STAFFORD M. SMITH, M.D., F.A.C.P., F.A.C.C.

Scranton Heart Institute, P.C.

Suite #1; 233 Northern Boulevard
Clarks Summit, PA 18411-9304
(570) 586-0246
FAX (570) 585-8970
WEBSITE: www.scranton-heart.com

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RECEIVED
REGION 1

November 16, 2004

Nuclear Regulatory Commission
Region I
Nuclear Material Section B
631 Park Avenue
King of Prussia, PA 19406

(37-30976-01)

Please find the enclosed new application to establish a mobile nuclear service license for our facility located at 102 North Abington Road, Suite 103 in Clarks Summit, Pennsylvania.

If you need any additional information regarding this application, please do not hesitate to contact me directly at (570) 586-0246. This application is being submitted in accordance with NUREG 1556, Volume 9.

Sincerely,

Stafford M. Smith

STAFFORD M. SMITH

136030

NMSS/RGN1 MATERIALS-002

NRC FORM 313 (4-2004) 10 CFR 30, 32, 33, 34, 35, 36, 39, and 40

U.S. NUCLEAR REGULATORY COMMISSION

APPLICATION FOR MATERIAL LICENSE

APPROVED BY OMB: NO. 3150-0120 EXPIRES: 10/31/2005

Estimated burden per response to comply with this mandatory collection request: 7 hours. Submittal of the application is necessary to determine that the applicant is qualified and that adequate procedures exist to protect the public health and safety. 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, (3150-0120), 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.

INSTRUCTIONS: SEE THE APPROPRIATE LICENSE APPLICATION GUIDE FOR DETAILED INSTRUCTIONS FOR COMPLETING APPLICATION. SEND TWO COPIES OF THE ENTIRE COMPLETED APPLICATION TO THE NRC OFFICE SPECIFIED BELOW.

APPLICATION FOR DISTRIBUTION OF EXEMPT PRODUCTS FILE APPLICATIONS WITH:

DIVISION OF INDUSTRIAL AND MEDICAL NUCLEAR SAFETY
OFFICE OF NUCLEAR MATERIALS SAFETY AND SAFEGUARDS
U.S. NUCLEAR REGULATORY COMMISSION
WASHINGTON, DC 20555-0001

ALL OTHER PERSONS FILE APPLICATIONS AS FOLLOWS:

IF YOU ARE LOCATED IN:

ALABAMA, CONNECTICUT, DELAWARE, DISTRICT OF COLUMBIA, FLORIDA, GEORGIA, KENTUCKY, MAINE, MARYLAND, MASSACHUSETTS, MISSISSIPPI, NEW HAMPSHIRE, NEW JERSEY, NEW YORK, NORTH CAROLINA, PENNSYLVANIA, PUERTO RICO, RHODE ISLAND, SOUTH CAROLINA, TENNESSEE, VERMONT, VIRGINIA, VIRGIN ISLANDS, OR WEST VIRGINIA, SEND APPLICATIONS TO:

LICENSING ASSISTANCE TEAM
DIVISION OF NUCLEAR MATERIALS SAFETY
U.S. NUCLEAR REGULATORY COMMISSION, REGION I
475 ALLENDALE ROAD
KING OF PRUSSIA, PA 19406-1415

IF YOU ARE LOCATED IN:

ILLINOIS, INDIANA, IOWA, MICHIGAN, MINNESOTA, MISSOURI, OHIO, OR WISCONSIN, SEND APPLICATIONS TO:

MATERIALS LICENSING BRANCH
U.S. NUCLEAR REGULATORY COMMISSION, REGION III
2443 WARRENVILLE ROAD, SUITE 210
LISLE, IL 60532-4352

ALASKA, ARIZONA, ARKANSAS, CALIFORNIA, COLORADO, HAWAII, IDAHO, KANSAS, LOUISIANA, MONTANA, NEBRASKA, NEVADA, NEW MEXICO, NORTH DAKOTA, OKLAHOMA, OREGON, PACIFIC TRUST TERRITORIES, SOUTH DAKOTA, TEXAS, UTAH, WASHINGTON, OR WYOMING, SEND APPLICATIONS TO:

LL 30976
03036758
02220

NUCLEAR MATERIALS LICENSING BRANCH
U.S. NUCLEAR REGULATORY COMMISSION, REGION IV
611 RYAN PLAZA DRIVE, SUITE 400
ARLINGTON, TX 76011-4005

(37-30976-01)

PERSONS LOCATED IN AGREEMENT STATES SEND APPLICATIONS TO THE U.S. NUCLEAR REGULATORY COMMISSION ONLY IF THEY WISH TO POSSESS AND USE LICENSED MATERIAL IN STATES SUBJECT TO U.S.NUCLEAR REGULATORY COMMISSION JURISDICTIONS.

1. THIS IS AN APPLICATION FOR *(Check appropriate item)*

- [x] A. NEW LICENSE
- [ ] B. AMENDMENT TO LICENSE NUMBER _____
- [ ] C. RENEWAL OF LICENSE NUMBER _____

2. NAME AND MAILING ADDRESS OF APPLICANT *(Include ZIP code)*

Scranton Heart Institute, PC
233 Northern Blvd.
Suite #1
Clarks Summit, PA 18411

3. ADDRESS WHERE LICENSED MATERIAL WILL BE USED OR POSSESSED

Scranton Heart Institute, PC
102 North Abington Road
Suite 103
Clarks Summit, PA 18411

4. NAME OF PERSON TO BE CONTACTED ABOUT THIS APPLICATION

Stafford M. Smith, MD

TELEPHONE NUMBER

(570) 586-0246

SUBMIT ITEMS 5 THROUGH 11 ON 8-1/2 X 11" PAPER. THE TYPE AND SCOPE OF INFORMATION TO BE PROVIDED IS DESCRIBED IN THE LICENSE APPLICATION GUIDE.

