

**From:** [Tindle-Engelmann, Elizabeth](#)  
**To:** [Marsden, Jason](#)  
**Subject:** Middlesex Health Request for Additional Information MC 628675  
**Date:** Tuesday, September 28, 2021 10:05:00 AM

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Licensee Name: Middlesex Health  
License Number: 06-00649-03  
Docket Number: 03001242  
Mail Control Number: 628675

Dear Mr. Marsden,

**Please confirm receipt of this email.**

This is in reference to the letter dated September 21, 2021 requesting to amend NRC License Number 06-00649-03. In order to process the request additional information is required.

1. Please confirm there is no inventory of Y-90 or storage of Y-90 at your facilities.
2. Please confirm you have disposed of all Y-90 waste in accordance with 10 CFR 35.92 or 10 CFR 20 Subpart K.
3. Please confirm you have not had any Y-90 spills or Y-90 contamination events in the last 12 months. If you had any Y-90 spills or Y-90 contamination events please provide a summary including the date, activity involved, and surveys.
4. You requested to remove Julia Savina Lee, M.D. as an authorized user. Please confirm you wish to remove Julie Savina Lee, M.D. as an authorized user on your license.

We will continue our review upon receipt of this information. Your reply must be a letter signed and dated by licensee management. The letter may be scanned and submitted as a pdf document attached to an email. **Please reply by 10/12/2021.**

If you have any questions regarding this request for additional information, please contact me at 610-337-5115 or via email at [Elizabeth.Tindle-Engelmann@nrc.gov](mailto:Elizabeth.Tindle-Engelmann@nrc.gov).

Thank you for your cooperation.

Elizabeth Tindle-Engelmann  
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