



Detroit Medical Center
Wayne State University

Health Care Centers

Detroit
22341 W. 8 Mile Rd.
Detroit, MI 48219
313-592-3500 Phone

Novi
41935 W. 12 Mile Rd.
Novi, MI 48377
248-347-8000 Phone

March 25, 2003

United States Nuclear Regulatory Commission
Region III, Materials Licensing
801 Warrenville Road
Lisle, IL 60532-4351

**RE: Discontinuation of NRC License No. 21-13255-01, DMC Health Care Centers,
also formerly known DMC Physicians Group**

Dear Sir/Madam:

As of April 1, 2003, DMC Health Care Centers will cease to exist and therefore will no longer provide nuclear medicine services. Huron Valley Sinai Hospital has agreed to take over the nuclear medicine department at 41935 W. Twelve Mile Road and Sinai/Grace Hospital has agreed to take over the nuclear medicine department at 22341 W. Eight Mile Road. The amendment requests as well as the change of ownership agreement form Huron Valley Sinai Hospital and Sinai/Grace Hospital are enclosed. Also enclosed is a check #317485 for the last six months of our NRC Annual Materials Fee and a late fee.

Please expedite this request so that there will be no interruption of services at these locations and so DMC Health Care Centers does not have to pay for the next 6 months Annual Materials Fee since their license is being discontinued.

If you have any questions or require additional information please contact our physics consultant, Dawn Edwards at 734-662-3197.

Sincerely,

Carolyn Zolnoski

Carolyn Zolnoski
Radiology Manager
DMC Health Care Centers

A/95

RECEIVED

MAR 25 2003

REGION III

www.dmc.org

Children's Hospital of Michigan • Detroit Receiving Hospital and University Health Center • DMC Physician Group •
DMC University Laboratories • Harper Hospital • Huron Valley-Sinai Hospital • Hutzel Hospital • Karmanos Cancer Institute •
Kresge Eye Institute • Rehabilitation Institute of Michigan • Sinai-Grace Hospital

311788

(FOR LFMS USE)
INFORMATION FROM LTS

BETWEEN:

License Fee Management Branch, ARM
and
Regional Licensing Sections

Program Code: 02120
Status Code: 0
Fee Category: 7C
Exp. Date: 20100930
Fee Comments:
Decom Fin Assur Reqd: N

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED

Applicant/Licensee: DMC HEALTH CARE CENTERS
Received Date: 20030325
Docket No: 3002149
Control No.: 311788
License No.: 21-13255-01
Action Type: Termination

2. FEE ATTACHED

Amount: 0
Check No.: 0

3. COMMENTS

Signed D.A. Hersey
Date 3-27-2013

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 _____