

UNITED STATES NUCLEAR REGULATORY COMMISSION REGION IV 611 RYAN PLAZA DRIVE, SUITE 400 ARLINGTON, TEXAS 76011-4005

#### November 16, 2007

#### **VOID SHEET**

- TO: License Fee and Accounts Receivable Branch
- FROM: Region IV, DNMS, NMLB
- SUBJECT: VOIDED Amendment
- Applicant: DMS Imaging, Inc.
- License No.: 40-32477-01
- Control No.: 471466
- Docket No.: 030-36404
- Reason for Void: The licensee did not provide adequate documentation to support the amendment, as requested in NRC RAI letter dated August 22, 2007 (ML072340686). The amendment request is voided without prejudice and when sufficient documentation is provided by the licensee, then the license amendment request will be approved.

Reviewer: Date:

Rachel S. Browder November 16, 2007

Licensing Assistant: Colleen Murnahan Date:

Attachment: Official Record Copy of Voided Action or ML Control No. of Voided Action:

#### FOR LFMB USE ONLY

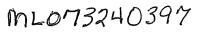
Refund Authorized and Processed

- No Refund
- Fee Exempt or Fee Not Required

Comments:

Log Completed

Processed By:\_\_\_\_\_



## Procedures for Recognition of Foreign Trained Physicians and Physicists Applying for AU and AMP Status

The purpose of this procedure is to provide guidance on making appropriate decisions regarding approval of foreign trained physicians and physicists applying for AU and AMP status under the alternate pathway. The licensee will submit the appropriate NRC Form 313A along with the license amendment request to the Regional offices. The Regional license reviewers will verify that the criteria described below is met for approval of foreign trained physicians and physicists as AUs and AMPs.

#### **Foreign Trained Physicians**

For physicians who received their training outside of the United States, the license reviewer should verify that:

1.) The work experience of the documented training and experience is done under the supervision of an AU (as defined in 10 CFR 35.2) licensed in the U.S.

2.) The written attestation is obtained from an appropriately qualified AU preceptor listed on an NRC or Agreement State license or broad scope permit.

#### **Foreign Trained Physicists**

For physicists who received their training outside of the United States, the license reviewer should verify that:

1.) The masters and/or doctoral degrees from outside of the US are from an accredited college or university. The license reviewer should refer to the web site of the institution to determine whether the college/university is accredited. License reviewers should also refer to the web site for the International Organization for Medical Physicists which provides a global listing of graduate education programs in medical physics and the associated accreditation status. A Technical Assistance Request (TAR) should be submitted if the license reviewer is uncertain about the validity of the degree.

2.) Degrees other than physics, medical physics, other physical science, engineering and applied mathematics are equivalent to one of these listed degrees. The license reviewer should request a transcript from the applicant. If it is unclear whether the degree is equivalent to the degrees listed in 10 CFR 35.51(b)(1), then a TAR should be submitted to NRC HQ.

3.) The work experience of the documented training and experience is completed under the supervision of an individual who meets the requirements for an AMP (as defined in 10 CFR 35.2). The Regions should seek additional guidance from NRC HQ if it is unclear whether the full time work experience in medical physics is obtained under the supervision of an individual who meets the requirement for an authorized medical physicist.

4.) The written attestation is obtained from an AMP preceptor listed on an NRC or Agreement State license or broad scope permit.

From:"Graves, Joe M" <joe-graves@uiowa.edu>To:<rsb3@nrc.gov>Date:11/19/2007 1:39:09 PMSubject:RE: au at Iowa City

Rachel,

Dr. Bushnell is approved as an authorized user for use of unsealed by-product material in accordance with 10CFR 35.100, 35.200, and 35.300 (including I-131 < & > 33mCi) on both the Iowa City VA's broadscope permit # 14-00821-01 and the University of Iowa's broadscope agreement state license # 0037-1-52-AAB. If you have any questions or require additional information, please contact me.

Joe M. Graves Radiation Safety Officer University of Iowa & VA Medical Center Phone: 319-335-8517 Fax: 319-335-7564 joe-graves@uiowa.edu

From: Williams, Gary E [mailto:Gary.Williams3@va.gov] Sent: Monday, November 19, 2007 10:30 AM To: rsb3@nrc.gov Cc: Graves, Joe M Subject: au at Iowa City

lowa City, IA Joe Graves 319-335-8501 319-335-7564

Iowa City, IA Joe Graves joe-graves@uiowa.edu

Rachel,

Please contact Joe Graves to confirm AU.

