

From: [Lanzisera, Penny](#)
To: [Miller, Gregg](#)
Subject: Additional Request for Additional Information
Date: Monday, February 12, 2018 10:25:00 AM

Licensee: District Hospital Partners, dba, The George Washington University Hospital
License No. 08-30607-01
Docket No. 03035424
Mail Control 601800

Thank you Mr. Miller. I look forward to the letter signed by management. In addition, from discussions on the submittal, I will also need additional information on the following:

- 1) It is unclear whether Medical Faculty Associates (MFA) leases space from GWUH under License No. 08-31160-01; or whether GWUH leases space in the MFA building from MFA. Provide a copy of the lease agreement.
- 2) With regards to the transit tubes and applicators, confirm that you will meet the Sealed Source and Device Registry requirements as dictated and clarified by the manufacturer for replacement of the transit tubes and applicators.
- 3) Provide the qualifications with radioactive material by Dr. Sarfaraz to support his oversight of the device while in storage (e.g., ABR certificate and documentation of use of radioactive material confirmed by the RSO). Alternately, you may confirm that the RSO will provide oversight during storage.
- 4) Provide the step-by-step procedures and acceptance criteria for each item indicated in 10 CFR 35.643 (e.g., extend source, push door open, and confirm that source retracts to its shielded position).
- 5) On your facility diagram you indicate a System Connection Box. Please describe this box and indicate how the device is secured from unauthorized access when not in use. For instance, how is the device secured when the accelerator is in use.

Thank you for your assistance,

Penny Lanzisera
U.S. NRC, Region I