility, including workbenches, floors, remaining equipment, glassware, pigs, refrigerators, freezers, etc.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Contaminated items decontaminated or disposed as radioactive waste
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Radioactive waste removed.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Radiation labels removed/obliterated from radioactive material containers, pigs, etc.
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Radiation warning signs removed from doors, hoods, work areas, equipment, etc.
<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Radioactive sources removed from equipment such as gamma and /or beta counters
<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Department notified

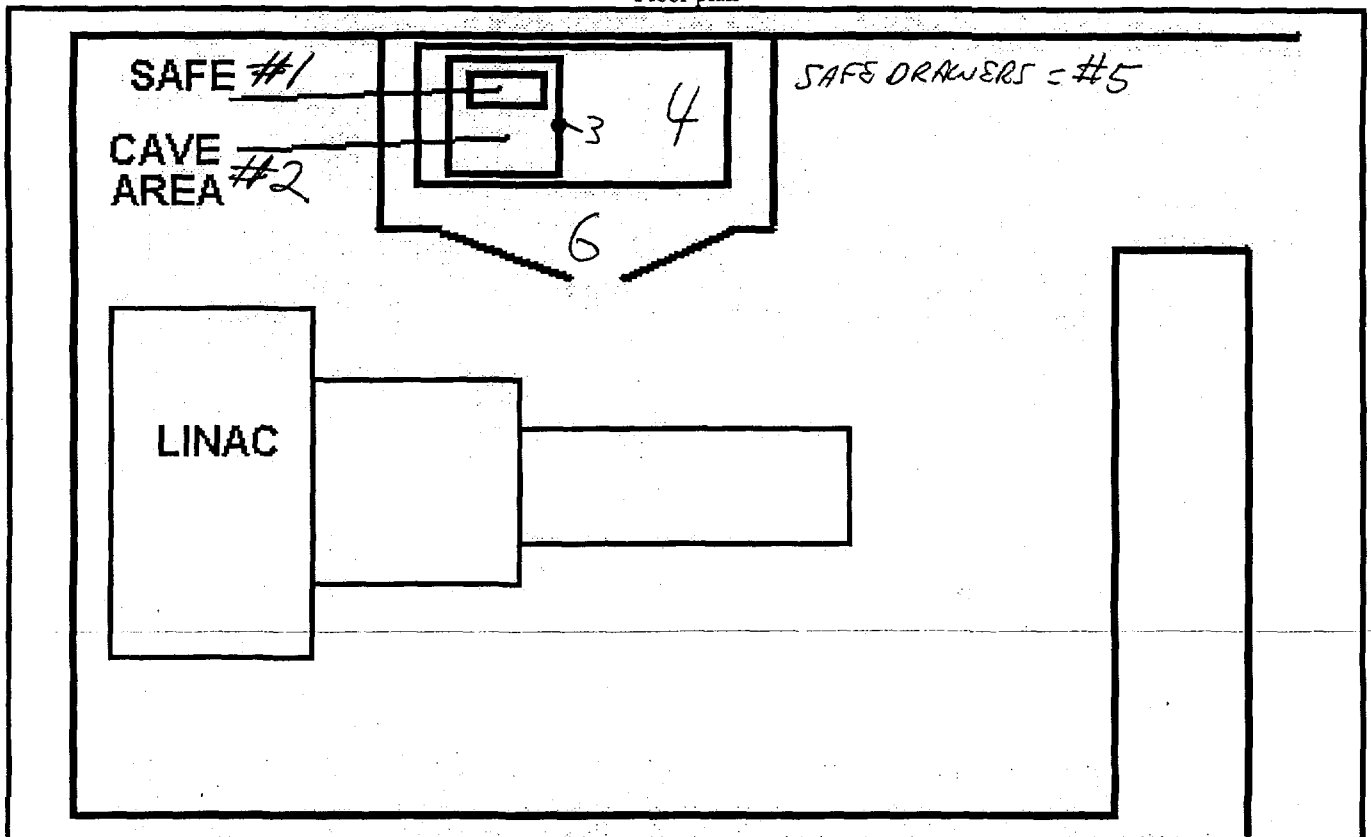
Closeout Contamination Survey Results Summary

- No contamination above 200 dpm/100 cm²
- Contamination above 200 dpm/100 cm²

- No radiation levels above background found
- Radiation levels above background found

Contamination Survey Results

Floor plan



Survey meter used: Mfg & model: Victoreen 190_ Serial No.: 850 Date of Calibration: 11/28/2006

Survey meter locations	Survey meter reading (mR/hr)
Background	0.016
Thorough readings taken throughout the laboratory (including floors, shelves, cabinets, etc.)	<Background

Survey notes/comments:

Drexel University Radiation Safety Office
Wipe Test Results

Date Counted 3/15/2007
 Counter Used Gamma
 Efficiency % 50
 Efficiency 0.5
 LLD 68
 Count Time (min) 2

Graduate Hospital
 Radiation Oncology
 Sealed Source Storage Area

Wipe Number	CPM	net cpm (total cpm for background)	dpm	total area wiped (x100cm ²)	dpm/100cm ²
Background	214.0	NA	NA	NA	NA
1	204.0	0	0	1	0
2	180.0	0	0	1	0
3	204.0	0	0	1	0
4	209.0	0	0	1	0
5	202.0	0	0	1	0
6	200.0	0	0	1	0