

Dennis P. O'Dowd  
Health Physicist  
MATERIALS LICENSING BRANCH

**TELECON & FAX TRANSMITTAL**

TO: Lisa Maddox, Radiology Director

COMPANY: Saint Catherine Regional Hospital



NUCLEAR REGULATORY COMMISSION  
REGION III  
2443 WARRENVILLE ROAD  
LISLE, ILLINOIS 60532-4351

# PAGES: 2 TEL.: 812-258-7677

FAX #: 812-258-7496

(630) 828-9573 FAX: (630) 515-1078  
Email: Dennis.odowd@nrc.gov

EMAIL: lmaddox@stchc.com

CONVERSATION RECORD			TIME	DATE
			10:00 a.m.	March 1, 2013
NAME OF PERSON(S) CONTACTED	TELEPHONE NO.	ORGANIZATION		
Lisa Maddox Director of Radiology	812-258-7677	Saint Catherine Regional Hospital 2200 Market Street, Charlestown, IN 47111		
SUBJECT				
License No.: 13-23685-01		Control No.: 579177		

**SUMMARY**

We have reviewed your requesting license renewal application dated September 11, 2012, and faxed letter with attachments received on December 4, 2012, 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 will be used under this license. If PET is being used, additional shielding calculations would be required to demonstrate that shielding is adequate.

**RESPONSE:** Based on our telephone conversation on March 1, 2013, PET isotopes are not being used at your facility. No additional information regarding the use of PET isotopes is required.

- (2) Under 10 CFR 35.24, a proposed licensee's management shall appoint a Radiation Safety Officer (RSO) in writing.

Per our discussion, please provide a current, signed RSO Memorandum of Understanding/Delegation of Authority, which conforms to the requirements as specified in 10 CFR 35.24(b) and 10 CFR 35.24(e).

**RESPONSE:** Based on our telephone conversation on March 1, 2013, the requested response to this item would be submitted on or before March 8, 2013 via facsimile. Upon receipt of the fax, no additional information will be required.

- (3) Your current license lists several Authorized Users (AUs). Please clarify whether these AUs are to be listed on the renewed license or only Dr. Aaron; as indicated in Item 7 of the application.

**RESPONSE:** Based on our telephone conversation on March 1, 2013, you confirmed that only Dr. Aaron is to be listed as the AU on the license. No additional response is necessary.

L. Maddox, Saint Catherine Regional Hospital, License No. 13-23665-01 p. 2 of 2

(4) The application for license renewal does not adequately respond to Item 9, as listed on NRC Form 313. Current guidance on license renewal application content is available in NUREG-1556, Volume 9, Revision 2. (<http://www.nrc.gov/reading-rm/doc-collections/nuregs/staff/er1556/v9/r2/>)

Specifically, Table C.2 of Appendix C of this document identifies information required for radioactive materials use under 10 CFR 35.100 and 10 CFR 35.200; Table C.3 of Appendix C of this document includes a checklist for information required to respond to Item 9, as listed on NRC Form 313.

In particular, the application does not address calibration of radiation monitoring instruments, and possible upgrades to the survey instruments described in the application. In addition, the listing of equipment in the original application specifies a dose calibrator, whereas the listing provided in the follow-up faxed document does not.

Please submit responses to Item 9, according to the guidance in NUREG-1556, Vol. 9, Rev. 2, relative to the calibration of survey instruments and instrument upgrades. Also, if you do utilize a dose calibrator as specified in the equipment list provided in the original application, please confirm this and provide the necessary statement regarding calibration of equipment used to measure dosages.

**RESPONSE:** Based on our telephone conversation on March 1, 2013, the requested responses to this item would be submitted on or before March 8, 2013, via facsimile. Upon receipt of the fax, no additional information will be required.

We have requested that you submit the referenced items-

- (1) RSO/management Memorandum of Understanding & Delegation of Authority
- (2) Responses to Form 313 Item 9, according to NUREG 1556 Vol. 9, Rev. 2

-via facsimile, to (830) 515-1078. Please reference the Control No. 579177, as listed at the top of this memo.

