



# St. James Healthcare

Sisters of Charity of Leavenworth Health System  
January 4, 2010

RECEIVED  
JAN 14 2010  
DNMS

United States Nuclear Regulatory Commission  
611 Ryan Drive, Suite 400  
Arlington, TX 76011-8064

LicenseNumber:25-13173-02

Gentlemen:

St James Healthcare requests an amendment to its byproduct materials license to include sealed sources identified in CFR 35.400 to include palladium-103, iodine-125 and strontium-90. The sealed sources are manufactured by Theragenics. Two source types are requested I-125 (Model 125.S06) and Pd-103 (Model 200). Source types are sold under trade mark and registered names as TheraStrand, TheraLoad and TheraSleeve. As a condition of possession of these sources St. James Healthcare agrees to follow Appendix O and P for ordering, receipt and opening the package containing these materials, require a written directive prior to the administration, return unused sources to the manufacturer and conduct radiation protection surveys following their administration. The radiation surveys shall include but not be limited to: OR room utilized for the implant; recovery room used by the patient prior to their release.

St. James Healthcare requests licensure for possessing a Sr-90 eye applicator manufactured by Isotope Products Laboratories Therapy Source Model 4-850. Initial activity on 5/1/1987 was 125 mCi.

St. James Healthcare request the removal of the use of Iotrex material from its Byproduct Materials License. Iodine-125 labeled Iotrex procedures are no longer performed at St. James Healthcare.

If there are any questions please do not hesitate to contact me by phone (406) 788-0477 or e-mail [rodwimmer@lycos.com](mailto:rodwimmer@lycos.com).

Sincerely,

Rod Wimmer Ph.D.  
RSO St. James Healthcare.



FEB -9 2010

DATE

This is to acknowledge the receipt of your letter/application dated 1-13-2010, 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:

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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** 472556.  
When calling to inquire about this action, please refer to this mail control number.  
You may call me at 817-860-8103.

Sincerely,

*Colleen Murnahan*

Licensing Assistant

BETWEEN:  
License Fee Management Branch, ARM  
and  
Regional Licensing Sections

: (FOR LFMS USE)  
: INFORMATION FROM LTS  
: -----  
: Program Code: 02240  
: Status Code: 0  
: Fee Category: 7C  
: Exp. Date: 20130831  
: Fee Comments: CODE 21  
: Decom Fin Assur Req: N  
: .....

LICENSE FEE TRANSMITTAL

A. REGION

1. APPLICATION ATTACHED  
Applicant/Licensee: ST. JAMES HEALTHCARE  
Received Date: 20100113  
Docket No: 3012143  
Control No.: 472556  
License No.: 25-13173-02  
Action Type: Amendment

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

3. COMMENTS

Signed Colleen Murnahan  
Date 2-04-10

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 \_\_\_\_\_

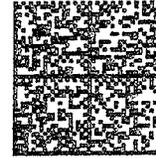
Signed \_\_\_\_\_  
Date \_\_\_\_\_



St. James Healthcare

*Cancer Care*

400 South Clark Street, Butte, MT 59701



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MAILED FROM ZIP CODE 59701

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