

March 11, 2013

United States Nuclear Regulatory Commission  
c/o Dennis P. O'Dowd  
Region III, Materials Licensing  
2443 Warrenville Road Suite 210  
Lisle, IL 60532-4352

RE: **Control Number 579316**  
Additional information for License Renewal  
**NRC License No. 21-20242-01**  
**Facility Name Aspirus Keweenaw Hospital**

Dear Mr. O'Dowd:


The purpose of this letter is to follow up with you on the two missing items you called about last week.

**Item #1.** Please find attached a recent letter of Understanding for my RSO duties.

**Item #2.** Please correct my application Item 6.C to indicate "For in vitro purposes only".

Thank you for your help on this renewal. If you have any questions or require additional information, please contact me anytime.

Sincerely,



Gregg Fisher, CNMT, RT(N)  
Radiation Safety Officer

March 11, 2013

Gregg A. Fisher CNMT, RT(N), EMT  
Radiation Safety Officer  
Keweenaw Memorial Medical Center  
205 Osceola Street  
Laurium MI 49913

Re: Radiation Safety Officer / Executive Management  
Letter of Understanding

Dear Mr. Fisher:

You have been appointed the Radiation Safety Officer (RSO) of this facility for our United States Nuclear Regulatory Commission Materials License. This "Letter of Understanding" is prepared to comply with Title 10 Code of Federal Regulations (CFR) Part 35.24(b). This section of the regulations requires that you agree in writing to the following:

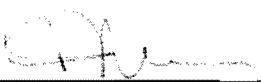
- Assume responsibility for implementing the Radiation Protection Program
- Ensure that radiation safety activities are being performed in accordance with our own approved procedures and all regulatory requirements.

Furthermore, in compliance with 10 CFR 35.24(e),(g), the executive management of this facility agrees to provide you as RSO:

- Specific written notation of your authority, duties and responsibilities, see attached.
- Sufficient authority, organizational freedom, time, resources and management prerogative to:
  1. Identify radiation safety problems;
  2. Initiate, recommend, or provide corrective actions;
  3. Stop unsafe operations; and,
  4. Verify implementation of corrective actions.

Our signatures noted below will attest to the issues noted above. Please make a copy of this document for your files and return the original to my attention.

Sincerely,

  
\_\_\_\_\_  
Executive Management  
\_\_\_\_\_  
Radiation Safety Officer

Dennis P. O'Dowd  
Health Physicist  
MATERIALS LICENSING BRANCH



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

(630) 829-9573 FAX: (630) 515-1078  
Email: [Dennis.odowd@nrc.gov](mailto:Dennis.odowd@nrc.gov)

## TELECON &amp; FAX TRANSMITTAL

TO: Gregg A. Fisher, RSOCOMPANY: Aspirus Keweenaw Hospital# PAGES: 2 TEL.: 906-337-6500FAX #: 906-337-6532

EMAIL: \_\_\_\_\_

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CONVERSATION RECORD

	TIME	DATE
	10:00 a.m.	March 6, 2013
NAME OF PERSON(S) CONTACTED	TELEPHONE NO.	ORGANIZATION
Gregg A. Fisher	906-337-6500	Aspirus Keweenaw Hospital
Radiation Safety Officer		205 Osceola Street, Laurium, MI 49913
SUBJECT		
License No.: 21-20242-01		Control No.: 579316

  
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## SUMMARY

We have reviewed your requesting license renewal application dated September 18, 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 6, 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 6, 2013, the requested response to this item would be submitted on or before March 22, 2013 via facsimile. Upon receipt of the fax, no additional information will be required.

- (3) Your current license lists two additional Authorized Users (AUs) that the list in your renewal application indicates. Please confirm that Drs. Wake and Lee are no longer to be listed on the license.

**RESPONSE:** Based on our telephone conversation on March 6, 2013, you confirmed that only the names of the AUs indicated are to be listed on the license. No additional response is necessary.

Gregg A. Fisher  
Aspirus Keweenaw Hospital  
License No. 21-20242-01

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- (4) Item 6.C of the application indicates 35.300 materials and uses. However, Item 5.C as well as the authorizations for the AUs listed in Item 7 indicate that it is not your intention to request 35.300 materials and uses. Please confirm that Item 6.C should read: For in vitro purposes only.

**RESPONSE: Based on our telephone conversation on March 6, 2013, the requested responses to this item would be submitted on or before March 22, 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) Clarification that Item 6.C pertains to in vitro uses of materials listed in Item 5.C of the renewal application.

-via facsimile, to (630) 515-1078. Please reference the Control No. 579316, 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. 579316 with your response. 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. 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 6, 2013.

## O'Dowd, Dennis

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**From:** Gregg Fisher <gfisher@aspiruskeweenaw.org>  
**Sent:** Monday, March 11, 2013 2:17 PM  
**To:** O'Dowd, Dennis  
**Subject:** Control 579316  
**Attachments:** Control 579316 Info.pdf

Hello Dennis,

Here is the additional information you requested for License 21-20242-01. Please let me know if you need something else.

Thanks for the help on this,

**Gregg A. Fisher, CNMT, RT(N), EMT**  
Manager, Nuclear & Molecular Imaging  
Manager, Home Medical Equipment Enterprise  
Aspirus Keweenaw Hospital & Aspirus Ontonagon Hospital  
*An ACR Accredited Facility*  
(W) (906) 337-4136  
(C) (906) 281-7491