

ATTN. PAT VACHLARON
U.S. NUCLEAR REGULATORY COMMISSION
REGION III
MATERIAL LICENSING DIVISION
799 ROOSEVELT ROAD
GLEN ELLYN, IL 60137

27 JAN 1989

MICHAEL C. SLUGAJ
PORT HURON BIOMEDICAL DIAGNOSTIC
2030 TENTH STREET
PORT HURON, MI 48060

RE: CONTROL # 86138

DEAR MS. VACHLARON

PER OUR CONVERSATION REGARDING THE AMOUNT OF TIME SPENT ON SITE BY MYSELF ON SITE AT PORT HURON BDS. I FEEL THAT APPROXIMATELY 4 HOURS PER WEEK WILL INSURE GOOD RADIATION SAFETY AND RECORD KEEPING PRACTICES ARE BEING FOLLOWED.

DURING ANY VACATION OR OTHER TIME OFF MS. CHERYL CULVER M.S. WILL BE FILLING IN FOR EMERGENCY COVERAGE.

AS I ALREADY CARRY A PERSONAL PAGER I AM NEVER MORE THAN A FEW MOMENTS AWAY BY PHONE. I AM ALMOST NEVER MORE THAN 1 HR. AWAY FROM A PERSONAL RESPONSE SHOULD THAT BE NECESSARY

THANK YOU FOR YOUR TIME AND CONSIDERATION

Michael C. Slugaj
MICHAEL C. SLUGAJ

27 JAN 89 10: 25

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REG3 LIC30
21-25974-01 PNU

** TOTAL PAGE.001 **

CONVERSATION RECORD

TIME

DATE

Jan 9, 1989

TYPE

☐ VISIT

☐ CONFERENCE

☐ TELEPHONE

☐ INCOMING

☐ OUTGOING

ROUTING

NAME/SYMBOL

INT

Location of Visit/Conference:

Ray Emond

NAME OF PERSON(S) CONTACTED OR IN CONTACT WITH YOU

ORGANIZATION (Office, dept., bureau, etc.)

TELEPHONE NO.

Mike Slugaj, RT

SUBJECT

Huron Biomedical Diagnostic

SUMMARY

I spoke to Mr. Ray Emond and told him that we needed a letter stating that Mr. Slugaj would visit Huron Bio. Diag approx once a week and for sure, no longer than two weeks would pass without a visit from him.

Mr. Emond said he would give Mr. Slugaj the message.

ACTION REQUIRED

NAME OF PERSON DOCUMENTING CONVERSATION

SIGNATURE

DATE

Patricia M. Vachon

1-9-89

ACTION TAKEN

SIGNATURE

TITLE

DATE

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Mr. Emmond

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