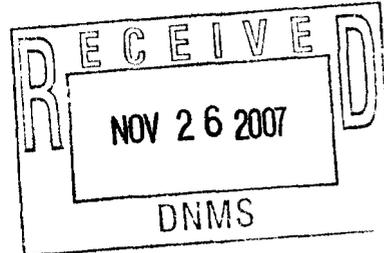




## TETON NUCLEAR MEDICINE SERVICE

2001 S. WOODRUFF SUITE 20 • IDAHO FALLS, IDAHO 83404-6370 • (208) 525-3201 • FAX (208) 525-8896



20 November 2007

**RE: AMENDMENT TO RADIOACTIVE MATERIALS LICENSE 11-27404-01**

I would like to amend above-said license to delete as authorized users:

- (1) Shields Stutts, M.D.
- (2) Kevin C. Funk, M.D.
- (3) David Madden, M.D.

The above three authorized users are no longer practicing at Teton Nuclear Medicine Service.

1. Remove 3 AU's
2. Change RSO
3. Name change and add LLC.

  
Miguel P. Garcia  
Teton Nuclear Medicine Service

No 471574

Information Required for Change of Control and/or Change of Ownership  
(to include a name change)

source: Appendix F of NUREG-1556, Volume 15 (Date Published: November 2000)

Please provide the following information concerning changes of control (transferor and/or transferee, as appropriate). If any items are not applicable, so state.

1. Provide a complete description of the transaction (i.e., transfer of stocks or assets, or merger). Indicate whether the name has changed and include the new name. Include the name and telephone number of a licensee contact who NRC may contact if more information is needed.

A. Description of the transaction:

B.  No name change

New name of licensed organization: TETON Nuclear Medicine Service, LLC.

C.  No change in contact

New contact: DANNY L. DAVIS, CNMT

New telephone number: N/A

2. Describe any changes in personnel or duties that relate to the licensed program. Include training and experience for new personnel.

A.  No changes in personnel having control over licensed activities.

Changes in personnel having control over licensed activities (e.g. officers of a corporation): DANNY L. DAVIS, CNMT

B.  No changes in personnel named in the license.

Changes in personnel named in the license (e.g. RSO, AUs) - including training, experience and responsibilities: DANNY L. DAVIS CNMT (proposed RSO)

3. Describe, in detail, any changes in the organization, location, facilities, equipment or procedures that relate to the licensed program.

Organization:

Equipment:

Location:

Procedures:

Facility:

Not applicable

Sanjel Corporation

-2-

4. Describe the status of the surveillance program (i.e., surveys, wipe tests, quality control) at the present time and the expected status at the time that control is to be transferred.

A. Description of the status of all surveillance program:

All surveillance will be maintained as listed in current license

B. Surveillance Items & Records: calibrations, leak tests, surveys, inventories, and accountability requirements will be current at the time of transfer

[X] Yes [ ] No (explain)

5. Confirm that all records concerning the safe and effective decommissioning of the facility will be transferred to the transferee or to NRC, as appropriate. These records include documentation of surveys of ambient radiation levels and fixed and/or removable contamination, including methods and sensitivity.

Records transferred to:

[ ] New licensee [ ] NRC for license termination [X] Not applicable

6. Confirm that the transferee will abide by all constraints, conditions, requirements and commitments of the transferor or that the transferee will submit a complete description of the proposed licensed program.

[ ] Description of proposed licensed program attached

OR

DANNY L. DAVIS (transferee) will abide by all constraints, conditions, requirements and commitments of Miguel P. Garcia (transferor)

Danny L. Davis CNMT (Signature/Title Transferee) Miguel P. Garcia, RSO (Signature/Title Transferor)

25 Sept 07 (date)

25 Sept 07 (date)

OR

[X] Not applicable (name change only)

\_\_\_\_\_  
Certifying Officer - Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Certifying Officer - Typed name and title

**RADIATION SAFETY OFFICER TRAINING AND EXPERIENCE  
AND PRECEPTOR ATTESTATION  
[10 CFR 35.50]**

APPROVED BY OMB: NO. 3150-0120  
EXPIRES: 10/31/2008

Name of Proposed Radiation Safety Officer

Danny L. Davis

Requested Authorization(s) *The license authorizes the following medical uses (check all that apply):*

- 35.100   
  35.200   
  35.300   
  35.400   
  35.500   
  35.600 (remote afterloader)
- 35.600 (teletherapy)   
  35.600 (gamma stereotactic radiosurgery)   
  35.1000 ( F1<sup>18</sup> - FDG )

**PART I -- TRAINING AND EXPERIENCE  
(Select one of the four methods below)**

\*Training and Experience, including board certification, must have been obtained within the 7 years preceding the date of application or the individual must have obtained related continuing education and experience since the required training and experience was completed. Provide dates, duration, and description of continuing education and experience related to the uses checked above.