Gary E. Williams

National Health Physics Program

Veterans Health Administration

North Little Rock, Arkansas

(501) 257-1572

CC:

"Williams, Gary E" <Gary.Williams3@va.gov>

Additional Lubo. That I received after the Void Sheet. Bob

#### **Mail Envelope Properties** (4741E645.B58 : 10 : 2904)

Subject:	RE: au at Iowa City
<b>Creation Date</b>	11/19/2007 1:38:37 PM
From:	"Graves, Joe M" <joe-graves@uiowa.edu></joe-graves@uiowa.edu>

Created By:

joe-graves@uiowa.edu

#### Recipients

nrc.gov ARL\_PO.ARL\_DO RSB3 (Rachel Browder)

#### va.gov

Gary.Williams3 CC (Gary E Williams)

#### **Post Office**

Security:

ARL\_PO.ARL\_DO

## Route

nrc.gov va.gov

Files	Size	Date & Time
MESSAGE	1038	11/19/2007 1:38:37 PM
TEXT.htm	3767	
Mime.822	7155	
Options		
Expiration Date:	None	
Priority:	Standard	
<b>ReplyRequested:</b>	No	
<b>Return Notification:</b>	None	
<b>Concealed Subject:</b>	No	

# Junk Mail Handling Evaluation Results

Sender: joe-graves@uiowa.edu Message is eligible for Junk Mail handling This message was not classified as Junk Mail Sender e-mail address is not in recipient's personal address book

Standard

#### Junk Mail settings when this message was delivered

Junk List is not enabled Junk Mail using personal address books is not enabled Block List is enabled



Operations office: Corporate office: 
 109
 S. Petro Avenue
 2101
 N. University Drive

 Sioux Falls, SD 57107
 Fargo, ND 58102

 Phone: 605-330-9060
 Phone: 701-237-9073

 800-333-0365
 800-437-4628

 Fax: 877-595-8108
 Fax: 800-848-0990
 www.dmshg.com

October 10, 2007

U.S. Nuclear Regulatory Commission Region IV 611 Ryan Plaza Drive, Suite 400 Arlington, Texas 76011-4005

RECEIVED OCT 1 5 2007 DNMS

Dear Sir or Madam:

Re: NRC Radioactive Material License #40-32477-01

This letter is in response to the request for additional information by the Nuclear Regulatory Commission from correspondence dated August 22, 2007. DMS originally requested adding Dr. Ovar Thor Jonsson as an authorized user on August 16, 2007. The enclosed letter is the perceived equivalent for information required on NRC Form 313A.

If you have any questions or need additional information please contact me at 800-333-0365 extension 2610.

Sincerely,

Michelle White

Michelle White Corporate Radiation Safety Officer **DMS** Imaging







IOWA CITY DEPARTMENT OF VETERANS AFFAIRS (VA) MEDICAL CENTER <u>Medical Center</u>

601 Highway 6 West, Iowa City, 1A 52246-2208

<u>Communités-Based Outpatient Clinics</u> 2979 Victoria Street, Bettendorf, IA 52722-2784 200 Mercy Drive, Suite 106, Dubuque, IA 52201-7343 387 E. Grove Street, Galesburg, IL 61401-3728 721 Broadway, Quincy, IL 62301-2708 1015 S. Hackett, Waterioo, IA 50701-3500 Coralville Clinic: 520 10<sup>th</sup> Avenue, Suite 200, Coratville, IA 52241-1923

September 18, 2007

In Reply Refer To: 636A8/115

Certification Board of Nuclear Cardiology 19562 Club House Road Montgomery Village, MD 20882

Dear Sir or Madam:

Dr. Ovar Thor Jonsson has completed a training program in nuclear cardiology that meets the requirements for Level 2 training as outlined in the ACCF/ASNC COCATS Guidelines for Training in Nuclear Cardiology, revised 2006 within an accredited Cardiovascular Disease Program.

The above-named applicant completed a minimum of 80 hours of classroom and laboratory training that meets the Nuclear Regulatory Commission (NRC) requirements as an INTEGRAL part of his/her fellowship/residency program.

Dr. Jonsson attended Dr. Mark Madsen's lectures on Physics and Instrumentation the entire academic year as well as nuclear rotations, and combined Cardiology/Nuclear Medicine conferences.

Sincerely. TAVID L. BUSHNELL, M.D.

DAVID L. BUSHALL, M.D. Chief, Diagnostic Imaging Service Department of Veterans Affairs Medical Center Iowa City, IA 52246

Professor Radiology University of Iowa Hospitals and Clinics

Agreement State License Number: 14-00822-01 Expiration Date: September 30, 2009

## ACCEPTANCE REVIEW MEMO (ARM)

. . . . . .

