CONVERSATION RECORD

COLLEEN CAROL CASEY MATERIALS LICENSING BRANCH UNITED STATES NUCLEAR REGULATORY COMMISSION

REGION III 2443 WARRENVILLE ROAD STE 210 LISLE, ILLINOIS 60532-4352 OFFICE: (630)-829-9841 FAX: (630) 515-1078 EMAIL: COLLEEN.CASEY@NRC.GOV

> ITIME DATE

ACTUALLY FAXED / EMAILED? YES.

July 24, 2012

Fax No.: N/A

Email address:

Rhonda.lennon@yahoo.com

NAME OF PERSON(S) CONTACTED

ORGANIZATION

TELEPHONE NO.

Rhonda Lennon, Practice Manager for Columbus Diagnostic Imaging 812-373-2111

SUBJECT

License No.: 13-26797-01

Control No.: 576969

SUMMARY

This refers to the telephone conversation record transmitted from me to Rhonda Lennon on June 26, 2012; and to the telephone discussions and emails between Ms. Lennon and/or Will Breeden and me on various dates, including July 10, 2012, and July 11, 2012.

In addition, this refers to the letter dated July 29, 2012, with attachments including an NRC Form 314 signed July 19, 2012, transmitted via email on July 19, 2012.

We noted that your letter is dated "July 29, 2012", which appears to be a typo. Please correct the date of this letter, re-sign it and resubmit it.

The information requested below was missing from your "July 29, 2012" letter/attachments, in entirety, for materials in 10 CFR 31.11. Please provide all of the requested information for this modality.

The information below still needed for the remaining materials authorized on your license and by 10 CFR 35.65, consists of Item 2 (section underlined) and 7.e. (section underlined).

1. It is our understanding that you are trying to terminate this license.

As you know, we cannot authorize licensees to release the locations of use from licenses for unrestricted use (even by other members of their staff) until we have received and reviewed a copy of the results of decommissioning and close-out surveys for the facilities.

The final status survey must include a complete historical review of all actual licensed materials used, including sealed and unsealed sources, spills, and contamination.

2. As sealed sources were transferred as part of the close-out of this license, please provide a copy of the final leak test for each sealed source; a copy of an acknowledgment of receipt from the licensed entity who took possession of each source; and if the recipient/transferee is an Agreement State license, please include a current copy of its license that clearly shows it is licensed to receive your sources.

These references may also assist you: 10 CFR 30.41; 10 CFR 30.51; NUREG 1556 Vol. 9, Rev. 2, section 11, "Termination of Activities," and Appendix H, "NRC Form 314."

- 3. Your complete historical review should specify when and where all licensed materials, including materials in 10 CFR 31.11, were used, when the last use was for each authorized modality and how, when and by whom were the materials disposed of (shipped off site, decayed -in-storage, sanitary sewer disposal, etc.) or transferred.
- 4. Please respond by stating exactly which licensed materials were used at this location historically and please submit final status survey information covering those radioactive materials.
- 5. The final status survey should consist of exposure rate measurements to show that all sources of radioactive material have been removed, and contamination checks of areas where radioactive materials were used or stored. Radiation levels associated with surface contamination and removable contamination should not exceed those specified in your license.
- 6. Please also refer to section 15.5.3 in NUREG 1757, Vol. 1, Rev. 1, available on our website, for additional assistance.
- 7. Please submit the following information with your close-out survey:
 - a. Diagrams of each facility with exposure rate survey and wipe test results keyed to specific locations, as appropriate.
 - b. The name of the person performing the survey.
 - c. The date the survey was performed.

- d. The instrument(s) used for exposure rate measurements and for analysis of the wipes.
- e. <u>Background readings and each instruments' efficiency or correction factor, including appropriate specific information for the radionuclide(s) used to determine efficiency.</u>
- f. The date(s) that the survey instruments were last calibrated.

The action levels for both exposure rate measurements and wipe tests. Include the identity of areas exceeding these levels, corrective actions taken and results of corrective actions taken.

8. Also, please always include the telephone number and fax number of at least one person who serves as a point of contact for all future licensing requests. It is also quite helpful to include the email address of at least one cognizant individual who can respond to our questions on your behalf.

Please ensure that a management representative signs the amendment request, in accordance with 10 CFR 35.12(a).

In accordance with 10 CFR 2.390 of the NRC's "Rules of Practice," a copy of this letter will be available electronically for public inspection in the NRC Public Document Room or from the NRC's Agencywide Documents Access and Management System (ADAMS), accessible from the NRC Web site at http://www.nrc.gov/reading-rm/adams.html.

will be available electronically for public inspection in the NRC Public Document Room or from the Publicly Available Records (PARS) component of NRC's document system (ADAMS). The NRC's document system is accessible from the NRC Web site at http://www.nrc.gov/reading-rm/adams.html (the Public Electronic Reading Room).

Please also be reminded of the provisions in 10 CFR 30.9(a), "Completeness and accuracy of information,"..."(a) Information provided to the Commission by an applicant for a license or by a licensee or information required by statute or by the Commission's regulations, orders, or license conditions to be maintained by the applicant or the licensee shall be complete and accurate in all material respects."

ACTION REQUIRED

Submit the requested information within <u>20 calendar days (by August 15, 2012)</u> by referencing control number **576969** to facilitate proper handling in our office. Please contact me if you need to make alternative response arrangements.

Upon receipt of your response we will reactivate placement of your request in our database and resume our review. Address your written response, via an appropriately dated and signed (by management) cover letter, to my attention at the above address.

PLEASE DIRECT ANY QUESTIONS YOU MAY HAVE TO ME AT 630-829-9841 or 800-522-3025, ext. 9841.

NAME	OF	PER	SON	DO	CUN	MENT	ING
NAME CONVI	ERS	ATIC	NC				//

SIGNATURE

DATE

Colleen Carol Casey

July 24, 2012