#### Medical Associates of Ocean County, P.A. 1301 Route 72 West, Suite 300 Manahawkin, New Jersey 08050-2465 (609) 597-6513 (Ext. 131) (609) 597-4593 (Fax)

August 31, 2007

NHSB2

Licensing Assistance Section
Nuclear Medicine Safety Branch
Division of Radiation Safety and Safeguards
U.S. Nuclear Regulatory Commission, Region I
475 Allendale Road
King of Prussia, PA 19406-1415

03034010

RF:

License Number: 29-30261-01

Amendment Application - Close-Out Survey
Request For License Termination
Helio J. Malinverni, M.D.

Dear License Reviewer:

We request our byproduct material license be terminated. The sealed sources used for instrument calibration have been sent to Eckert & Ziegler (Previously Isotope Products Labs) for final disposal. Eckert & Ziegler have prepared a document confirming receipt of the depleted sources. Please refer to the attachment section to reference this correspondence.

A listing of the returned sealed sources are provided within Attachment A. Please refer to this section for details. All sealed sources were leak tested before shipment. No removable contamination in excess of 0.001 uCi was measured through this analysis.

Unsealed byproduct material (Tc-99m) was last used by this licensee May 2007. Radioactive waste was allowed to decay for ten half-lives and monitored before final disposal (as regulated medical waste).

On August 31, 2007, a "Close-Out Survey" was completed of the nuclear medicine department. Following this analysis, it was concluded that ambient exposure and removable contamination measurements were documented at background radiation levels (0.03 mR/hr and < 200 dpm/100 cm2). Summary results are provided within Attachment A. Please refer to this section for details.

141130

NMSS/RGN1 MATERIALS-002

2007 SEP 28 PM 12: 04

If you have additional questions, please contact me.

We thank you in advance for your assistance with this licensing action.

Sincerely,

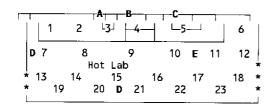
Helio J. Malinverni, M.D.

Administrative Representative

Attachment A

### Helio J. Malinverni, M.D. 52 Nautilus Drive Manahawkin, New Jersey 08050-2465

#### Close-Out Survey Diagram



#### Legend:

- A. Dose Calibrator
- B. L-Shield & Preparation Area
- C. Sink
- D. Waste & Sealed Source Storage
- E. Package Receipt/Return
- \*\* Locked Door

Nuclear cardiology operations were terminated at this imaging center in May 2007. All radoactive waste was allowed to deacy for ten half-lives and monitoried before disposal as regulated medical waste. The sealed sources were returned to the manufacturer for final disposal on September 4, 2007.

#### Helio J. Malinverni, M.D. 52 Nautilus Drive Manahawkin, New Jersey 08050-2465

#### Close-Out Survey

August 31, 2007

| Survey Areas<br>(Refer to Diagram) |                                 |                              |     |  |
|------------------------------------|---------------------------------|------------------------------|-----|--|
| Area                               | Ambient Exposure Survey (mR/hr) | Removable Contamination Init |     |  |
| Hot Lab                            |                                 |                              |     |  |
| Bkg                                | 0.03                            | 415 cpm x 1.20 = 498 dpm     | MWL |  |
| 1                                  | 0.03                            | 507 dpm - 498 dpm = 9 dpm    | MWL |  |
| 2                                  | 0.03                            | 488 dpm - 498 dpm = 0 dpm    | MWL |  |
| 3                                  | 0.03                            | 517 dpm - 498 dpm = 19 dpm   | MWL |  |
| 4                                  | 0.03                            | 495 dpm - 498 dpm = 0 dpm    | MWL |  |
| 5                                  | 0.03                            | 490 dpm - 498 dpm = 0 dpm    | MWL |  |
| 6                                  | 0.03                            | 515 dpm - 498 dpm = 17 dpm   | MWL |  |
| 7                                  | 0.03                            | 501 dpm - 498 dpm = 3 dpm    | MWL |  |
| 8                                  | 0.03                            | 498 dpm - 498 dpm = 0 dpm    | MWL |  |
| 9                                  | 0.03                            | 500 dpm - 498 dpm = 2 dpm    | MWL |  |
| 10                                 | 0.03                            | 529 dpm - 498 dpm = 31 dpm   | MWL |  |
| 11                                 | 0.03                            | 499 dpm - 498 dpm = 1 dpm    | MWL |  |
| 12                                 | 0.03                            | 506 dpm - 498 dpm = 8 dpm    | MWL |  |
| 13                                 | 0.03                            | 491 dpm - 498 dpm = 0 dpm    | MWL |  |
| 14                                 | 0.03                            | 508 dpm - 498 dpm = 10 dpm   | MWL |  |
| 15                                 | 0.03                            | 489 dpm - 498 dpm = 0 dpm    | MWL |  |
| 16                                 | 0.03                            | 511 dpm - 498 dpm = 13 dpm   | MWL |  |

