TELECON & FAX TRANSMITTAL

WIICNIDC		TO:	<u>File</u> .	
♥U.S.NRC		OOMDANY.	N/A and balance	
United States Nuclear Regulatory Commission Protecting People and the Environment		COMPANY:	N/A, see below .	
NUCLEAR REGULATORY COMMISS	ION			
REGION III		# PAGES: I	N/A_TEL.: N/A	
2443 WARRENVILLE ROAD				
LISLE, ILLINOIS 60532-4351		FAX #:	<u>N/A</u>	
(630) 829-9892 FAX: (630) 515-107	<u>8</u>			
CONVERSATION RECORD		TIME	DATE	
			6/1/2011 & 6/3/2011	
NAME OF PERSON(S) CONTACTED	TELEPHONE NO.	ORGANIZATIO		
Marcia West REPRESENTED PERSON or PERSONS	(816) 807-8090	external Heal		
Patrick M. O'Toole, M.D., Radiation Safety Officer		St. Joseph Health Center		
SUBJECT SUBJECT	nety Officer	Ot. BOSCPHTIN	Danif Comer	
License No.: 24-02704-01		Control No.: 575100		
SUMMARY		ndo was awa san m		
We have conducted a preliminary review	ew your license ame	endment reque	st and find that we are unable to	
continue this action until we have rece				
1. The preceptor information on the NRC Form 313A form does not meet the requirements for				
adding Dr. Chopra as an Authorized User. Please submit either a verification that the				
preceptor listed on the initial form, dated May 2, 2011, is authorized under the Broadscope				
license listed, or a new Fo	rm 313A, correctly c	ompleted and	signed by a preceptor at the St.	
Joseph facility.				
			not be possible to submit the	
			mendment will reflect only the	
request dated April 6, 2011; the May 2, 2011 request will be addressed at a later date.				
(No.60)				
	6.0	0,007		

We have not requested that you submit any additional items at this time. No further action is required. Should you wish to submit any additional information, please reference the Control No. 575100, listed at the top of this memo.

Please direct any questions you have to me at (630) 829-9892 or sara forster@nrc.gov.

NAME OF PERSON DOCUMENTING CONVERSATION SIGNATURE DATE	
Sara A.B. Forster \ana OB Forster \ana O7/22/20	57 1