

FEB 22 1988

Shelby Memorial Hospital
ATTN: Time Dutton
President
Morris Road
Shelby, Ohio 44875

Gentlemen:

We have reviewed your application dated December 15, 1987, requesting renewal of NRC License Number 34-15317-01 and find that we will need additional information as follows:

1. Please submit the make and model numbers of your survey meter(s), dose calibrator, and imaging equipment.
2. Please submit the name of your film badge supplier and verify that both whole body and finger badges will be exchanged on a monthly basis.
3. Please submit a more detailed diagram and/or description of your "hot lab". In your diagram you should include; (1) location and shielding for your generator and (2) location and shielding for your radioactive waste storage.
4. Please describe shielding (L-block, lead bricks, etc.) that will be used for the dose preparation area. In addition, please indicate how you will prevent unauthorized access to material prepared in the dose preparation area during normal working hours when authorized personnel are not present, and during off-duty hours.
5. Please note that we are not accepting the use of a low level g.m. survey meter as a method for assaying wipe test samples. If you wish to submit an alternative procedure for times when a well counter is not available, you may want to consider other instrumentation that is capable of measuring 2000 dpm.

Sincerely,

Kevin G. Null
Materials Licensing Section

RIII

Null/crr

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