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JUL 31 2009

DNMS

July 17, 2009

Via FAX 1.817.860.8263

U.S. Nuclear Regulatory Commission, Region IV
Nuclear Materials Safety Branch B
Attn: Jacqueline D. Cook
612 E. Lamar Blvd., Suite #400
Arlington, TX 76011-4125

Dear Ms. Cook:

We would like to request an expedited amendment to our NRC Materials License #40-12378-01 (docket #030-03249) to add Mr. Jeff Masten, M.S. to our Authorized Medical Physicist (AMP) list for uses of Iridium-192 in the Nucletron MicroSelectron-HDR unit (model 105.999) and for Strontium-90 used in intravascular brachytherapy devices. This expedited amendment could be attached to our open amendment request, Mail Control Number 472284. Mr. Masten is currently listed on NRC License #40-000238-04 as an Authorized Medical Physicist. Mr. Masten was listed as an AMP on our NRC license through Amendment #68 for exactly the same uses requested in this amendment. We request addition of Mr. Masten as an experienced individual who meets the requirements of 10CFR35.51(a) and 35.51(c) and 35.59 for an experienced AMP. Mr. Masten is certified by the American Board of Radiology in Therapeutic Radiological Physics. A copy of his "AMP eligible" certificate is attached.

We request the following addition to our NRC license:

listed on 40-27480-01

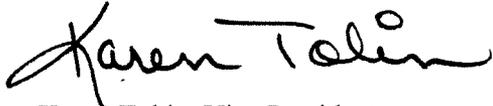
Individual	Authorization	Authorized Uses	Basis
Jeffrey P. Masten, M.S.	Authorized Medical Physicist	35.600 only iridium-192 for uses in a High Dose Rate Afterloader Unit; 35.1000 only strontium-90 for intravascular brachytherapy uses.	An experienced AMP, listed for comparable uses on other NRC licenses; has been listed for the requested uses as late as Amendment #68 to this license.

We also request addition of unsealed fluorine-18 sources for check, reference, and calibration sources under 10CFR35.65(c) with a possession limit for such sources of 50 millicuries. These sources are to be used for check, reference and calibration of a PET/CT scanner, dose calibrators, survey meters and associated counting instruments at the licensee's locations of use. These non-medical fluorine-18 sources are to be used under the supervision of the Radiation Safety Officer or the following three Authorized Medical Physicists: Richard J. Massoth, Ph.D.; Christina Plies-Osmer, M.S.; and, Jeffrey P. Masten, M.S.. The following items are requested:

Item 6	Item 7	Item 8	Item 9	Authorized Individuals
Fluorine-18	Any	50 millicuries	For check, calibration and reference use with a PET/CT scanner, dose calibrators, survey meters, and associated counting instruments.	Fred C. Lovrien, M.D. – RSO; Richard J. Massoth, Ph.D. – AMP; Christina Plies-Osmer, M.S. – AMP; Jeffrey P. Masten, M.S. – AMP.

Thank you for your kind and prompt attention to this matter. We request telephone, email or fax confirmation that Mr. Masten will be added as an Authorized Medical Physicist. Do not hesitate to contact me if there are any questions at 605-328-2959.

Sincerely,

A handwritten signature in black ink that reads "Karen Tobin". The signature is written in a cursive style with a large, prominent "K" and "T".

Karen Tobin, Vice President
Heart & Vascular Center of Excellence
Management Representative to the Radiation Safety Committee

Attachments: (1) ABR certificate for Jeffrey P. Masten, M.S.

The American Board of Radiology

*Organized through the cooperation of the
American College of Radiology, the American Roentgen Ray Society,
the American Radium Society, the Radiological Society of North America,
the Section on Radiology of the American Medical Association,
the American Society for Therapeutic Radiology and Oncology, the Association of
University Radiologists, and American Association of Physicists in Medicine*

Hereby certifies that

Jeffrey Paul Masten, MS

*Has pursued an accepted course of graduate study
and clinical work, has met certain standards and qualifications and
has passed the examinations conducted under the authority of*

The American Board of Radiology

On this second day of June, 2008

*Thereby demonstrating to the satisfaction of the Board
that he is qualified to practice the specialty of*

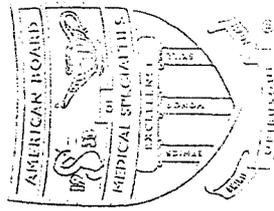
Therapeutic Radiologic Physics

W. Reed Spinnick, MS
President

Richard A. Moran
Secretary-Treasurer

Hayden Schultz
Executive Director

AAP Eligible



Certificate No. 472347

Valid through 2018



1305 W 18TH ST
PO BOX 5039
SIOUX FALLS SD 57117-5039
Phone: (605) 333-1000
www.sanfordhealth.org

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Attn: Jacqueline D. Cook
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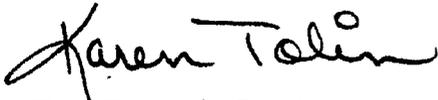
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Sincerely,



Karen Tobin, Vice President
Heart & Vascular Center of Excellence
Management Representative to the Radiation Safety Committee

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On this second day of June, 2008

Thereby demonstrating to the satisfaction of the Board that he is qualified to practice the speciality of

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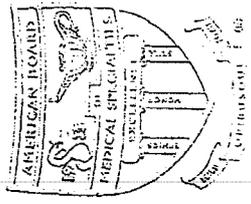


Certificate No. #3472

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Valid through 2018



Sanford USD Medical Center

Facsimile Transmittal Cover Sheet

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To: *Jacqueline D. Cook*

From: Sanford Medical Center
1305 West 18th PO Box 5039
Sioux Falls, South Dakota 57117-5039
Fax No. 605-333-1531 Phone No. 605-333-6581

Total Pages Transmitted: 4

Original documents sent certified mail as well. Nancy

CONFIDENTIALITY NOTE

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If you have any problems receiving this facsimile transmission, please call Nancy Anderson at 605-333-6581.



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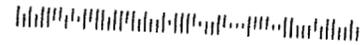
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U.S. Nuclear Regulatory Commission
Region IV
Nuclear Materials Safety Branch B
Attn: Jacqueline D. Cook
612 E. Lamar Blvd., Suite #400
Arlington, TX

76011-4125



ACCEPTANCE REVIEW MEMO (ARM)

Licensee: Sanford USD Medical Center **License No.:** 40-12378-01
Docket No.: 030-03249 **Mail Control No.:** 472347
Type of Action: Amend **Date of Requested Action:** 7/17/09
Reviewer Assigned: **ARM reviewer(s):** Torres

Response	Deficiencies Noted During Acceptance Review
	<input type="checkbox"/> Open ended possession limits. Submit inventory. Limit possession. <input type="checkbox"/> Submit copies of latest leak test results. <input type="checkbox"/> Add IC L.C./Fingerprint LC, add SUNSI markings to license. <input type="checkbox"/> Confirm with licensee if they have NARM material.

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: RTZ **Date:** AUG - 5 2009