**1. Board Certification**

- Provide a copy of the board certification.
- Use Table 3.c. to describe training in radiation safety, regulatory issues, and emergency procedures for all types of medical use on the license.
- Skip to and complete Part II Preceptor Attestation.

OR

**2. Current Radiation Safety Officer Seeking Authorization to Be Recognized as a Radiation Safety Officer for the Additional Medical Uses Checked Above**

- Use the table in section 3.c. to describe training in radiation safety, regulatory issues, and emergency procedures for the additional types of medical use for which recognition as RSO is sought.
- Skip to and complete Part II Preceptor Attestation.

OR

**3. Structured Educational Program for Proposed Radiation Safety Officer**

a. Classroom and Laboratory Training

Description of Training	Location of Training	Clock Hours	Dates of Training*
Radiation physics and instrumentation	Teton Nuclear Medicine Service 2001 S. Woodruff, Suite 20 Idaho Falls, ID 83404-6370 11-27404-01	60	Sept 02- Dec 02
Radiation protection	Teton Nuclear Medicine Service 2001 S. Woodruff, Suite 20 Idaho Falls, ID 83404-6370 11-27404-01	80	Sept 02- Nov 02
Mathematics pertaining to the use and measurement of radioactivity	Teton Nuclear Medicine Service 2001 S. Woodruff, Suite 20 Idaho Falls, ID 83404-6370 11-27404-01	40	Jan 03- Mar 03
Chemistry of byproduct material for medical use	Teton Nuclear Medicine Service 2001 S. Woodruff, Suite 20 Idaho Falls, ID 83404-6370 11-27404-01	40	June 03- Aug 03
Radiation biology	Teton Nuclear Medicine Service 2001 S. Woodruff, Suite 20 Idaho Falls, ID 83404-6370 11-27404-01	40	Jan 04- Mar 04
<b>Total Hours of Training:</b>			

**RADIATION SAFETY OFFICER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)**

**3. Structured Educational Program for Proposed Radiation Safety Officer (continued)**

b. Supervised Radiation Safety Experience

(If more than one supervising individual is necessary to document supervised work experience, provide multiple copies of this section.)

Description of Experience	Location of Training/ License or Permit Number of Facility	Dates of Training*
Shipping, receiving, and performing related radiation surveys	Teton Nuclear Medicine Service 2001 S. Woodruff, Suite 20 Idaho Falls, ID 83404-6370  11-27404-01	Jan 04- Present
Using and performing checks for proper operation of instruments used to determine the activity of dosages, survey meters, and instruments used to measure radionuclides	Teton Nuclear Medicine Service 2001 S. Woodruff, Suite 20 Idaho Falls, ID 83404-6370  11-27404-01	Jan 04- Present
Securing and controlling byproduct material	Teton Nuclear Medicine Service 2001 S. Woodruff, Suite 20 Idaho Falls, ID 83404-6370  11-27404-01	Jan 04- Present
Using administrative controls to avoid mistakes in administration of byproduct material	Teton Nuclear Medicine Service 2001 S. Woodruff, Suite 20 Idaho Falls, ID 83404-6370  11-27404-01	Jan 04- Present
Using procedures to prevent or minimize radioactive contamination and using proper decontamination procedures	Teton Nuclear Medicine Service 2001 S. Woodruff, Suite 20 Idaho Falls, ID 83404-6370  11-27404-01	Jan 04- Present
Using emergency procedures to control byproduct material	Teton Nuclear Medicine Service 2001 S. Woodruff, Suite 20 Idaho Falls, ID 83404-6370  11-27404-01	Jan 04- Present
Disposing of byproduct material	Teton Nuclear Medicine Service 2001 S. Woodruff, Suite 20 Idaho Falls, ID 83404-6370  11-27404-01	Jan 04- Present
Licensed Material Used (e.g., 35.100, 35.200, etc.)+ <u>16<sup>201</sup>-Fl<sup>18</sup></u>	Teton Nuclear Medicine Service 2001 S. Woodruff, Suite 20 Idaho Falls, ID 83404-6370  11-27404-01	Jan 04- Present

\* Choose all applicable sections of 10 CFR Part 35 to describe radioisotopes and quantities used: 35.100, 35.200, 35.300, 35.400, 35.500, 35.600 remote afterloader units, 35.600 teletherapy units, 35.600 gamma stereotactic radiosurgery units, emerging technologies (provide list of devices).

