

SARA A.B. FORSTER
MATERIALS LICENSING BRANCH



TELECON & FAX TRANSMITTAL
TO: Mark Beanblossom

COMPANY: for Parkland Health Center

NUCLEAR REGULATORY COMMISSION
REGION III
2443 WARRENVILLE ROAD
LISLE, ILLINOIS 60532-4351
(630) 829-9892 FAX: (630) 515-1078

PAGES: 1 TEL.: (636) 798-2250

EMAIL: N/A

CONVERSATION RECORD

	TIME	DATE
	2:00 pm am	August 29, 2011
NAME OF PERSON(S) CONTACTED	TELEPHONE NO.	ORGANIZATION
Mark Beanblossom	(636) 798-2250	Associates in Medical Physics, LLC
REPRESENTED PERSON or PERSONS		ORGANIZATION
Kenneth L. Miller, M.D., Radiation Safety Officer		Parkland Health Center
SUBJECT		
License No.: 24-16616-01		Control No.: 575757

SUMMARY

We have reviewed your requesting license renewal application and find that we are unable to continue this action until we have received information regarding the following:

(1) From the application, it is unclear whether PET is being used at the facility. If PET is being used, additional calculations will be required to demonstrate shielding is adequate.

RESPONSE: The contact person indicated, via phone conversation on August 29, 2011, that the no PET is being used at this facility. No additional response is required.

(2) The Authorized Users listed in the application are those currently listed on another NRC Radioactive Materials License. Please clarify whether all Authorized Users are changing as indicated. If the submission was in error, please resubmit the list of Authorized Users according to those currently listed on the NRC license for Parkland Health Center, NRC License No. 24-16616-01.

RESPONSE: The contact person indicated, via phone conversation on August 29, 2011, that an updated list of Authorized Users would be submitted on or before August 30, 2011, via facsimile. The list was received via facsimile on August 30, 2011. No additional response is required.

(3) More current guidance on license renewal application contents is available, NUREG 1556, Volume 9, Revision 2. Some elements of the license application do not appear to be present. However, additional information may be requested at a later date.

RESPONSE: At this time, no additional information appears to be required. No response is required.

We have requested that you submit the referenced item--
Current list of Authorized Users for this license.

-- via facsimile, to (630) 515-1078. Please reference the Control No. 575757, as listed at the top of this memo.

For future reference, please always include the name, phone number and fax number of at least one person whom we may contact for additional information when reviewing your licensing correspondence and requests.

Please submit the requested information within 1 day of this record. Include reference control number 575757, Please FAX your response to my attention at (630) 515-1078. You may also scan your response and send to me via email, as a pdf file.

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	<i>Sara A.B. Forster</i>	08/30/2011