

# ACCEPTANCE REVIEW MEMO (ARM)

Licensee: Memorial Hosp of Sweetwater  
County

License No.: 49-17940-01

Docket No.: 030-13672

Mail Control No.: 472041

Type of Action: Notify

Date of Requested Action: 11-07-2008

Reviewer  
Assigned:

ARM reviewer(s): J. Cook

*Amendment*  
*RITC 12/15/08*

Response	Deficiencies Noted During Acceptance Review
	<ul style="list-style-type: none"><li>[ ] Open ended possession limits. Submit inventory. Limit possession.</li><li>[ ] Submit copies of latest leak test results.</li><li>[ ] Add IC L.C./Fingerprint LC, add SUNSI markings to license.</li><li>[ ] Confirm with licensee if they have NARM material.</li></ul>

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

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

- ☐ Yes ☐ No Request for unrestricted release Group 2 or >. Consult with Bravo Branch.
- ☐ 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)
- ☐ 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 Sensitive and Non-Publicly Available 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 [suite #, bldg. #, location different from mailing address] (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: \_\_\_\_\_ Date: DEC 12 2008

*RITC 12/15/08*

Memorial Hospital of Sweetwater County  
1200 College Dr.  
Rock Springs, WY 82901

Nov. 7, 2008

RECEIVED  
NOV 17 2008  
DNMS

NRC:

Please remove David A. Peterson, M.D. as an authorized user from license # 49-17940-01 . He will no longer be reading Nuclear Medicine procedures at this facility.

Please amend our license to update this change.

If you have any questions please contact Keith at 307-352-8387 . Thanks.

Keith Carnahan RSO

**MATERIALS LICENSE  
SUPPLEMENTARY SHEET**

License Number

49-17940-01

Docket or Reference Number

030-13672

Amendment No. 15

**CONDITIONS**

10. Licensed material may be used or stored only at the licensee's facilities located at 1200 College Drive, Rock Springs, Wyoming.
11. The Radiation Safety Officer for this license is Keith Carnahan.
12. Licensed material is only authorized for use by, or under the supervision of:
- A. Individuals permitted to work as an authorized user, authorized nuclear pharmacist, and/or authorized medical physicist in accordance with 10 CFR 35.13 and 35.14.
  - B. The following individuals are authorized users for medical use:
- | <u>Authorized User</u>  | <u>Material and Use</u>  |
|-------------------------|--|
| Frederick Matti, M.D.   | 35.100; 35.200; 31.11; oral administration of sodium iodide I-131 in quantities less than or equal to 33 millicuries; gadolinium-153 |
| David A. Peterson, M.D. | 35.100; 35.200   |
13. In addition to the possession limits in Item 8, the licensee shall further restrict the possession of licensed material to quantities below the minimum limit specified in 10 CFR 30.35(d) for establishing decommissioning financial assurance.
14. For sealed sources not associated with 10 CFR Part 35 use, the following conditions apply:
- A. Sealed sources shall be tested for leakage and/or contamination at intervals not to exceed the intervals specified in the certificate of registration issued by the U.S. Nuclear Regulatory Commission under 10 CFR 32.210 or under equivalent regulations of an Agreement State.
  - B. Notwithstanding Paragraph A of this Condition, sealed sources designed to primarily emit alpha particles shall be tested for leakage and/or contamination at intervals not to exceed 3 months.
  - C. In the absence of a certificate from a transferor indicating that a leak test has been made within the intervals specified in the certificate of registration issued by the U.S. Nuclear Regulatory Commission under 10 CFR 32.210 or under equivalent regulations of an Agreement State, prior to the transfer, a sealed source received from another person shall not be put into use until tested and the test results received.
  - D. Sealed sources need not be leak tested if they contain only hydrogen-3; or they contain only a radioactive gas; or the half-life of the isotope is 30 days or less; or they contain not more than 100 microcuries of beta and/or gamma emitting material or not more than 10 microcuries of alpha emitting material.

*RT*

Memorial Hospital of Sweetwater County  
1200 College Drive  
Rock Springs, WY 82901

Dec. 15, 2008

License Number 49-17940-01

Mr. Torres,

Please accept the following request to amend license Number 49-17940-01:

1. Please add under 7. E. an authorization to use North American Scientific Model 8412 Gadolinium-153 sealed source. Not to exceed 300 millicuries per source and 1 curie total.

If you have any questions, please call me at 307-352-8387. Thank you.

Keith Carnahan RT N



Radiation Safety Officer

**RECEIVED**

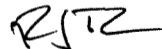
DEC 15 2008

**DNMS**

CA-0406-S-204-S 1/26/04

NES 8412 Isotope Products Laboratories (IPL)

IPL bought North American Scientific according to IPL representative during 12-15-08 phone call.



12-15-08

(FOR LFMS USE)  
INFORMATION FROM LTS  
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License Fee Management Branch, ARM  
and  
Regional Licensing Sections

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Program Code: 02120
Status Code: 0
Fee Category: 7C
Exp. Date: 20140630
Fee Comments: CODE 13
Decom Fin Assur Req'd: N
.....

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LICENSE FEE TRANSMITTAL

### A. REGION

1. APPLICATION ATTACHED  
Applicant/Licensee: MEMORIAL HOSP OF SWEETWATER COUNTY  
Received Date: 20081117  
Docket No: 3013672  
Control No.: 472041  
License No.: 49-17940-01  
Action Type: Notifications

2. FEE ATTACHED  
Amount: \_\_\_\_\_  
Check No.: \_\_\_\_\_

Signed \_\_\_\_\_  
Date 12-09-08

### 3. COMMENTS

- 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 \_\_\_\_\_