**RADIATION SAFETY OFFICER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)**

**3. Structured Educational Program for Proposed Radiation Safety Officer (continued)**

b. Supervised Radiation Safety Experience (continued)

(If more than one supervising individual is necessary to document supervised work experience, provide multiple copies of this section.)

Supervising Individual	License/Permit Number listing supervising individual as a Radiation Safety Officer
Miguel P. Garcia	11-27404-01
This license authorizes the following medical uses:	
<input checked="" type="checkbox"/> 35.100	<input checked="" type="checkbox"/> 35.200
<input type="checkbox"/> 35.300	<input type="checkbox"/> 35.400
<input type="checkbox"/> 35.500	<input type="checkbox"/> 35.600 (remote afterloader)
<input type="checkbox"/> 35.600 (gamma stereotactic radiosurgery)	<input type="checkbox"/> 35.600 (teletherapy)
	<input type="checkbox"/> 35.1000 ( _____ )

c. Describe training in radiation safety, regulatory issues, and emergency procedures for all types of medical use on the license.

Description of Training	Training Provided By	Dates of Training*
Radiation safety, regulatory issues, and emergency procedures for 35.100, 35.200, and 35.500 uses	Miguel P. Garcia	Jan 04- Present
Radiation safety, regulatory issues, and emergency procedures for 35.300 uses	N/A	
Radiation safety, regulatory issues, and emergency procedures for 35.400 uses	N/A	
Radiation safety, regulatory issues, and emergency procedures for 35.600 - teletherapy uses	N/A	
Radiation safety, regulatory issues, and emergency procedures for 35.600 - remote afterloader uses	N/A	
Radiation safety, regulatory issues, and emergency procedures for 35.600 - gamma stereotactic radiosurgery uses	N/A	
Radiation safety, regulatory issues, and emergency procedures for 35.1000, specify use(s): 201 TL18 Cardiac Fl18 - FDG		Sept 06- Present

**RADIATION SAFETY OFFICER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)**

**3. Structured Educational Program for Proposed Radiation Safety Officer (continued)**

c. Training in radiation safety, regulatory issues, and emergency procedures for all types of medical use on the license (continued)

Supervising Individual *If training was provided by supervising RSO, AU, AMP, or ANP. (If more than one supervising individual is necessary to document supervised training, provide multiple copies of this page.)*

License/Permit Number listing supervising individual

Miguel P. Garcia, RSO  
John J. Strobel, M.D., AU

11-27404-01

License/Permit lists supervising individual as:

- Radiation Safety Officer       Authorized User       Authorized Nuclear Pharmacist
- Authorized Medical Physicist

Authorized as RSO, AU, ANP, or AMP for the following medical uses:

- 35.100       35.200       35.300       35.400
- 35.500       35.600 (remote afterloader)       35.600 (teletherapy)
- 35.600 (gamma stereotactic radiosurgery)       35.1000 (TL<sup>201</sup>: FI<sup>18</sup> EDG)

d. Skip to and complete Part II Preceptor Attestation.

**OR**

**4. Authorized User, Authorized Medical Physicist, or Authorized Nuclear Pharmacist identified on the licensee's license**

- a. Provide license number.
- b. Use the table in section 3.c. to describe training in radiation safety, regulatory issues, and emergency procedures for all types of medical use on the license.
- c. Skip to and complete Part II Preceptor Attestation.

**PART II – PRECEPTOR ATTESTATION**

Note: This part must be completed by the individual's preceptor. The preceptor does not have to be the supervising individual as long as the preceptor provides, directs, or verifies training and experience required. If more than one preceptor is necessary to document experience, obtain a separate preceptor statement from each.

