

**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

**CONVERSATION RECORD**

<b>ACTUALLY FAXED? YES.</b>	<i>3 left msg at Dr. Bickers answering Sawing 10/5/07, 6:15pm CT that fax is at his office - no call back msg is needed.</i>	TIME	DATE
			Oct. 5, 2007

NAME OF PERSON(S) CONTACTED	ORGANIZATION	TELEPHONE NO.
D. Mark Bickers, M.D.	D. Mark Bickers, M.D.	812-945-7972 Fax: 812-945-7969

SUBJECT License No.: 13-32474-01	Control No.: 316413
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**SUMMARY**

**We have reviewed your letter dated July 27, 2007, requesting an amendment to your byproduct materials license and find that we need additional information as follows:**

**Please note that we are unable to approve Ibrahim Fahsah, M.D. as an authorized user for the use of materials in 10 CFR 35.100 and 35.200 at this time because the information in your letter dated July 27, 2007, was insufficient to complete our review.**

**If you wish to pursue this matter, please submit the following information, addressed to my attention and referenced as "additional information to control number 316413."**

**Dr. Fahsah was not approved as an authorized user for the use of materials in 10 CFR 35.100 and 35.200 because Dr. Fahsah's sole credential was a form from the University of Louisville, which provided no substantive information we could evaluate in accordance with our regulatory requirements. Therefore, it does not appear that Dr. Fahsah meets the regulatory requirements in 10 CFR 35.190, 35.290, 35.57, 35.13 and 35.59, as appropriate.**

**Please refer to the regulatory requirements in 10 CFR 35.190, 35.290, 35.57, 35.13 and 35.59, as well as section 8.11, item 7 and Appendices B, D and E in NUREG 1556, Vol. 9, Rev. 1, for assistance in preparing your written response to demonstrate that Dr. Fahsah's training and experience meet the appropriate regulatory requirements for the modalities he seeks authorization for.**

**Note that it is recommended that Forms 313a be used to resubmit Dr. Fahsah's application and document his training and experience. If Forms 313a will be used in support of your response, please use the newly revised forms found on our website at:**

[http://www.nrc.gov/reading-rm/doc-collections/forms/nrc313a\(aud\).pdf](http://www.nrc.gov/reading-rm/doc-collections/forms/nrc313a(aud).pdf)

**Please do not submit resumes, CV's, or personal, proprietary information that we must protect, in accordance with 10 CFR 2.390, such as social security numbers, dates of birth, home addresses or phone numbers, patient records, college transcripts, etc.**

**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 letter will be available electronically 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>.**

**If you have further questions concerning these matters please contact me at (630) 829-9841 or (800) 522-3025.**

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**ACTION REQUIRED**

**As we cannot issue an amendment at this time we are voiding this request in order to enable you to prepare a quality application without time constraints. This is done without prejudice to the resubmission of your request at a later date. Upon receipt of your response we will resume our review. Address your written response to my attention at the above address.**

**PLEASE NOTE THAT A "VOID" IS AN ADMINISTRATIVE PROCEDURE THAT PUTS YOUR AMENDMENT REQUEST "ON HOLD" (TAKES IT OUT OF OUR ACTIVE CASEWORK DATABASE) UNTIL YOU REACTIVATE IT VIA SUBMISSION OF A WRITTEN RESPONSE. IT "BUYS" YOU TIME TO PREPARE A QUALITY RESPONSE AND IS GENERALLY REGARDED AS A "GOOD THING."**

**PLEASE DIRECT ANY QUESTIONS YOU MAY HAVE TO ME AT (630) 829-9841 or (800) 522-3025, ext. 9841**

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NAME OF PERSON DOCUMENTING CONVERSATION

SIGNATURE

DATE

Colleen Carol Casey



Oct. 5, 2007



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

TELEFAX TRANSMITTAL

DATE: 10/5/07

NUMBER OF PAGES: 3  
(including this page)

SEND TO: D. Mark Butkus, MD

LOCATION: Same as above

FAX NUMBER: 812 - 945 - 7969  **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 questions - note I will be out of the office Oct. 8-12<sup>th</sup>, returning Oct. 15<sup>th</sup>.*

*Sincerely,  
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.

TRANSMISSION VERIFICATION REPORT

TIME : 10/05/2007 18:16  
NAME : USNRC RIII  
FAX : 6308299782  
TEL :  
SER.# : 000A7J925774

DATE, TIME	10/05 18:16
FAX NO./NAME	88129457969
DURATION	00:00:38
PAGE(S)	03
RESULT	OK
MODE	STANDARD ECM

NRC FORM 386 (R111)  
(4-2004)



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2443 Warrenville Road, Suite 210  
Lisle, Illinois 60532-4352

TELEFAX TRANSMITTAL

DATE:

10/5/07

NUMBER OF PAGES:  
(including this page)

3

SEND TO:

D. Mark Bucken, MD

LOCATION:

Same as above

FAX NUMBER:

812 - 945 - 7969



**VERIFY BY CALLING SENDER**

FROM:  
(SENDER)

Colleen Carol Casey

TELEPHONE NUMBER:

630 - 829 - 9841

FAX NUMBER:

630 - 515 - 1078

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MESSAGE

Please call me if you have questions - note I will be out of the office on 10/10/07