

From: Lanzisera, Penny
Sent: Tuesday, September 08, 2015 2:51 PM
To: ralph.sgambato@greenwichhospital.org
Subject: Request for Additional Information to support Removal of Facility

Licensee: Greenwich Hospital
License No. 06-09522-01
Docket No. 030-01276
Mail Control 588634

Mr. Sgambato,

To support your request to remove the facility previously used for HDR treatments please submit surveys performed within the treatment room to ensure no removable contamination remains. Alternatively you may submit the last leak test results for the last source returned to the manufacturer prior to moving to your new facility and confirm that no leaking HDR sources were identified when using the old treatment room. You may either submit a signed pdf via email or fax the requested information to my attention to 610-337-5269. Please respond within 30 days or we will consider that you no longer require the requested amendment.

Thank you for your assistance,

Penny Lanzisera
Senior Health Physicist
US NRC, Region I