

**COLLEEN CAROL CASEY  
MATERIALS LICENSING BRANCH  
UNITED STATES NUCLEAR REGULATORY COMMISSION**

REGION III  
2443 WARRENVILLE ROAD STE 210  
LISLE, ILLINOIS 60532-4352  
OFFICE: (630)-829-9841 FAX: (630) 515-1078

(+9/6/07 - C31  
P. Pelke)

**CONVERSATION RECORD**

**ACTUALLY FAXED? YES.**

TIME: 3:00 PM VM msg  
8/24/07 5:30 PM CT.

DATE

**August 24, 2007**

NAME OF PERSON(S) CONTACTED

ORGANIZATION

TELEPHONE NO.

Ralph P. Lieto, MSE, RSO for Saint Joseph Mercy Health System 734-712-8746

SUBJECT

License No.: 21-00943-03

Control No.: 316316

SUMMARY

We have reviewed your letter dated June 8, 2007, requesting an amendment to your byproduct materials license and find that we need additional information as follows:

Your letter requests the approval of Samir Narayan, M.D. as an authorized user for materials in 10 CFR 35.300 (excluding iodine-131), 35.400, 35.600 (excluding GSR, "gamma knife") and 35.1000.

I cannot approve Dr. Narayan at this time as the information in your letter dated June 8, 2007 is insufficient to support your request. Specific deficiencies are explained and additional information is requested as follows:

1. The list provided by UC-Davis dated June 1, 2007, attached to your letter dated June 8, 2007, only states "names, expiration dates, category and training exempt"- no specific information, no degrees, no dates of authorization, no modalities of use authorized, etc. are given to corroborate the information in your letter dated June 8, 2007.

Please submit a currently signed and dated letter from the Chairperson of the RSC for UC-Davis stating Dr. Narayan's name and degree, his dates of authorization, the specific modalities he was authorized for (as correlated to sections of 10 CFR Part 35) and, as appropriate, any other information that will enable us to evaluate his qualifications as a proposed authorized user for the types of use you have requested.

2. Please be reminded that we cannot accept Dr. Narayan's specialty board certification, as of October 24, 2005.
3. It appears that you may be trying to qualify Dr. Narayan under 10 CFR 35.57 or 35.13 and 35.14. If so, please state which regulation you are trying to qualify him under.
4. It appears that you only want Dr. Narayan authorized for materials in 10 CFR 35.396, as opposed to "10 CFR 35.300 (excluding iodine-131)." If so, please confirm and provide sufficient training and experience information, in accordance with 10 CFR 35.396 (or another section of 35.300) to support your request.

Please note, your letter dated June 8, 2007, did not assert that Dr. Narayan was approved for any 10 CFR 35.300 authorization at UC-Davis.

5. Please confirm that Dr. Narayan should only be authorized for the use of the HDR device on your license for "materials in 10 CFR 35.600," which excludes both GSR (gamma knife) and teletherapy, which are not authorized by this license. If it is appropriate to support Dr. Narayan's authorization request, please provide sufficient training and experience information to demonstrate compliance with 10 CFR 35.690.
6. As no materials under 10 CFR 35.1000 are authorized by this license, Dr. Narayan cannot be approved as an authorized user for materials under 35.1000 on this license, so we will disregard this request.

We will be unable to continue processing your request until we receive this information.

Please also be reminded of the provisions in 10 CFR 30.9(a), "Completeness and accuracy of information,"..."(a) Information provided to the Commission by an applicant for a license or by a licensee or information required by statute or by the Commission's regulations, orders, or license conditions to be maintained by the applicant or the licensee shall be complete and accurate in all material respects."

In accordance with 10 CFR 2.390 of the NRC's "Rules of Practice," a copy of this record will be available electronically for public inspection in the NRC Public Document Room or from the Publicly Available Records (PARS) component of NRC's document system (ADAMS). The NRC's document system is accessible from the NRC Web site at <http://www.nrc.gov/reading-rm/adams.html> (the Public Electronic Reading Room). \_

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**ACTION REQUIRED**

Submit the requested information within **15** calendar days (by **September 9, 2007**) by referencing control number **316316** to facilitate proper handling. If necessary, please contact me to discuss an alternative date for response. Upon receipt of your response we will resume our review. Address your written response to my attention at the above address.

If we do not receive an adequate response by this date, we may void the current action without prejudice to resubmission of your request at a later date. Upon receipt of your response we will reactivate placement of your request in our database and resume our review. "Void" means that we would take your request out of our active database until receipt of your written response, when we would reactivate it with a new control number and continue our review.

**Please direct any questions you may have to me at 630-829-9841.**

**Please use the fax number 630-515-1078, if you fax your response.**

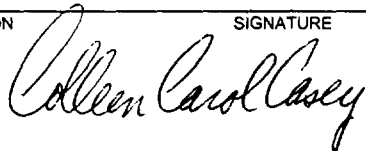
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NAME OF PERSON DOCUMENTING CONVERSATION

SIGNATURE

DATE

Colleen Carol Casey



August 24, 2007

TRANSMISSION VERIFICATION REPORT

TIME : 08/24/2007 15:30  
NAME : USNRC RIII  
FAX : 6308299782  
TEL :  
SER.# : 000A7J925774

DATE, TIME  
FAX NO./NAME  
DURATION  
PAGE(S)  
RESULT  
MODE

08/24 15:29  
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NRC FORM 306 (R11)  
(4-2004)



UNITED STATES  
NUCLEAR REGULATORY COMMISSION  
REGION III  
2443 Warrenville Road, Suite 210  
Lisle, Illinois 60532-4352

TELEFAX TRANSMITTAL

DATE:

8/24/07

NUMBER OF PAGES:  
(including this page)

3

SEND TO:

RALPH LIETO, MSE, RSO

LOCATION:

SAINTE JOSEPH MERCY HEALTH SYSTEM

FAX NUMBER:

734-712-5344



VERIFY BY CALLING SENDER

FROM:  
(SENDER)

Colleen Carol Casey

TELEPHONE NUMBER:

630-829-9841

FAX NUMBER:

630-515-1078

If you do not receive the complete fax transmittal, please contact the sender as soon as possible at the telephone number provided above.

MESSAGE

Please call me if you have any questions



UNITED STATES  
NUCLEAR REGULATORY COMMISSION  
REGION III  
2443 Warrenville Road, Suite 210  
Lisle, Illinois 60532-4352

TELEFAX TRANSMITTAL

DATE: 8/24/07 NUMBER OF PAGES: 3  
(including this page)

SEND TO: RALPH LIETO, MSE, RSO

LOCATION: SAINT JOSEPH MERCY HEALTH SYSTEM

FAX NUMBER: 734-712-5344  **VERIFY BY CALLING SENDER**

FROM: Colleen Carol Casey  
(SENDER)

TELEPHONE NUMBER: 630-829-9841 FAX NUMBER: 630-515-1078

If you do not receive the complete fax transmittal, please contact the sender as soon as possible at the telephone number provided above.

MESSAGE

*Please call me if you have questions.  
Thank you very much,  
Colleen Carol Casey*

NOTICE

This message is intended only for the use of the individual or entity to which it is addressed and may contain information that is privileged, confidential, or exempt from disclosure under applicable law. If the reader of this message is not the intended recipient or the employee responsible for delivering the message to the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. If you have received this communication in error, please notify the sender immediately by telephone and return the original to the above address, by U.S. Mail. Thank you.