Licensee:	DMS Imaging	License No.: 40-32477-01
Docket No.:	030-36404	Mail Control No.: 471466
Type of Action:	Amend	Date of Requested Action: 08-06-07
Reviewer Assigned:		ARM reviewer(s): Rachel

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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>

Reviewer's Initia	als: <u>BB</u>	Date:	11/16	07					
□Yes □No	Unrestricted release Group 2 or >: Transfer memo to			ys.					
□Yes <b>□</b> No	Decommissioning notification should be completed w	ithin 30 d	ays.						
□Yes □No	Termination request < 90 days from date of expiration	n							
□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 HP's Initials: Date:									

SUNSI Screening according to RIS 2005-31								
□Yes ☑No Non-Publicly Available, Sensitive if any 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 . HP's Initials: BOB Date: <u>11 16 07</u>								

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Pre-Licensing Screening

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Control No. 471466

Name: DMS Imaging	Type of Request: Amend Program Code(s):						
Location: ND	License No.: 40-32477-01	Docket No.: 030-36404					

#### 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-publiciv 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. No Α. The request is from a new applicant. Β. 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 No 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.

C. The applicant requested certain radionuclides and quantities that equal or exceed the Risk No Significant Quantity (TBq) values in the table, below, that have been "highlighted" by the reviewer

#### Table of Risk Significant Quantities

(Category 2 Quantities, IAEA Safety Guide No. RS-G-1.9, 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 (Ci <sup>1</sup> )
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		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

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	NIA
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.	NA

Signature and Date for Step 1:

5 vouseer 1/16/07

License Reviewer and Date



Sioux Falls, SD 57107 Fargo, ND 58102 800-333-0365

Operations office: Corporate office: 109 S. Petro Avenue 2101 N. University Drive Phone: 605-330-9060 Phone: 701-237-9073 800-437-4628 Fax: 877-595-8108 Fax: 800-848-0990

www.dmshg.com

# RECEIVED AUG 2 0 2007 DNMS

August 16, 2007

Nuclear Regulatory Commission Region IV 611 Ryan Plaza Drive, Suite 400 Arlington, Texas 76011-8064

To Whom It May Concern:

Please amend our radioactive material license number 40-32477-01 license condition 12.B. to add Dr. Ovar Thor Jonsson as an authorized user for material and use of 10 CFR 35.200 limited to nuclear cardiology studies only. Included is the documentation that supports Dr. Jonsson's accreditation and training.

If you need additional information or have questions please contact me at 800-333-0365.

Sincerely,

Trackfaller J

Traci Hollingshead Corporate Radiation Safety Officer DMS Imaging





DEPARTMENT OF VETERANS AFFAIRS IOWA CITY HEALTH CARE SYSTEM <u>Medical Center</u> 601 Highway 6 West, Iowa City, IA 52246-2008

> <u>Community-Based Outpatient Clinics</u> 2979 Victoria Street, Bettendorf, IA 52722-6702 250 Mercy Drive, Suite 106, Dubugue, IA 52201 387 E. Grove Street, Galesburg, IL 61401 1707 N. 12<sup>th</sup> Street, Quincy, IL 62301 1015 S. Hackett, Waterloo, IA 50703

April 16, 2007

In Reply Refer To: 636A8/115

Certification Board of Nuclear Cardiology 19562 Club House Road Montgomery Village, MD 20882

Dear Sir or Madam:

Dr. Or/ar Thor Jonsson has completed a training program in nuclear cardiology that meets the requirements for Level 2 training as outlined in the ACCF/ASNC COCATS Guidelines for Training in Nuclear Cardiology, revised 2006 within an accredited Cardiovascular Disease Program.

Dr. Jonsson is competent to independently function as an authorized use under NRC 10 CFR 35.200 uses.

