Hill, Carol

From: Sent: To: Cc: Subject: Attachments: Jenna Hulscher < Jenna.Hulscher@prairielakes.com> Thursday, May 16, 2019 10:17 AM Hill, Carol 'Eastman, David J.'; Jenna Hulscher [External_Sender] NRC License Amendment Request NRC License Amendment Request PDF.pdf

Ms. Hill,

Please see the attached License Amendment Request documentation for materials license number 40-16775-01.

If you have any questions, please contact me at your convenience.

Thank you,

Jenna Hulscher Director of Radiology Prairie Lakes Healthcare System 401 9th Ave. NW Watertown, SD 57201 605-882-7986 Jenna.Hulscher@prairielakes.com



PUBLIC Immediate Release Normal Release

NON-PUBLIC

A.3 Sensitive-Security Related
A.7 Sensitive Internal
Other:

UT Date: 5-79-19 **Reviewer:**

Ma 6 1 2 3 2 3

YOUR HEALTH : OUR MISSION

16 May 2019

Carol Hill Licensing Assistant U.S. Nuclear Regulatory Commission 1600 East Lamar Boulevard Arlington, TX 76011-4511

RE: License Request to update site name on materials license 40-16775-01.

Dear Ms. Hill:

Please amend materials license 40-16775-01 as outlined below.

1. Please update site name to read Prairie Lakes Healthcare System.

Thank you very much and please contact me with any questions at (605) 882-7986.

Sincerely,

Jenna Hulscher, CRA, RT(R)(MR) Director of Radiology Prairie Lakes Healthcare System

Enclosed: current Materials License with corrections noted

Na 6 1 2 3 2 3

401 9th Ave. NW Watertown, SD 57201 Phone • 605.882.7000 www.prairielakes.com



PRAIRIE LAKES Healthcare System NRC FORM 374

U.S. NUCLEAR REGULATORY COMMISSION

PAGE 1 OF 5 PAGES Amendment No. 30

MATERIALS LICENSE

Pursuant to the Atomic Energy Act of 1954, as amended, the Energy Reorganization Act of 1974 (Public Law 93-438), and Title 10, Code of Federal Regulations, Chapter I, Parts 30, 31, 32, 33, 34, 35, 36, 37, 39, 40, 70 and 71, and in reliance on statements and representations heretofore made by the licensee, a license is hereby issued authorizing the licensee to receive, acquire, possess, and transfer byproduct, source, and special nuclear material designated below; to use such material for the purpose(s) and at the place(s) designated below; to deliver or transfer such material to persons authorized to receive it in accordance with the regulations of the applicable Part(s). This license shall be deemed to contain the conditions specified in Section 183 of the Atomic Energy Act of 1954, as amended, and is subject to all applicable rules, regulations, and orders of the Nuclear Regulatory Commission now or hereafter in effect and to any conditions specified below.

Licensee 1. Prairie Lakes Health Care System s, Mc - HeatHhcare	In accordance with letter dated May 23, 2016	4. Expiration Date: November 30, 2023
2. 401 9th Avenue Northwest P.O. Box 1210 Watertown, SD 57201-6210	3. License number: 40-16775-01 is amended in its entirety to read as follows:	5. Docket No.: 030-11624 Reference No.:
 Byproduct, source, 7. Chemical and/or physical fractional and/or physical fractina and/or physical fractional and/or physical fractional and/or	8. Maximum amount that licens may possess at any one time under this license	
A. Any byproduct material A. Any permitted by 10 CFR 35.100	A. As Needed	A. For use in uptake, dilution and excretion studies permitted by 10 CFR 35.100.
B. Any byproduct material B. Any permitted by 10 CFR 35.200	B. As Needed	B. For use in imaging and localization studies permitted by 10 CFR 35.200.
C. Any byproduct material C. Any permitted by 10 CFR 35.300	C. 500 millicuries total	C. For any use permitted by 10 CFR 35.300.

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NRC FORM 532	U.S. NUCLEAR REGULATORY COMMISSION		
(05-2016) ACKNOWLEDGEMENT - RECEIPT OF CORRESPONDENCE			
Name and Address of Applicant and/or Licensee	Date		
Name and Address of Applicant and/or Licensee	05/29/2019		
	License Number(s)		
Mr. David J. Eastman, M.E.H.S. Radiation Safety Officer	40-16775-01		
Prairie Lakes Health Care Systems, Inc.	Mail Control Number(s)		
401 9th Avenue Northwest P.O. Box 1210	612323		
Watertown, South Dakota 57201-6210	Licensing and/or Technical Reviewer or Branch		
	C. Hill		
This is to acknowledge receipt of your: 🖌 Letter and/or 🗌 Application Dated: 05/16/2019			
The initial processing, which included an administrative review, has been performed. Amendment Renewal 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: <u>http://www.nrc.gov/reading-rm/doc-collections/forms/nrc531.pdf</u> 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 IV U. S. Nuclear Regulatory Commissi DNMS/NMSB - B 1600 E. Lamar Boulevard Arlington, TX 76011-4511 (817) 200-1103 or (817) 200-1140	on		
NRC FORM 532 (05-2016)			

BETWEEN:

Accounts Receivable/Payable and Regional Licensing Branches

[FOR ARPB USE] INFORMATION FROM WBL

Program Code: 02120 Status Code: Pending Amendment Fee Category:7C Exp. Date: 11/30/2023 Fee Comments: CODE 23 Decom Fin Assur Reqd: N

License Fee Worksheet - License Fee Transmittal

A. REGION

CHED
Prairie Lakes Health Care Systems, Inc.
05/16/2019
3011624
612323
40-16775-01
Amendment

2. FEE ATTACHED

Amount: _____

3. COMMENTS

Signed: Date: 2

B. LICENSE FEE MANAGEMENT BRANCH (Check when milestone 03 is entered / /)

1. Fee Category and Amount:

2. Correct Fee Paid. Application may be processed for: