



Thomas
Jefferson
University
Hospital

Methodist
Hospital
Division

Jefferson Health System

James E. Robinson
Chief Administrative Officer

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REGION 1

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Thomas Jefferson
University Hospitals

Thomas Jefferson
University Hospital

Methodist Hospital
Division

Jefferson Hospital for
Neuroscience

Ford Road Campus

Methodist Hospital
Nursing Center

November 22, 2004

L-2

Sheryl Villar
U.S. Nuclear Regulatory Commission
Region I
475 Allendale Road
King of Prussia, PA 19406-1415

37-07942-01

RE: Docket #: 03003101
Control #: 135853

Dear Ms. Villar:

With reference to our recent license renewal application, please note that we have decided to terminate operations at our satellite facility of St. Agnes Continuing Care Center, 1900 South Broad Street, Philadelphia, PA.

Attached you will find the decommissioning radiation survey, wipe test and Form NRC-314 (Certificate of Disposition of Materials).

If any additional information is required, please do not hesitate to contact my office at your convenience.

Sincerely,

James E. Robinson
Chief Administrative Officer

JER:lc

135853

NMSS/RGNI MATERIALS-002

(6-2004)
10 CFR 30.36(j)(1); 40.42(j)(1);
70.38(j)(1); and 72.54(j)(1)

CERTIFICATE OF DISPOSITION OF MATERIALS

Estimated burden per response to comply with this mandatory collection request: 30 minutes. This submittal is used by NRC as part of the basis for its determination that the facility is released for unrestricted use. Send comments regarding burden estimate to the Records and FOIA/Privacy Services Branch (T-5 F52), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by Internet e-mail to infocollects@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0028), Office of Management and Budget, Washington, DC 20503. If a means used to impose an information collection does not display a currently valid OMB control number, the NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.

LICENSEE NAME AND ADDRESS

St. Agnes Hospital
Satellite facility of Methodist Hospital
1900 South Broad Street
Philadelphia, PA

LICENSE NUMBER

37-07942-01

DOCKET NUMBER

03003101

LICENSE EXPIRATION DATE

- ☐ This license has expired. ☐ **A. LICENSE STATUS (Check the appropriate box)**
☐ 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:
Nuclear Department - Methodist Hospital - 2501 South Broad Street - Philadelphia - PA
- ☒ b. Disposal of radioactive materials:
- ☒ 1. Directly by the licensee:
Decayed in storage for a minimum of 10 half lives, surveyed, confirmed to background and placed in ordinary trash
- ☐ 2. By licensed disposal site:
- ☐ 3. By waste contractor:
- ☒ 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 | TITLE | TELEPHONE (Include Area Code) | E-MAIL ADDRESS |
|------|-------|-------------------------------|----------------|
|------|-------|-------------------------------|----------------|

Mail all future correspondence regarding this license to:
Methodist Hospital - 2501 South Broad Street - Philadelphia - PA

C. CERTIFYING OFFICIAL

I CERTIFY UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT

PRINTED NAME AND TITLE**SIGNATURE****DATE**

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.

RPS Medical Physics, LLC
4057 Highway 9 ~ PMB 116
Howell ~ NJ ~ 07731
Phone: 908-670-3535 ~ Fax: 732-415-0883

Decommissioning Radiation Survey & Wipe Test
Nuclear Medicine Services

Prepared for: Nuclear Medicine Department
St. Agnes Hospital
1900 South Broad Street
Philadelphia, PA

License #: NRC - 37-07942-01
PA - PA-0122

Licensee: Jefferson Health System
Methodist Hospital

Date: November 15, 2004

On this date, I performed the decommissioning radiation survey and wipe test analysis for the nuclear medicine department of St. Agnes Hospital. Specifics of these surveys are as follows:

Exposure Rate Survey:

Survey meter: Ludlum 14-C
SN: 70299

Calibration date: 7-16-2004

Background: 0.03 mR per hour

Data:

Diagram Page 1.

| <u>Position</u> | <u>Location</u> | <u>Exposure Rate</u> | <u>Acceptable</u> |
|-----------------|------------------|----------------------|-------------------|
| 1 | Camera Room # 1 | 0.03 | Yes |
| 2 | Camera Room # 1 | 0.03 | Yes |
| 3 | Camera Room # 1 | 0.03 | Yes |
| 8 | Office | 0.03 | Yes |
| 9 | Lavatory | 0.03 | Yes |
| 10 | RA Waste storage | 0.03 | Yes |
| 11 | Camera Room # 2 | 0.03 | Yes |
| 12 | Camera Room # 2 | 0.03 | Yes |
| 18 | Office | 0.03 | Yes |
| 19 | Office | 0.03 | Yes |
| 20 | Office | 0.03 | Yes |

| | | | |
|----|--------|------|-----|
| 21 | Office | 0.03 | Yes |
| 22 | Office | 0.03 | Yes |
| 23 | Office | 0.03 | Yes |

Diagram Page 2.

| <u>Position</u> | <u>Location</u> | <u>Exposure Rate</u> | <u>Acceptable</u> |
|-----------------|-------------------|----------------------|-------------------|
| 4 | Hot Lab L-block | 0.03 | Yes |
| 5 | Hot Lab Prep Area | 0.03 | Yes |
| 6 | Dose Calibrator | 0.03 | Yes |
| 7 | Hot Lab Floor | 0.03 | Yes |

Diagram Page 3.

| <u>Position</u> | <u>Location</u> | <u>Exposure Rate</u> | <u>Acceptable</u> |
|-----------------|-----------------|----------------------|-------------------|
| 13 | Camera Room # 2 | 0.03 | Yes |
| 14 | Camera Room # 2 | 0.03 | Yes |
| 15 | Camera Room # 2 | 0.03 | Yes |
| 16 | Camera Room # 2 | 0.03 | Yes |
| 17 | Camera Room # 2 | 0.03 | Yes |

Results: All areas within Camera Room # 1, Camera Room # 2, the Lavatory, the RA Waste storage room, the nuclear medicine department office and the hot lab show exposure levels that are equivalent to background.

Wipe Test:

Well counter: Ludlum-2200
Sodium Iodide (TI) crystal
Threshold = 70
Window = 700

Check source: 0.105 uCi of Cs-135 (4-29-86)

Source expected "dpm" = 129665

Source observed "net-cpm" = 42247

Counting efficiency = 3.06922 dpm per cpm
32.58%

Background = 459 cpm

Standard deviation - BKG = 21.4

Lower limit of detection = (std-bkg) * 4.66
99.8 net-cpm

Minimum detectable activity = (LLD) * Efficiency
306.4 net-dpm

Data:

Diagram Page 1.

| <u>Position</u> | <u>Location</u> | <u>Gross "cpm"</u> | <u>Net "cpm"</u> | <u>Net "dpm"</u> |
|-----------------|------------------|--------------------|------------------|------------------|
| 1 | Camera Room #1 | 580 | 221 | 678.3 |
| 2 | Camera Room #1 | 530 | 71 | 217.9 |
| 3 | Camera Room #1 | 560 | 101 | 310.0 |
| 8 | Office | 630 | 171 | 524.8 |
| 9 | Lavatory | 630 | 171 | 524.8 |
| 10 | RA Waste Storage | 640 | 181 | 555.5 |
| 11 | Camera Room #2 | 630 | 171 | 524.8 |
| 12 | Camera Room #2 | 560 | 101 | 310.0 |
| 18 | Office | 550 | 91 | 279.3 |
| 19 | Office | 590 | 131 | 402.1 |
| 20 | Office | 650 | 191 | 586.2 |
| 21 | Office | 670 | 211 | 647.6 |
| 22 | Office | 560 | 101 | 310.0 |
| 23 | Office | 620 | 161 | 494.1 |

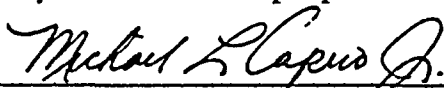
Diagram Page 2.

| <u>Position</u> | <u>Location</u> | <u>Gross "cpm"</u> | <u>Net "cpm"</u> | <u>Net "dpm"</u> |
|-----------------|-----------------|--------------------|------------------|------------------|
| 4 | Hot Lab L-block | 550 | 91 | 279.3 |
| 5 | Hot Lab Prep | 730 | 271 | 831.8 |
| 6 | Dose calibrator | 490 | 31 | 95.1 |
| 7 | Hot Lab Floor | 680 | 221 | 678.3 |

Diagram Page 3.

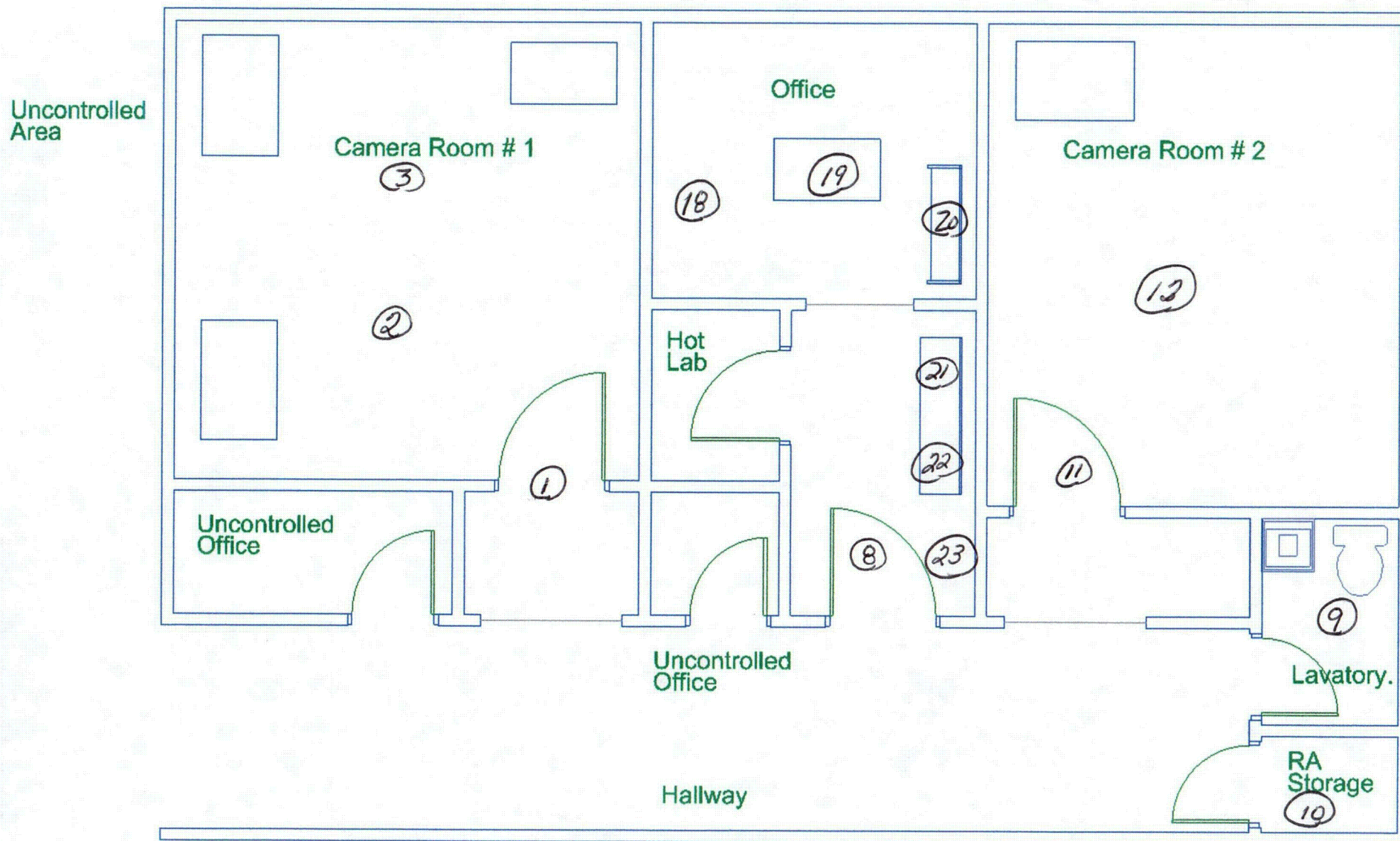
| <u>Position</u> | <u>Location</u> | <u>Gross "cpm"</u> | <u>Net "cpm"</u> | <u>Net "dpm"</u> |
|-----------------|-----------------|--------------------|------------------|------------------|
| 13 | Camera Room # 2 | 590 | 131 | 402.1 |
| 14 | Camera Room # 2 | 550 | 91 | 279.3 |
| 15 | Camera Room # 2 | 670 | 211 | 647.6 |
| 16 | Camera Room # 2 | 660 | 201 | 616.9 |
| 17 | Camera Room # 2 | 520 | 61 | 187.2 |

