



CONVERSATION RECORD

NAME OF PERSON(S)/TITLE CONTACTED OR IN CONTACT WITH YOU Edward Wroblewski, RSO	DATE OF CONTACT 03/13/2019	TYPE OF CONVERSATION <input type="checkbox"/> E-MAIL <input checked="" type="checkbox"/> TELEPHONE <div style="float: right; text-align: right;"> <input type="checkbox"/> INCOMING <input type="checkbox"/> OUTGOING </div>
E-MAIL ADDRESS Wroblewski, Edward <EEWroble@ascension.org>	TELEPHONE NUMBER (317) 338-2381	
ORGANIZATION St. Vincent Hospital & Health Care Center	DOCKET NUMBER(S) 03001579	
LICENSE NAME AND NUMBER(S) St. Vincent Hospital & Health Care Center/13-00133-02	MAIL CONTROL NUMBER(S) 611380	
SUBJECT Request for Additional Information		

SUMMARY AND ACTION REQUIRED (IF ANY)

On 3/13/19, M. Gryglak, C. Frazier and E. Wroblewski discussed the licensee's request dated 2/7/19 (ML19050A371). Specifically:

1. NRC staff inquired whether a Transfer of Control occurred (sale of assets, change in ownership). E. Wroblewski explained that no transaction took place. The three NRC licenses (St. Vincent Hospital & Health Care Center/13-00133-02, St. Vincent Evansville/13-03226-04, and Oncology Hematology Associates of SW Indiana/13-32700-01) are all part of the St. Vincent Health. Licensee will provide response to clarify the information.
2. Licensee will confirm request to terminate license no. 13-03226-04 and 13-32700-01.
3. Licensee will provide information that: at this time: 1) there are no known issues of noncompliance at any facilities involved and all facilities are in full compliance with NRC regulations and license conditions, 2) there is no known contamination or elevated radiation levels at facilities as described in license nos. 13-03226-04 and 13-32700-01, 3) all calibrations, leak tests, area surveys, wipe tests, training, and quality control records are up to date, 4) all records required by regulations and license conditions as stated in license nos. 13-03226-04 and 13-32700-01 are transferred to St. Vincent Hospital & Health Care Center/13-00133-02.
4. Confirm possession limits for material where additional locations of use are added. For example, license no. 13-00133-02 allows 9 curies of 10 CFR 35.300 material for the current locations of use. However, three new locations of use are being added for use of 10 CFR 35.300 material.
5. Provide statement acknowledging that you will follow the statements and commitments in letters (list the letters) as listed in Condition no. 17, license no. 13-03226-04, and Condition no. 13, license no. 13-32700-01.

NAME OF PERSON DOCUMENTING CONVERSATION

Magdalena R. Gryglak

SIGNATURE

Magdalena R. Gryglak

DATE OF SIGNATURE

3/13/19

CONVERSATION RECORD (continued)

LICENSE NAME AND NUMBER(S)

St. Vincent Hospital & Health Care
Center/13-00133-02

MAIL CONTROL NUMBER(S)

611380

SUMMARY AND ACTION REQUIRED (IF ANY) (Continued)

6. Provide statement acknowledging that you will follow the statements and commitments in letters (list the letters) as listed in Condition no. 17, license no. 13-03226-04 for the self shielded irradiator.
7. Provide the requested authorized use for the self shielded irradiator (irradiation of materials or storage only incident to disposal)
8. Provide the additional RSO training for the use of the blood irradiation (any training taken previously).
9. Provide a request and NRC form 314 signed by management to terminate license no. license no. 13-03226-04.
10. Provide a request and NRC form 314 signed by management to terminate license no. 13-32700-01.
11. Provide your response by April 12, 2019 signed by management of St. Vincent Hospital & Health Care Center/13-00133-02, St. Vincent Evansville/13-03226-04, and Oncology Hematology Associates of SW Indiana/13-32700-01.