



Kent General Hospital
640 South State Street
Dover, DE 19901
302.674.4700

Milford Memorial Hospital
21 West Clarke Avenue
Milford, DE 19963
302.422.3311

J2

REC'D 12/27/17 AM 07:50

December 19, 2017

U. S. Nuclear Regulatory Commission
Region I
2100 Renaissance Blvd, Suite 100
King of Prussia, PA 19406-2713

Re: License No. 07-14850-01 / 03002565

To Whom It May Concern,

We, Bayhealth Medical Center, License Number 07-14850-01, wish to amend our radioactive materials license to reflect the following:

- We would like to remove 1100 Forrest Avenue, Dover, De 19901 as an area of use.
 - All day to day nuclear medicine operations have ceased at the area of use location: 1100 Forrest Avenue, Dover, De 19901.
 - All sealed sources were moved to the authorized area of use: 540 S. Governors Avenue, Dover, De. 19901.
 - We would like to designate the areas of the nuclear cardiology office located at 1100 Forrest Avenue (hot lab, imaging lab, stress room 1, and stress room 2) as unrestricted for general use.
 - Please see the attached survey and wipe results.

If you have any questions regarding this amendment, please contact our radiation safety officer, Adam M. Henry at 1.866.755.2756 x703.

Regards,

Terry Murphy FACHE
President / Chief Executive Officer

602129

UNRESTRICTED MATERIALS-002

Bayhealth Cardiology - Dover, De
1100 Forrest Avenue
Dover, De 19901

CLOSE-OUT AREA WIPE

LICENSE NUMBER:

NRC: 07-14850-01

Date: 12/19/2017

INSTRUMENT USED:

WELL: Ludlum 2200 Scaler
SN: 128309

WELL EFFICIENCY (¹³⁷Cs): 30.5%

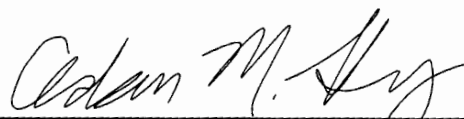
BACKGROUND: 319 CPM

Wipe area - a minimum of 100 cm² (light switches door handles, entire surface)

<u>WIPE LOCATION</u>	<u>COUNT TIME</u> (Sec)	<u>RESULTS</u> (CPM)	<u>RESULTS</u> (NET CPM)	<u>RESULTS</u> (DPM)
Nuclear Imaging Lab				
Floor - Camera Area	60	321	2	7
Floor - Inside Doors	60	343	24	79
Door Handles (x2)(all)	60	323	4	13
Light Switches (all)	60	323	4	13
Hand Sanitizer Dispenser	60	323	4	13
Floor - Outside Doors	60	343	24	79
Hot Lab				
Cabinet Faces/Handles	60	349	30	98
Countertop Surfaces	60	349	30	98
Floor	60	319	0	0
Sink (to include handles)	60	334	15	49
Door Handle (inside/out)	60	328	9	30
Light Switch	60	328	9	30
Cabinet/Drawer Interior	60	339	20	66
Cabinets - Inside	60	339	20	66
Paper Towel Dispenser	60	334	15	49
Soap Dispenser	60	334	15	49
Stress Room 1				
Countertop/Shelf Surfaces	60	363	44	144
Floor	60	361	42	138
Door Handle (all)	60	354	35	115
Light Switch (all)	60	354	35	115
Cabinet/Drawer Faces	60	333	14	46
Sink (to include handles)	60	328	9	30
Paper Towel Dispenser	60	321	2	7
Soap Dispenser	60	321	2	7
Cabinet/Drawer Handles	60	333	14	46
Cabinet/Drawer Interior	60	333	14	46

<u>WIPE LOCATION</u>	<u>COUNT TIME</u> <u>(Sec)</u>	<u>RESULTS</u> <u>(CPM)</u>	<u>RESULTS</u> <u>(NET CPM)</u>	<u>RESULTS</u> <u>(DPM)</u>
Stress Room 2				
Countertop/Shelf Surfaces	60	349	30	98
Floor	60	358	39	128
Door Handle (all)	60	354	35	115
Light Switch (all)	60	354	35	115
Cabinet/Drawer Faces	60	343	24	79
Sink (to include handles)	60	319	0	0
Paper Towel Dispenser	60	319	0	0
Soap Dispenser	60	319	0	0
Cabinet/Drawer Handles	60	343	24	79
Cabinet/Drawer Interior	60	343	24	79

Performed By:



Radiation Safety Officer



ACKNOWLEDGEMENT - RECEIPT OF CORRESPONDENCE

Name and Address of Applicant and/or Licensee Bayhealth Medical Center ATTN: Terry M. Murphy, President and Chief Executive Officer 640 South State Street Dover, DE 19901	Date January 11, 2018
	License Number(s) 07-14850-01
	Mail Control Number(s) 602129
	Licensing and/or Technical Reviewer or Branch Robin Elliott

This is to acknowledge receipt of your: Letter and/or Application Dated: 12/19/2017

The initial processing, which included an administrative review, has been performed.
 Amendment Termination New License Renewal

There were no administrative omissions identified during our initial review.

This is to acknowledge receipt of your application for renewal of the material(s) license identified above. Your application is deemed timely filed, and accordingly, the license will not expire until final action has been taken by this office.

Your application for a new NRC license did not include your taxpayer identification number. Please complete and submit NRC Form 531, Request for Taxpayer Identification Number, located at the following link: <http://www.nrc.gov/reading-rm/doc-collections/forms/nrc531.pdf>
 Follow the instructions on the form for submission.

The following administrative omissions have been identified:

Your application has been assigned the above listed MAIL CONTROL NUMBER. When calling to inquire about this action, please refer to this control number. Your application has been forwarded to a technical reviewer. Please note that the technical review, which is normally completed within 180 days for a renewal application (90 days for all other requests), may identify additional omissions or require additional information. If you have any questions concerning the processing of your application, our contact information is listed below:

Region I
 U. S. Nuclear Regulatory Commission
 Division of Nuclear Materials Safety
 2100 Renaissance Boulevard, Suite 100
 King of Prussia, PA 19406-2713
 (610) 337-5260, (610) 337-5313,
 (610) 337-5398, or (610) 337-5239