**First Section**

Check one of the following:

**1. Board Certification**

I attest that \_\_\_\_\_ has satisfactorily completed the requirements in

Name of Proposed Radiation Safety Officer

10 CFR 35.50(a)(1)(i) and (a)(1)(ii); or 35.50 (a)(2)(i) and (a)(2)(ii); or 35.50(c)(1).

**OR**

**2. Structured Educational Program for Proposed Radiation Safety Officers**

I attest that Danny L. Davis, CNMT has satisfactorily completed a structural educational

Name of Proposed Radiation Safety Officer

program consisting of both 200 hours of classroom and laboratory training and one year of full-time radiation safety experience as required by 10 CFR 35.50(b)(1).

**OR**

RADIATION SAFETY OFFICER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)

Preceptor Attestation (continued)

First Section (continued)

Check one of the following:

3. Additional Authorization as Radiation Safety Officer

I attest that \_\_\_\_\_ is an  
Name of Proposed Radiation Safety Officer

- Authorized User
- Authorized Nuclear Pharmacist
- Authorized Medical Physicist

identified on the Licensees license and has experience with the radiation safety aspects of similar type of use of byproduct material for which the individual has Radiation Safety Officer responsibilities

AND

Second Section

Complete for all (check all that apply):

I attest that Danny L. Davis, CNMT has training in the radiation safety, regulatory issues, and  
Name of Proposed Radiation Safety Officer

emergency procedures for the following types of use:

- 35.100
- 35.200
- 35.300 oral administration of less than or equal to 33 millicuries of sodium iodide I-131, for which a written directive is required
- 35.300 oral administration of greater than 33 millicuries of sodium iodide I-131
- 35.300 parenteral administration of any beta-emitter, or a photon-emitting radionuclide with a photon energy less than 150 keV for which a written directive is required
- 35.300 parenteral administration of any other radionuclide for which a written directive is required
- 35.400
- 35.500
- 35.600 remote afterloader units
- 35.600 teletherapy units
- 35.600 gamma stereotactic radiosurgery units
- 35.1000 emerging technologies, including:  
F18 - FDG  
TL201

**RADIATION SAFETY OFFICER TRAINING AND EXPERIENCE AND PRECEPTOR ATTESTATION (continued)**

**AND**

**Third Section  
Complete for ALL**

I attest that Danny L. Davis, CNMT has achieved a level of radiation safety knowledge  
Name of Proposed Radiation Safety Officer  
sufficient to function independently as a Radiation Safety Officer for a medical use licensee.

**Fourth Section  
Complete the following for Preceptor Attestation and signature**

I am the Radiation Safety Officer for Teton Nuclear Medicine Service  
Name of Facility

License/Permit Number: 11-27404-01

Name of Preceptor	Signature	Telephone Number	Date
Miguel P. Garcia, RSO	<i>Miguel P. Garcia</i>	208-525-3201	01 Nov 07

DEC 10 2007

DATE

This is to acknowledge the receipt of your letter/application dated 11-20-07, and to inform you that the initial processing, which includes an administrative review, has been performed.

There were no administrative omissions. Your application will be assigned to a technical reviewer. Please note that the technical review may identify additional omissions or require additional information.

Please provide to this office within 30 days of your receipt of this card:

---

The action you requested is normally processed within 90 days.

A copy of your action has been forwarded to our License Fee & Accounts Receivable Branch, who will contact you separately if there is a fee issue involved.

Your action has been assigned **Mail Control Number** 471574.  
When calling to inquire about this action, please refer to this mail control number.  
You may call me at 817-860-8103.

Sincerely,  
  
Licensing Assistant

## ACCEPTANCE REVIEW MEMO (ARM)

**Licensee:** Miguel P. Garcia, dba Teton  
Nuclear Medicine Service

**License No.:** 11-27404-01

**Docket No.:** 030-32428

**Mail Control No.:** 471574

**Type of Action:** Amend

**Date of Requested Action:** 11-20-07

**Reviewer Assigned:**

**ARM reviewer(s):** Torres

Response	Deficiencies Noted During Acceptance Review
	<ul style="list-style-type: none"> <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> </ul>

**Reviewer's Initials:** \_\_\_\_\_

**Date:** \_\_\_\_\_

- Yes  No      Unrestricted release Group 2 or >: Transfer memo to FCDB within 10 days.
- Yes  No      Decommissioning notification should be completed within 30 days.
- Yes  No      Termination request < 90 days from date of expiration
- Yes  No      Expedite (medical emergency, no RSO, location of use/storage not on license, RAM in possession not on license, other) *REQUESTED Δ of RSO*
- Yes  No      TAR needed to complete action.

