

**From:** Nguyen, Janice  
**Sent:** Tuesday, November 29, 2011 2:23 PM  
**To:** Gignac, Charles  
**Subject:** NRC Amendment Request Mail Control Number 576088

Hospital of St. Raphael  
Mail Control Number 576088  
License Number 06-00200-03  
Docket Number 030-01238

Dear Mr. Gignac,

This is regarding the amendment request for the Hospital of St. Raphael received September 28, 2011 to add Dr. Christin Knowlton as an authorized user. The following additional information is needed to allow us to continue our review of your request:

1. Please provide a letter signed by either a member of senior management or by Dr. Lydia Komarnicky (Ms. Knowlton's preceptor) confirming the following:
  - a. Please confirm that Ms. Knowlton was trained on a Nucletron device. If Ms. Knowlton was not specifically trained on a Nucletron device, please confirm that she will receive vendor training from Nucletron prior to medical use of the HDR unit at your facility.
  - b. Please confirm that the High Dose Rate procedures documented on Ms. Knowlton's casework were done on a high dose rate (HDR) remote afterloader device and please indicate where these HDR procedures were performed.
  - c. Please indicate what device the stereotactic radiosurgery was performed with (i.e. accelerator or gamma knife).

You may reply to my attention by mail to the Region I office, by fax to 610-337-5269, or by return email if the response is in a pdf format. Please reference mail control 576088 in your response.

Could you please reply to this email to confirm receipt?

Thank you for your cooperation. Please feel free to contact me by telephone or e-mail if you have any questions.

Sincerely,

*Jan Nguyen*

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