



UNITED STATES
NUCLEAR REGULATORY COMMISSION

REGION III
2443 WARRENVILLE ROAD, SUITE 210
LISLE, ILLINOIS 60532-4352

TELEFAX TRANSMITTAL

DATE March 14, 2014

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SEND TO Piyush Pandya, Chief Nuclear Medicine Technologist, NRC License
21-11457-02, Oakwood Hospital - Annapolis Center

LOCATION Wayne, Michigan

FAX NUMBER (734) 467-2557

VERIFY BY CALLING

FROM: Bill Reichhold
(Sender)

TELEPHONE NUMBER (630) 829-9839

FAX NUMBER (630) 515-1078

If you do not receive the complete fax transmittal, please contact the sender as soon as possible at the telephone number provided above.

MESSAGE See accompanying documents.

NOTICE

This message is intended only for the use of the individual or entity to which it is addressed and may contain information that is privileged, confidential, or exempt from disclosure under applicable law. If the reader of this message is not the intended recipient or the employee responsible for delivering the message to the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. If you received this communication in error, please notify the sender immediately by telephone and return the original to the above address, by U.S. Mail. Thank You.

ADD NEW CARDIAC STRESS ROOM

The following additional information is needed to review your request to add a "new" cardiac stress room(s).

1. Please put the facility address on the facility diagram that shows the "new" cardiac stress room(s).
2. Please specify the room numbers where radionuclides will be used or stored in the "new" cardiac stress room(s). If there are no room numbers, please state so.
3. Please specify if all of the ECHO stress rooms are where radionuclides will be used or stored.
4. Please specify if you will be using any "PET" radionuclides. Please specify the location of a "quiet" room. Also please describe any additional shielding, use of remote handling devices, and confirm that you will not exceed the dose limits specified in 10 CFR 2013.01. If you are not using any "PET" radionuclides, please state so.
5. Please specify what is above (such as roof) and what is below (such as basement) the "new" cardiac stress room(s) where radionuclides are used or stored.

CLOSE-OUT SURVEY FOR OLD CARDIAC STRESS ROOM

The following additional information is needed to review your request to remove the "old" cardiac stress room as a location where radionuclides are used or stored.

1. Please submit a copy of the current leak test results for any sealed sources that were used or stored in the "old" cardiac stress room. Also, specify if you had any history of leaking sealed sources. If no sealed sources were used or stored in the "old" cardiac stress room, please state so.
2. Please confirm that all radioactive waste has been removed from the "old" cardiac stress room.

3. Please confirm that all sealed sources have been removed from the "old" cardiac stress room. OR If you never used or stored sealed sources in the "old" cardiac stress room, please state so.

Please send a facsimile (630- 515-1078) of your response to the above within 7 days and state, Response to Control 582893. Please include a cover letter on company letterhead, dated and signed (signed by an individual who is authorized to sign official documents on behalf of the licensee) with your response letter. Please call me at 630-829-9839 if you have any questions.

In accordance with 10 CFR 2.390 of the NRC's "Rules of Practice," a copy of this facsimile and the attached documents 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).

From the desk of:



Bill Reichhold