



CONVERSATION RECORD

7/13/18

NAME OF PERSON(S) CONTACTED OR IN CONTACT WITH YOU Laura T. Speer Smith		DATE OF CONTACT 07/13/2018	TYPE OF CONVERSATION <input type="checkbox"/> E-MAIL <input checked="" type="checkbox"/> TELEPHONE <input type="checkbox"/> INCOMING <input checked="" type="checkbox"/> OUTGOING
E-MAIL ADDRESS laura.smith5@ascension.org		TELEPHONE NUMBER (586) 808-3058	

ORGANIZATION St. John Hospital & Medical Center	DOCKET NUMBER(S) 030-02028
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LICENSE NUMBER(S) 21-03210-01	CONTROL NUMBER(S) 609091
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SUBJECT  
Request for Additional Information

SUMMARY  
On 7/13/18, M. Gryglak contacted Ms. Speer Smith, RSO, regarding the request dated June 14, 2018 (ADAMS Accession no. ML18165A231). Specifically, Ms. Speer Smith confirmed that the possession limits of the radioactive material requested will be the same as specified in the request and that the device will be located in the same room. During the conversation, Ms. Speer Smith realized that the licensee will also be upgrading the device model at a different location of use. Ms. Gryglak requested to submit another amendment request and additional information (a facility diagram per NUREG 1556 Volume 9, Revision 2 guidance and shielding evaluation) to support the new request.

*This record was not transmitted to licensee; it only records a previously conducted telephone conversation. C. Casey was not included in this call. cck*

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ACTION REQUIRED (IF ANY)

**Continue on Page 3**

NAME OF PERSON DOCUMENTING CONVERSATION  
M. Gryglak

SIGNATURE  
*Margaret R. Gryglak*