- 1. Counting Efficiency = 83.2% (Correction Factor = 1.20) -
- 2. Survey Meter Used For Testing = Ludlum 14C, S/N 122291 (Calibration Date = 7/2007)
- 3. Ludlum 261 SCA & Well Counter Used For Testing
- 4. Survey conducted by Michael W. Lairmore Associates.
- 5. Survey Results analyzed by Michael W. Lairmore, Medical Physics Consultant

#### Helio J. Malinverni, M.D. 52 Nautilus Drive Manahawkin, New Jersey 08050-2465

# Close-Out Survey (Continued)

August 31, 2007

| Survey Areas<br>(Refer to Diagram) |                                 |                                       |          |  |
|------------------------------------|---------------------------------|---------------------------------------|----------|--|
| Area                               | Ambient Exposure Survey (mR/hr) | Removable Contamination (DPM/300 cm²) | Initials |  |
| Bkg                                | 0.03                            | 415 cpm x 1.20 = 498 dpm              | MWL      |  |
| 17                                 | 0.03                            | 502 dpm - 498 dpm = 4 dpm             | MWL      |  |
| 18                                 | 0.03                            | 496 dpm - 498 dpm = 0 dpm             | MWL      |  |
| 19                                 | 0.03                            | 517 dpm - 498 dpm = 19 dpm            | MWL      |  |
| 20                                 | 0.03                            | 490 dpm - 498 dpm = 0 dpm             | MWL      |  |
| 21                                 | 0.03                            | 493 dpm - 498 dpm = 0 dpm             | MWL      |  |
| 22                                 | 0.03                            | 491 dpm - 498 dpm = 0 dpm             | MWL      |  |
| 23                                 | 0.03                            | 494 dpm - 498 dpm = 0 dpm             | MWL      |  |

- 1. Counting Efficiency = 83.2% (Correction Factor = 1.20)
- 2. Survey Meter Used For Testing = Ludlum 14C, S/N 122291 (Calibration Date = 7/2007)
- 3. Ludlum 261 SCA & Well Counter Used For Testing
- 4. Survey conducted by Michael W. Lairmore Associates.
- 5. Survey Results analyzed by Michael W. Lairmore, Medical Physics Consultant

(RAH 114254)

## Sheet 2

### **RETURN PACKING LIST**

|  |                            |   | - —.• .  |  |  |
|--|----------------------------|---|--|--|--|
| FROM:                                  |                            |   | SEND TO  | :  |  |
| Company Name Medical Asso              | \$                         |   | S Fc   | kert & Ziegler   |  |
| Address 1301 Route 72 W                | val, Suite                 | 300   |  | tope Products  |  |
| City Mana Nawkin State                 | N2 :                       |   |  | orth Keystone Street   |  |
| Zip <u>USOS</u> O                      | · .                        |   |  | nk, CA 91504   |  |
| Contact Name Michela Lir               | aberry                     |   | Tel 866 •  | 476 • 9767   |  |
| Phone Number 609) 597-6513.            |                            |   | Fåx 661•257•8303<br>E-mail: nucmedsales@ezag.com       |  |  |
| Package Sung to Pks Sun                |                            |   |  |  |  |
|  |                            | must be<br>・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・・ | affixed to the g<br>source to IPL i<br>y. For addition | number to the left. This packing list<br><u>outside</u> of the package. Each<br>must be on a <u>one-to-one</u> exchange<br>al returns, please contact IPL<br>ditional cost considerations. |  |
| Consino                                | Looluci                    | 43333116  |  | 1ch, = . 398 me  |  |
| Important: Please complete all re      |                            | <u>ion below.</u>                               |  |  |  |
| Nuclide Current Activity Re            | eference Date              | Serial N  | •  | Capsule Description  |  |
| 1) CS-137 E-Viac 2480                  | et en 118/199              | 6 FF9   | <u>N   </u>  | E. yar   |  |
| 2) Co-ST Flood Disk 10<br>Current ad.  |                            | run Eli   | 2-41   | Flak Diek  |  |
|  | • .                        |   |  | ~  |  |
| 3) Co-57 Fleet Disk 10                 | ine 1 ~ 03[19              | 44 3.13   | 6 mag  | Flowe DiPIL.   |  |
| 4) CS-137 ROZ Source                   | . 1068 ue1                 | EV129   |  | CS-137 Rod.  |  |
| 5) Co-57 Viac Sare                     | 5 me a st                  | 1995  | )£282  | Co-SU Vial   |  |
| <b>FAX NUMBER:</b>                     |                            |   |  | must be provided to  |  |
|  |                            | ensure a  | acknowledg   | ement of return receipt.   |  |
| 609)597-2031                           |                            |   |  |  |  |
|  |                            |   |  |  |  |
| This section for IPL internal use only | Received at IPL b          | y:  |  |  |  |
|  | Print Name                 |   |  |  |  |
|  | Date                       |   |  |  |  |
|  | All source(s) received     |   |  | Yes No   |  |
|  | 55 5 55(2) ( 5 5 6 1 8 6 1 | per per   |  |  |  |

