

From: [Gryglak, Magdalena](#)
To: Nathan.Mcparlan@aspirus.org
Cc: [Kim Pici](#)
Subject: Request to add a temporary area of use and a new area of use to NRC license no. 21-20242-01 for Aspirus Keweenaw Hospital
Date: Monday, November 1, 2021 5:22:00 PM

Good afternoon,

I have reviewed your requests dated August 30, 2021 and August 31, 2021 regarding adding a temporary mobile unit and a new area of use to the subject license.

In a signed and dated letter, please provide the following by November 15, 2021:

1. In your 8/30/21 letter you provided a mobile unit diagram. Please resubmit the mobile unit diagram and label the dimensions of the mobile unit and the door to secure the radioactive material (is the main unit door locked or is there another door/storage cabinet inside the mobile unit?)
2. In your 8/30/21 letter, you provided a diagram showing the location of the mobile unit in reference to the hospital buildings. Please resubmit the diagram (the diagram and some of the labeling was not legible). Further, please label the address on the diagram (I assume it is the 205 Osceola St., Laurium, Michigan, 49913).
3. Please resubmit the temporary stress lab diagram (the diagram is not legible) specifying the dimensions of the room.
4. Please resubmit the new department layout after construction and label the following:
 - add the address on the diagram
 - provide dimensions of the stress lab, scanner room, and the hot lab.
 - Specify area/rooms above and below the department
 - Provide details in the hot lab: any sinks, material receipt, material storage, waste storage
 - label security measures (any locked doors, storage containers, etc.)
5. Please clarify whether any former areas of use at the address XX (205 Osceola St., Laurium, Michigan), are being released for unrestricted use after the remodeling is complete.

If so, please provide the final status surveys:

A final status radiation survey and contamination survey for all areas where radioactive material was used under the license;

- a. A survey map providing contamination (in cpm and dpm) and radiation readings (mR/hr) keyed to specific locations within each room where radioactive material was used and stored (a diagram of the facility with cpm/dpm and mR/hr readings/points shown on the diagram with description of the reading/point

- such as floor, countertop etc.);
- b. Background contamination and radiation readings;
 - c. Guidance/action levels for contamination and radiation readings;
 - d. Instrumentation used to conduct the surveys including the manufacturer's names and model numbers;
 - e. Calibration dates for survey meters;
 - f. Efficiency/correction factors for well counters;
 - g. Date and name/s of individuals performing the status survey;
 - h. Inventory of sealed sources and leak test result prior to transfer of the sources;
 - i. The location where the sealed sources were transferred. Please provide documentation acknowledging that all sealed sources (list of the sealed sources included) were received by an authorized recipient (another, waste disposal facility). Please provide a copy of the recipient's license (if not an NRC licensee).
 - j. Confirmation that no radioactive material is present.

Please acknowledge receipt of this email. Let me know if you have any questions.

Thank you

Magdalena R. Gryglak
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