

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

Jo

RECRG 1 12 27 17 9M07/50

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 0 3002565

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.
 - o 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

Cittil MATERIAL 6-002

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

128309

SN:

WELL EFFICIENCY (137Cs):

BACKGROUND:

30.5%

30.5% CPM

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

WIPE LOCATION	COUNT TIME (Sec)	RESULTS (CPM)	RESULTS (NET CPM)	RESULTS (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

WIPE LOCATION	COUNT TIME (Sec)	RESULTS (CPM)	RESULTS (NET CPM)	RESULTS (DPM)
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

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

CLOSE-OUT AREA SURVEY

LICENSE NUMBER: NRC: 07-14850-01 Date: 12/19/2017

SURVEY METER: Biodex 14C Battery Check: ok

SN: 130380 Check Measurement: 1.05 mR/hr

Calibration Date: 9/21/2017 Expected Check Measurement: 1.10 mR/hr
Background Measure: 0.02 mR/hr

Surveys performed at a distance of 1-2 inches off of surface - at most sensitive setting

	Measurement		Measurement
Survey Location	mR/hr	Survey Location	mR/hr
Nuclear Imaging Lab		Stress Lab 1	
Floor - Camera Area	0.02	Countertop/Shelf Surfaces	0.02
Floor - Inside Doors	0.02	Floor	0.02
Door Handles (x2)(all)	0.02	Door Handle (all)	0.02
Light Switches (all)	0.02	Light Switch (all)	0.02
Hand Sanitizer Dispenser	0.02	Cabinet/Drawer Faces	0.02
Floor - Outside Doors	0.02	Sink (to include handles)	0.02
		Paper Towel Dispenser	0.02
		Soap Dispenser	0.02
		Cabinet/Drawer Handles	0.02
		Cabinet/Drawer Interior	0.02

	Measurement		Measurement
Survey Location	mR/hr	Survey Location	mR/hr
Hot Lab		Stress Lab 2	
Cabinet Faces/Handles	0.02	Countertop/Shelf Surfaces	0.02
Countertop Surfaces	0.02	Floor	0.02
Floor	0.02	Door Handle (all)	0.02
Sink (to include handles)	0.02	Light Switch (all)	0.02
Door Handle (inside/out)	0.02	Cabinet/Drawer Faces	0.02
Light Switch	0.02	Sink (to include handles)	0.02
Cabinet/Drawer Interior	0.02	Paper Towel Dispenser	0.02
abinets - Inside	0.02	Soap Dispenser	0.02
per Towel Dispenser	0.02	Cabinet/Drawer Handles	0.02
ap Dispenser	0.02	Cabinet/Drawer Interior	0.02

Survey Performed By:

Radiation Safety Officer

NRC FORM 532 (05-2016)

ACKNOWLEDGEMENT - RECEIPT OF CORRESPONDENCE

Name and Address of Applic	ant and/or Licensee	Date	
		January 11, 2018	
		License Number(s)	
Bayhealth Medical Cent		07-14850-01	
ATTN: Terry M. Murphy Executive Office		Mail Control Number(s)	
640 South State Street		602129	
Dover, DE 19901		Licensing and/or Technical Reviewer or Branch	
		Robin Elliott	
This is to acknowledge recei	pt of your: 🗸 Letter an	d/or Application Dated: 12/19/2017	
The initial processing, which included an administrative review, has been performed. ✓ Amendment			
✓ There were no administr	rative 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 administration	rative 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:			
Division 2100 Ren King of F (610) 337	clear Regulatory Commissi of Nuclear Materials Safety naissance Boulevard, Suite Prussia, PA 19406-2713 7-5260, (610) 337-5313, 7-5398, or (610) 337-5239	<i>(</i>	