

TRANSMISSION VERIFICATION REPORT

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UNITED STATES
NUCLEAR REGULATORY COMMISSION

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

TELEFAX TRANSMITTAL

DATE March 23, 2015

NUMBER OF PAGES 2

SEND TO Blain Pierce, Radiology Manager, Sparrow Ionia Hospital, NRC
License 21-32431-01

LOCATION Ionia, Michigan

FAX NUMBER (616) 523-1555

☐ 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.



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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.

The following additional information is needed to complete the review of your request to add a new address of use at 3565 South State Road, Ionia, Michigan.

1. Please specify the room numbers where radionuclides are prepared, used or stored. If there are no room numbers, please state so.
2. Please specify if you are using "PET" radionuclides. If you do not use an "PET" radionuclides, please so.
3. If you are using "PET radionuclides, please indicate a "quiet room" on your facility diagram. Also describe any additional shielding, remote handling devices, and confirm that you will perform surveys to ensure that you will not exceed the dose limits specified in 10 CFR 20.1301.
4. If you are using "PET" radionuclides, please provide shielding calculations to show you will not exceed the dose limits specified in 10 CFR 20.1301.
5. Please indicate on the facility diagram the rooms or areas that are adjacent to the rooms or areas where radionuclides are prepared, used or stored.
6. Please specify the room numbers for the rooms or areas that are adjacent to the rooms or areas where radionuclides are prepared, used, or stored. If there are no room numbers, please state so.
7. Please specify what is above and below the rooms or areas where radionuclides are prepared, used, or stored. For example, there is a roof above and a concrete slab below the areas where radionuclides are prepared, used, or stored.

Please send a facsimile (630-515-1078) of your response to the above within 14 days and state, Response to Control 586270. 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