From: Gabriel, Sandra
Sent: Friday, October 01, 2010 6:04 PM
To: mohammad.malik@kp.org
Subject: Additional information for NRC license application, mail control 573471

Licensee: Kaiser Permanente
License Number (future): 19-31420-01
Docket Number: 03038361
Mail Control: 573471

To: Mohammad Malik, Regional Director for Imaging Services

Please provide the following additional information regarding your request for a new NRC license:

1) Regarding your proposed facility:

   a) Clarify the name of this building, which is described in the cover letter as "Capital Hill Medical Center," on drawings as "Capitol Hill Medical Center," in the shielding report as "Capitol Hill Medical Office Building."

   b) Confirm that the proposed licensed facility is on the concourse (e.g., ground) level.

   c) Confirm that the facility shielding will be constructed in accordance with the recommendations in the submitted shielding report, and that you will inform us if you identify any post-construction deviations.

   d) Provide a larger scale drawing of the Nuclear Medicine and PET/CT suite, including details of shielding and the layout of the hot lab. Confirm that the "Shielding/Handling Equipment" in Item 9 of your application for PET/CT use will provide sufficient attenuation for use with high energy PET photons.

   e) Item 9.1 of your application stated that there is "no occupancy above or below the Department." From my site visit and our discussion today, my understanding is that there is a parking garage below the Department. The submitted shielding calculations list a parking garage below and "various (lobby, info, etc.)" above the PET/CT scanner room, and conclude that the concrete construction materials will provide adequate shielding for these areas. Please correct the statement in Item 9.1.

2) Item 9.4 of your application described procedures for dose calibrator calibration and linearity procedures. Please note that current NRC regulations do not include prescriptive requirements for dose calibrator testing. In order to provide you with more flexibility, please consider withdrawing Item 9.4 and substituting the following standard statement from NRC licensing guidance in NUREG-1556, Vol. 9, Rev. 2: "Equipment used to measure dosages will be calibrated in accordance with nationally recognized standards or the manufacturer's instructions."

3) Please note that your application included several procedures were not required to be submitted, for example the training program and procedures for leak testing of sealed

sources. These procedures were not reviewed and will not be considered part of your license. No response to this item is necessary.

4) The NRC maintains a database of contact information for each licensee's Radiation Safety Officer. Please provide contact information for Dr. Cardinale, including a daytime telephone number, fax number, and e-mail address.

Please provide a written response to these items signed by Judy Brittain. You may provide this to my attention by letter, fax (610-337-5269), or e-mail of a scanned signed copy, referencing mail control 573471. If we do not receive a reply within 30 days, we shall assume that you do not wish to pursue your application.

Please contact me by telephone or e-mail with any questions. I will be in the office daily from Monday, October 4 through Thursday, October 7, then away until October 21. We should be able to issue the license shortly after receiving the information requested above.

Sandy Gabriel, Ph.D.
Senior Health Physicist
Medical Branch
NRC Region I
610-337-5182 (voice)
610-337-5269 (fax)

E-mail Properties

Mail Envelope Properties ()

Subject: Additional information for NRC license application, mail control 573471
Sent Date: 10/1/2010 3:57:46 PM
Received Date: 10/1/2010 6:04:00 PM
From: Gabriel, Sandra

Created By: Sandra.Gabriel@nrc.gov

Recipients:
mohammad.malik@kp.org (mohammad.malik@kp.org)
Tracking Status: None

Post Office:

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MESSAGE	18736	10/1/2010

Options
Expiration Date:
Priority: olImportanceNormal
ReplyRequested: False

Return Notification: False

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