| 1/1-1                                  | URN PACKIN                         | NG LIST  |   |
|--|------------------------------------|--|---|
| FROM: Company Name Medical ASS         | ociales of Oceano                  | SEND TO:   | : & Ziegler   |
| Address 1301 Route 72 4                |                                    |  | Products  |
| City Mana Nawkin State                 |                                    | 1800 North<br>Burbank, C   | Keystone Street<br>91504  |
| Phone Number 6091 597-651              |                                    | Tel 866 •476 • 9<br>Fax 661 • 257 • 83<br>E-mail: nucmedsal  | <b>0</b> 3  |
| Package Burn to PK & Sm.               | maly stor                          | P: Fill in the return number   | to the left. This packing list  |
| RETURN #RA 3                           | maly- musi                         | t be affixed to the <u>outside</u> or<br>ned source to IPL must be<br>only. For additional return<br>omer service for additional | the package. Each<br>on a <u>one-to-one</u> exchange<br>s, please contact IPL |
| Constitution .                         | L. colved                          | Total Act =  | .398 me   |
| Survicible Current Activity R          | eference Date Seria<br>.S ಇದ್ದ: FF | Number Cap   | sule Description  |
| Cumb ad =                              | et on 1118/1996 17                 | 5971 E.  | yar !   |
| 2) Co-571 1 000 100 10                 | mel en ontalzan                    | 212-41   | all Diele   |
| 71 0 - 00 C 2.00 L-                    | 20 000 000 000                     | 136ma Fil  | DIPIL.  |
| * C2-107 Roz Source                    | 1968 met EVI                       |  | -137 Rd.  |
| \$ 5) Co-57 Viac Same                  | Sme a stulter                      | D£282 Co-  | sn viel   |
| FAX NUMBER:                            |                                    | E: FAX number must t<br>ire acknowledgement  |   |
|  |                                    |  |   |
| This section for IPL internal use only | Print Name                         | alne Ster  | lhy   |
| <b>†</b>                               | Date 4 SEP 07                      |  |   |

1929899818

65:41 7002/40/60

| This is to acknowledge the receip  B/3//2007 (RECEUTE)  includes an administrative review                         | and to inform you that the initial processing which   |
|---|---|
| There were no administrative of technical reviewer. Please not omissions or require additional                    | 61-01 missions. Your application was assigned to a e that the technical review may identify additional information. |
| Please provide to this office wit   | thin 30 days of your receipt of this card   |
| A copy of your action has been for<br>Branch, who will contact you sepa   | rwarded to our License Fee & Accounts Receivable rately if there is a fee issue involved.                           |
| Your action has been assigned <b>Ma</b><br>When calling to inquire about this<br>You may call us on (610) 337-539 | action, please refer to this control number   |
| NRC FORM 532 (RI)<br>(6-96)   | Sincerely,<br>Licensing Assistance Team Leader  |

.

ADDRESS CORRECTOR DECEMBER

7006 2150 0002 9659 3683

UNITED STATES POSTAL SERVICE





0000

1940

,

Licensing Assistance Section
Nuclear Medicine Safety Branch
Division of Radiation Safety and Safeguards
US Nuclear Regulatory Commission, Region I
475 Allendale Road
King of Prussia, PA 19406-1415

