

LICENSEE NAME AND ADDRESS South Bend Medical Foundation 530 N. Lafayette Blvd. South Bend, IN 46601	LICENSE NUMBER 13-00670-04	DOCKET NUMBER
	LICENSE EXPIRATION DATE 5/31/2021	

A. LICENSE STATUS (Check the appropriate box)

- This license has expired. This license has not yet expired; please terminate it.

B. DISPOSAL OF RADIOACTIVE MATERIAL
(Check the appropriate boxes and complete as necessary. If additional space is needed, provide attachments)

- The licensee, or any individual executing this certificate on behalf of the licensee, certifies that:
- 1. No radioactive materials have ever been procured or possessed by the licensee under this license.
 - 2. All activities authorized by this license have ceased, and all radioactive materials procured and/or possessed by the licensee under this license number cited above have been disposed of in the following manner.
 - a. Transfer of radioactive materials to the licensee listed below:
 - b. Disposal of radioactive materials:
 - 1. Directly by the licensee:
 - 2. By licensed disposal site:
 - 3. By waste contractor:

Los Alamos
 - c. All radioactive materials have been removed such that any remaining residual radioactivity is within the limits of 10 CFR Part 20, Subpart E, and is ALARA.

C. SURVEYS PERFORMED AND REPORTED

- 1. A radiation survey was conducted by the licensee. The survey confirms:
 - a. the absence of licensed radioactive materials
 - b. that any remaining residual radioactivity is within the limits of 10 CFR 20, Subpart E, and is ALARA.
- 2. A copy of the radiation survey results:
 - a. is attached; or b. is not attached (Provide explanation); or c. was forwarded to NRC on: _____ Date
- 3. A radiation survey is not required as only sealed sources were ever possessed under this license, and
 - a. The results of the latest leak test are attached; and/or
 - b. No leaking sources have ever been identified.

The person to be contacted regarding the information provided on this form:

NAME Erin Adamo	TITLE Quality Systems Supervisor	TELEPHONE (include Area Code) 574-204-4295	E-MAIL ADDRESS eadamo@sbfm.org
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Mail all future correspondence regarding this license to:

C. CERTIFYING OFFICIAL
I CERTIFY UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT

PRINTED NAME AND TITLE Erin Adamo, Quality Systems Supervisor	SIGNATURE <i>Erin Adamo</i>	DATE 07/02/2021
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WARNING: FALSE STATEMENTS IN THIS CERTIFICATE MAY BE SUBJECT TO CIVIL AND/OR CRIMINAL PENALTIES. NRC REGULATIONS REQUIRE THAT SUBMISSIONS TO THE NRC BE COMPLETE AND ACCURATE IN ALL MATERIAL RESPECT. 18 U.S.C. SECTION 1001 MAKES IT A CRIMINAL OFFENSE TO MAKE A WILLFULLY FALSE STATEMENT OR REPRESENTATION TO ANY DEPARTMENT OR AGENCY OF THE UNITED STATES AS TO ANY MATTER WITHIN ITS JURISDICTION.

ATRO # 2021:14
Off-Site Source Recovery Program
Authorization to Transfer/Relinquishment of Ownership/Custody

SOURCE OWNER: South Bend Medical Foundation TELEPHONE: 574-204-4385
 LICENSE: FAX: 574-280-2796
 CONTACT NAME: Jim Frain
 ADDRESS: 530 N Lafayette Blvd
 South Bend, IN 46601

Pursuant to its authority under the Atomic Energy Act, the U.S. Department of Energy (DOE) National Nuclear Security Administration (NNSA) has directed Triad National Security, LLC (TNS), to recover and store excess, unwanted, abandoned, orphan radioactive sealed sources and other radioactive material sources on behalf of DOE/NNSA.

TNS has determined that the sealed source(s) identified below meet the requirements of the Los Alamos National Laboratory Off-Site Source Recovery Program and, on behalf of DOE/NNSA, authorizes South Bend Medical Foundation to transfer the sealed source(s) to the following designated TNS support subcontractor: Southwest Research Institute.

South Bend Medical Foundation affirms it is the owner/custodian of the sealed source(s) identified below, and hereby irrevocably relinquishes all rights, title and ownership/custody in the sealed source(s) to DOE/NNSA in furtherance of the OSRP. TNS accepts the sealed sources on behalf of DOE/NNSA, pursuant to DOE/NNSA contract no. 89233218CNA000001, upon the execution of the loading of the device(s) / source(s) into a certified DOE-owned transportation container observed by a representative of the OSRP/LANS.

SOURCE INFORMATION

Isotope:	Mfr/Model:	Serial#:	SFC#:	Original Curies (Date):	Decayed Curies (Date):
137Cs	Nordion	A305		1.398E+03 (9/26/93)	7.407E+02 (4/26/21)

*Sources contained in a Nordion Gammacell 3000, SN: 26

SOURCE OWNER:
 OFFICIAL NAME/TITLE: JAMES L FRAIN
NAME (Please Print or Type)
 SIGNATURE: [Signature]

VP
 TITLE (Please Print or Type)
 DATE: 6/10/2021

TNS AUTHORIZATION:
 OFFICIAL NAME/TITLE: Team Leader, Off-Site Source Recovery Program
 SIGNATURE: [Signature]

DATE: 10JUN21

ACKNOWLEDGEMENT OF RECEIPT BY OSRP REPRESENTATIVE:
 OFFICIAL NAME/TITLE: Frank Cocina
NAME (Please Print or Type)
 SIGNATURE: [Signature]

OSRP Deputy PM
 TITLE (Please Print or Type)
 DATE: 6/24/2021



Customer: 920781.
Location ID: 00000DPT
Report Number: 4386

Sealed Radioactive Source Leak Test Certificate
Save this report for your records

South Bend Medical Foundation LLC
Mary Youngs
530 N Lafayette Boulevard
South Bend, IN 46601

Isotope	Activity/ Date	Source Manufacturer:	Collected By:	Analyzed By:	Result (uCi)
Cs-137	1398 Ci 1/5/1994	Nordion International Model: Gamma Cell 3000 Serial: 026	Terr Barger Collected On: 2/25/2021 Using GDS Q1 ki	GDS Counting Lab Analyzed On: 04/06/2021	0.0000

The Leak Tests were analyzed in accordance with Global Dosimetry Solutions, Inc. procedures and Radioactive Material License #4635-30. Calibration and Quality Control records are maintained for the Leak Test Counting Equipment at Global Dosimetry Solutions, Inc.


Radiation Safety Officer Review

4/7/21
Date

From: [Tomczak, Tammy](#)
To: [Pavon, Sandy](#)
Subject: FW: license termination
Date: Tuesday, July 06, 2021 7:45:01 AM
Attachments: [NRC 314- termination.pdf](#)

Hi Sandy,

Please add the attached to ADAMS.

Thank you!!
Tammy

From: Adamo, Erin <EAdamo@sbfm.org>
Sent: Friday, July 02, 2021 7:51 AM
To: R3DNMSMAIL Resource <R3DNMSMAIL.Resource@nrc.gov>
Subject: [External_Sender] license termination

Good Morning-

Attached is our Certificate of Disposition of Materials (form 314) to terminate our license. Attached to that file is also the Transfer of Ownership and the Sealed Source Leak Test Certificate.

Please let me know if there are any questions,

Erin Adamo, M(ASCP)
Quality Systems Supervisor
574-204-4295