**Branch Chief's and/or Sr. HP's Initials:** *RTT*

**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 Sr. HP's Initials:** *RTT*

**Date:** DEC -7 2007

## Pre-Licensing Screening

### Applicant Information:

Control No. 471574

Name: Miguel P. Garcia, dba Teton Nuclear Medicine Service	Type of Request: Amend Program Code(s): 02201
Location: ID	License No.: 11-27404-01      Docket No.: 030-32428

### STEP 1—Radioactive Materials and Quantities Requested:

<b>Instructions for Step 1: Complete Step 1 for all applications.</b> If all your responses in Step 1 are "No" then do not complete Step 2 (Screening Criteria). Sign and date the completed step-sheet and add it as the sensitive and non-publicly available OAR in ADAMS. If a "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.	Yes or No
A. The request is from a new applicant.	No
B. 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 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.	No
C. The applicant requested certain radionuclides and quantities that equal or exceed the Risk Significant Quantity (TBq) values in the table, below, that have been "highlighted" by the reviewer	No

### Table of Risk Significant Quantities

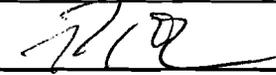
(Category 2 Quantities, IAEA Safety Guide No. RS-G-1.9, Categorization of Radioactive Sources, August 2005)

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	8.1	Se-75	2	54
Cs-137	1	27	Sr-90 (Y-90)	10	270
Gd-153	10	270	Tm-170	200	5,400
Ir-192	0.8	22	Yb-169	3	81

<sup>1</sup> The primary values are TBq. The curie (Ci) values are for informational purposes only.  
<sup>2</sup> 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. <b>NOTE—If an amendment of an existing license is being requested, the calculations will include the previously authorized quantities for the radionuclide(s).</b>	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	—
Unity Rule—multiple 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.	—

### Signature and Date for Step 1:

  
 \_\_\_\_\_  
 License Reviewer and Date

DEC -7 2007

(FOR LFMS USE)  
INFORMATION FROM LTS

BETWEEN:

License Fee Management Branch, ARM  
and  
Regional Licensing Sections

: Program Code: 02201  
: Status Code: 0  
: Fee Category: 7C  
: Exp. Date: 20120131  
: Fee Comments:  
: Decom Fin Assur Reqd: N  
:.....

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED

Applicant/Licensee: MIGUEL P. GARCIA  
Received Date: 20071126  
Docket No: 3032428  
Control No.: 471574  
License No.: 11-27404-01  
Action Type: Amendment

2. FEE ATTACHED

Amount: \_\_\_\_\_  
Check No.: \_\_\_\_\_

3. COMMENTS

Signed *Colleen Murnahan*  
Date 11-29-07

B. LICENSE FEE MANAGEMENT BRANCH (Check when milestone 03 is entered /\_/)

1. Fee Category and Amount: \_\_\_\_\_

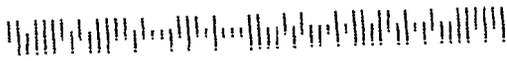
2. Correct Fee Paid. Application may be processed for:

Amendment \_\_\_\_\_  
Renewal \_\_\_\_\_  
License \_\_\_\_\_

3. OTHER \_\_\_\_\_  
\_\_\_\_\_

Signed \_\_\_\_\_  
Date \_\_\_\_\_

Migo



Teton Nuclear Medicine Service  
2001 S. Woodruff, Suite 20  
Idaho Falls, ID 83404-6370

Nuclear Regul  
Attn: Jacquelyn  
Region IV  
611 Ryan  
Arlington



Medicine Service  
Office, Suite 20  
83404-6370

US POSTAGE

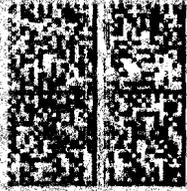
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\$1.140

11/20/2007

Mailed From 83404



RECEIVED  
NOV 26 2007  
DNMS

Nuclear Regulatory Commission

Attn: Jacqueline D. Cook, Senior Health Phys.

Region IV

Gill Ryan Plaza Drive, suite 400

Arlington, TEXAS

76011