

From: [VonEhr, Jason](#)
To: crmidmr@aol.com
Bcc: [Lanzisera, Penny](#)
Subject: Hospital Metropolitano - Request for Additional Information MC 625543
Date: Monday, June 14, 2021 10:15:00 AM
Attachments: [image002.jpg](#)

Licensee: Hospital Metropolitano
License Number: 52-16033-01
Docket Number: 03011155
Mail Control Number: 625543

Dear Mr. Rhoe,

This refers to your request to amend the above license to remove 10 CFR 35.400 licensed material, facilities, and authorized users dated April 9, 2021. In order to continue our review of your request, the following additional information is needed:

- a) Please describe any location(s) of use involved in the manual brachytherapy program that are no longer required. For instance, your license tie-down letter dated August 29, 2011 describes areas of storage within the Radiation Oncology Department for Cs-137 and your letter dated March 14, 2012, describes the mold room as a storage location for I-125. To support their release, you may either provide a copy of leak tests performed of the last I-125 sources disposed (we have your records for the Cs-137 sources); or provide close out surveys of these areas.
- b) Please confirm the disposition of any I-125 possessed under the 10 CFR 35.400 authorization, whether by decay-in-storage, transfer to another NRC or Agreement State licensee, or by transfer to an NRC or Agreement State licensed disposal organization.

Your reply must be an originally signed and dated letter. The letter may be scanned and submitted as a pdf document attached to an email. If we do not receive a reply from you within 30 calendar days from the date of this e-mail, we will assume that you do not wish to pursue your amendment request.

Please respond by e-mail to acknowledge that you have received the e-mail request for additional information.

Thank you for your assistance. Please contact me with any questions,

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