Results: All areas within Camera Room # 1, Camera Room # 2, the Lavatory, the RA Waste storage room, the nuclear medicine department office and the hot lab show levels of removable activity below 2000 net dpm per 100 cm².



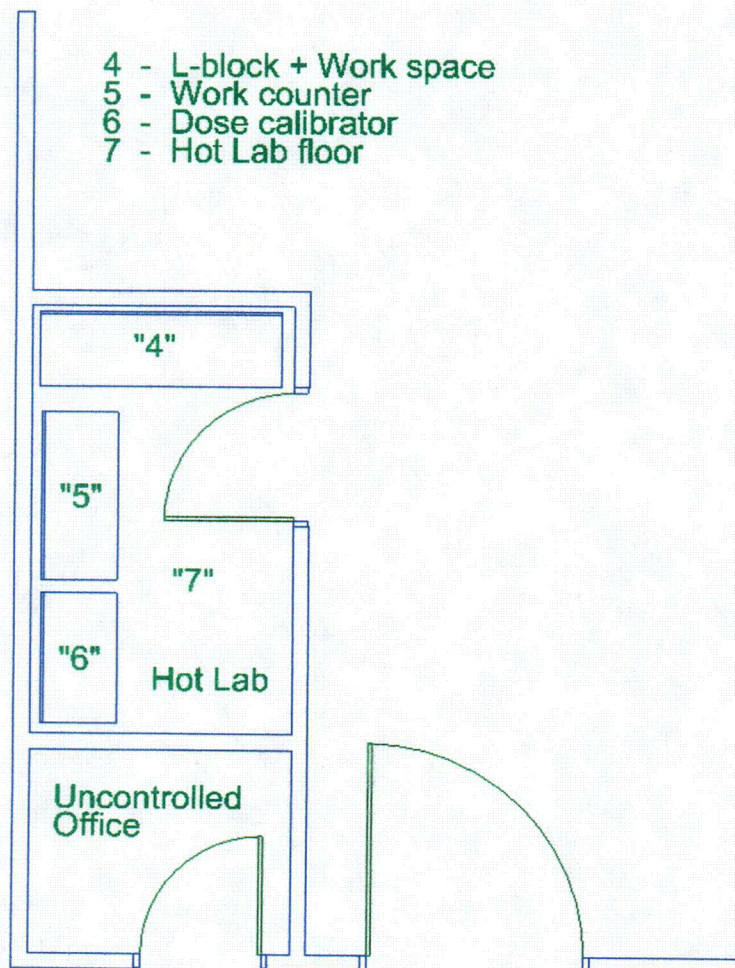
Michael L. Caprio, Jr., ScD, CHP, DABR
Certified Health Physicist, Diagnostic Radiological
and Medical Nuclear Physicist

St. Agnes Hospital
Nuclear Medicine Department



St. Agnes Hospital
Hot Lab

Scale: 1/4" = 1'



St. Agnes Hospital
Cardiac Stress Lab

Scale: 1/4" = 1'