Sincerely,

DAVID BUSHBELL, M.D. Chief, Diagnostic Imaging Service Department of Veterans Affairs Medical Center Iowa City, IA 52246

Professor Radiology University of Iowa Hospitals and Clinics

Agreement State License Number: 14-00822-01 Expiration Date: September 30, 2009

is a licensed Physician & Surgeon (MD ) under the provisions of the laws of the State o Certificate No. 5989 r Jonsson ands and in the day of NOURMARY Examinents In witness whereof, we have hepeunto set South Dakota and is entitled to practice medicine in all its branches. affixed the Seal of said Board at Diowy year of Our Lord Two Thousand 🕉 South Dakota The State Board of JUL This is to Certify that President S. Dak. This\_ Said license granted by KuddrScowent State of ' Vav Medical 700 Ø

RMAN, BOARD OF TRUSTEES OFFICER PRESIDENT, CHILL L'ECUTIV JANUARY 24, 2001 SUCCESSFULLY PASSED ITS EXAMINATIONS AND HAS BEEN AWARDED THIS CERTIFICATE. RALLY > FOREIGN MEDICAL GRADUATES EDUCATIONAL COMMISSION DATE (SSUED HAS SATISFIED ALL THE REQUIREMENTS OF THE COMMISSION, ORVAR THOR JONSSON CLINICAL SKILLS ASSESSMENT DECEMBER 8, 2000 CERTIFICATE NUMBER VALID INDEFINITEL CLINICAL SKILLS December 5, 2000 0-614-383-8 · CERTIFIES THAT FOR VALID THROUGH ENGLISH EXAMINATION CERTIFICATE NUMBER SEPTEMBER 9, 2000 VALID INDEFINITELY AUGUST 12, 2000 「「「「「「」」」 0-614-383-8 APRIL 8, 2000 0-614-383-8 MEDICAL EXAMINATION ENGLISH EXAMINATION CERTIFICATE NUMBER CLINICAL SCIENCE VALID THROUGH BASIC SCIENCE

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2006

07/23/2007 11:34 FAX SSI<u>V 480-31-8920</u> Cardiovascular Felloshi<sub>3</sub> Applicant



HASKOLLISLANDS Faculty of Medicine University of Iceland

Reykjavík, October 9<sup>th</sup> 2002.

This is to certify, that Örvar Thor Jónsson, born December 17<sup>th</sup> 1972 was registered in the Medical School, Faculty of Medicine, University of Iceland in 1992 and graduated in June 1998. The degree conferred was cand. med. et chir., which is the equivalent of the M.D. at medical school in the U.S.A. and the M.B. in the U.K.

It is a pleasure for me to state that Örvar Thor Jónsson was a diligent, interested and conscientious student throughout his course at the Medical School. He excelled in chemistry, anatomy, surgery and virology and received good marks for his fourth year medical student research project. The project was on the control of vascular induction in breast cancer and VEGF production, done in the laboratories of the Icelandic Cancer Society, a research institution allied to the Medical School. His final average grade was 8.39 which ranks him number 13 in a graduating class of 31 students

He did in general reach high and up to the highest marks in his clinical work during the internship year at the various departments of the Landspitalinn University Hospital, where he was rated as a capable and hard-working young doctor who has enjoyed good relations to patients and fellow staff.

On the following page we list the individual grades he received at Medical School and the ranking for each one. Grades 5.00 to 5.99 are considered Third Class. 6.00 to 7.24 are Second Class. 7.25 to 8.99 are First Class. 9.00 to 10.00 are First Class with Distinction.

Reynir Tómas Geirsson, MD, PhD, FRCOG, Dean of the Faculty of Medicine, University of Iceland.

Jeagant fanet Scherkte THE NMERICAN BOARD OF INTERNAL MENNAL MEDIDIS ATTERNAL MEDIDIS ATTESTS THAT maldle. Hassan win Waham Keighusa 1U, U, Kon University Signer 20 lort HAS MET THE REQUIREMENTS OF THIS BOARD AND IS HEREBY 2004Johnalge & King J. N. K. M.Ger CERTIFIED FOR THE PERIOD 2004 THROUGH 2014 INTERNAL MEDICINE Inco Oruar Thor Janzaon AS A DIPLOMATE IN achard f. Baron Holly g. Humphrey Thomas Black Ktor L KL Her C . Pu Troyen 9. Brennan Sham Andersun park & Que илиен 225816

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Signed Date	3. OTHER	2. Correct Fee Paid. Application may 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.:	1. APPLICATION ATTACHED Applicant/Licensee: DMS IMAGING, Received bate: 20070820 Docket No: 3036404 Control No.: 471466 License No.: 40-32477-01 Action Type: Amendment	A. REGION	LICENSE FEE TRANSMITTAL	BETWEEN: License Fee Management Branch, ARM and Regional Licensing Sections
		y be processed for:		ck when milestone O3 is entered $/$ /)	Colley Murnehan			INC.			: (FOR LFMS USE) INFORMATION FROM LTS  Program Code: 02220 Status Code: 0 Fee Category: 3P 7C Exp. Date: 20111231 Fee Comments: Decom Fin Assur Reqd: N