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 by the date specified above. Include reference Control No. 579177 with your response. Please FAX your response to my attention at (830) 515-1078. You may also scan your response and send to me via email, as a pdf file. The additional information should be submitted within, or as an attachment to, a letter signed by management.

Please direct any questions you have to me at (630) 829-9573 or [dennis.odowd@nrc.gov](mailto:dennis.odowd@nrc.gov)

NAME OF PERSON DOCUMENTING CONVERSATION

Dennis P. O'Dowd



SIGNATURE

DATE March 1, 2013

**NRC Application for Renewal**

- 5 a. Material in 35.100, amount as needed
- b. Material in 35.200 amount as needed
- c. As needed

**6. Medical Use**

7. Jannice Aaron M.D., RSO Authorized User, License #13-23665.01

Ron Kohls NMTCB, NMTCB Certificate # 02867

8. Training Program: Consolidated Guidance About Materials License: Program – Specific Guidance About Medical Uses License: Item 8.32 states no response is necessary from the applicant.

**9. Facilities and Equipment:**

1. Radiation monitoring instruments will be calibrated by a person qualified to perform survey meter calibrations.

2. Radiation Monitoring Equipment:

- a. Sun Nuclear/Wipe Counter
- b. Bicron 2000 Survey Meter
- c. Capintec Dose Calibrator

2. When the Nuclear Medicine room and hot lab are not in use the rooms are locked and the key is stored in a secure location.

3. Emergency Response Equipment is located in the hot lab.

Room Diagram: Please see attached sheet.

**10. Radiation Protection Program**

Please see responses to each section listed below.

Safety Procedures and Instructions: N/A

Occupational Dose: Either we will perform a prospective evaluation demonstrating that unmonitored individuals are not likely to receive, in 1 year, a radiation dose in excess of 10% of the allowable limits in 10 CFR Part 20, or we will provide dosimetry that meets the requirements listed under 'Criteria' in NUREG-1556, Volume 9, Revision 1, 'Consolidated Guidance About Materials Licenses: Program-Specific Guidance About Medical Use License'

**Area Surveys:** We have developed and will implement and maintain written procedures for area surveys in accordance with 10 CFR 20.1101 that meet the requirements of 10 CFR 20.1501 and 10 CFR 35.70.

**Safe Use of Unsealed Licensed Material:** We have developed and will implement and maintain procedures for safe use of unsealed byproduct material that meet the requirements of 10 CFR 20.1101 and 10 CFR 20.1301

**Spill/Contamination Procedures:** We have developed and will implement and maintain written procedures for safe response to spills of licensed material in accordance with 10 CFR 20.1101

**Installation, Maintenance, Adjustment, Repair and Inspection of Therapy Devices Containing Sealed Sources:** N/A

**Minimization of Contamination:** N

11. **Waste Management:** We have developed and will implement and maintain written disposal procedures for licensed material, in accordance with 10 CFR 20.1101, those also meet the requirements of the applicable section of Subpart K to 10 CFR Part 20 and of 10 CFR 35.92



December 3, 2012

Mr. Dennis O'Dowd  
Health Physicist, Materials Licensing Branch  
Nuclear Regulatory Commission  
Region III  
Division of Nuclear Materials Safety  
2443 Warrenville Road, Suite 210  
Lisle, Illinois 60532-4352

Dear Mr. O'Dowd:

Dr. Jannice Aaron has the authority from me, Merlyn Knapp, President and CEO Saint Catherine Regional Hospital, to sign the NRC 313 form for renewal of the NRC license. She is the authorized Radiation Safety Officer for Saint Catherine Regional Hospital Nuclear Medicine Department.

Respectfully,

A handwritten signature in cursive script that reads "Merlyn Knapp".

Merlyn Knapp  
President and CEO

MK/ifi