5. RADIOACTIVE MATERIAL
a. Element and mass number; b. chemical and/or physical form; and c. maiximum amount which will be possessed at any one time.

6. PURPOSE(S) FOR WHICH LICENSED MATERIAL WILL BE USED.

7. INDIVIDUAL(S) RESPONSIBLE FOR RADIATION SAFETY PROGRAM AND THEIR TRAINING EXPERIENCE.

8. TRAINING FOR INDIVIDUALS WORKING IN OR FREQUENTING RESTRICTED AREAS.

9. FACILITIES AND EQUIPMENT.

10. RADIATION SAFETY PROGRAM.

11. WASTE MANAGEMENT.

12. LICENSE FEES *(See 10 CFR 170 and Section 170.31)*
FEE CATEGORY 1A | AMOUNT ENCLOSED $ 1,400.00

13. CERTIFICATION. *(Must be completed by applicant)* THE APPLICANT UNDERSTANDS THAT ALL STATEMENTS AND REPRESENTATIONS MADE IN THIS APPLICATION ARE BINDING UPON THE APPLICANT.

THE APPLICANT AND ANY OFFICIAL EXECUTING THIS CERTIFICATION ON BEHALF OF THE APPLICANT, NAMED IN ITEM 2, CERTIFY THAT THIS APPLICATION IS PREPARED IN CONFORMITY WITH TITLE 10, CODE OF FEDERAL REGULATIONS, PARTS 30, 32, 33, 34, 35, 36, 39, AND 40, AND THAT ALL INFORMATION CONTANED HEREIN IS TRUE AND CORRECT TO THE BEST OF THEIR KNOWLEDGE AND BELIEF.

WARNING: 18 U.S.C. SECTION 1001 ACT OF JUNE 25, 1948 62 STAT. 749 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.

CERTIFYING OFFICER -- TYPED/PRINTED NAME AND TITLE	SIGNATURE	DATE
STAFFORD M. SMITH, M.D.	Stafford M. Smith	11/17/04

FOR NRC USE ONLY

TYPE OF FEE	FEE LOG	FEE CATEGORY	AMOUNT RECEIVED	CHECK NUMBER	COMMENTS
			$		
APPROVED BY				DATE	136030

ITEMS 5&6 - RADIOACTIVE MATERIAL and PURPOSE

The facility will be outfitted with a set of sealed sources for equipment calibration. Each site will use the same series sources.

Byproduct Material	Form	Amount	Purpose
Material listed in 35.200	Any	As Needed	Medical Use of Unsealed Byproduct Material for Localization & Imaging Studies
Cs-137	Sealed Isotope Products RV series (or equivalent)	>300 uCi	Reference Standard and Calibration
Co-57	Sealed Isotope Products RV series (or equivalent)	>10 mCi	Reference Standard and Calibration
Co-57 (flood)	Sealed Isotope Products FL series (or equivalent)	>15 mCi	Reference Standard and Calibration
Gadolinium-148			Reference Standard and Calibration

ITEM 7 – INDIVIDUALS RESPONSIBLE FOR RADIATION SAFETY PROGRAM AND TRAINING AND EXPERIENCE

7.1 AUTHORIZES USERS

Please find the enclosed training and experience for Dr. Stafford Smith appended as attachment (ATT) 7.1.1. Included are a certificate of 200 hours of didactic training (Supplement A) and a preceptor statement showing the required work, laboratory and clinical experience (Supplement B). Dr. Smith would like to be approved to handle all of the material listed in part 5 to this application.

7.3 RADIATION SAFETY OFFICER

Dr. Smith would also like to be listed as the radiation safety officer for this license. A delegation of authority is attached as ATT 10.1.

Health & Radiological Seminars, Inc.

Hereby certifies that

Stafford Smith, M.D.

has successfully completed the 200 Hour Physician Training Program in Basic Radioisotope Handling conducted in accordance with the requirements of the U.S. Nuclear Regulatory Commission (10 CFR 35).

COURSE OUTLINE

Radiation Physics and Instrumentation - 100 hours
Mathematics pertaining to the use and measurement of radioactivity - 20 hours
Radiopharmaceutical Chemistry - 30 hours
Radiation Biology - 20 hours
Radiation Protection - 30 hours

December 10, 2001

Barbara E. Rinehart
Course Director

David J. Goodenough, Ph.D
Scientific Advisor

Health and Radiological Seminars Inc.
3 Hillcrest Drive, Suite 200A, Frederick, MD 21703 Fax# (301) 662-9161
(301) 663-8141
(800) 969-4774

December 10, 2001

Stafford Smith, M.D.
[redacted]

Dear Dr. Smith:

Congratulations on successfully completing your 200 didactic hours in "Basic Handling of Radioisotopes" with our Health and Radiological Seminars program.

In this package you will find the materials that you will need for licensure:

- Certificate which states that you have completed the 200 didactic training
- A sample letter your preceptor will write on your behalf to confirm that you have completed over 500 hours of supervised isotope handling.
- A sample letter your preceptor will write on your behalf to confirm that you have completed over 500 hours clinical training.
- NRC State Program Directory

We wish you the best of luck with your licensing. If there is anyway we can be of assistance in the future, please do not hesitate to contact us. If you ever get the chance to drop us a line or call, we would love to hear of your progress.

Once again, thank you and good luck.

Very best regards,

Barbara E. Rinehart
Course Director

DIGIRAD
Imaging Solutions

...Today's Leader in Mobile Nuclear Cardiac Imaging

May 22, 2002

To Whom It May Concern:

It is with pleasure that I am writing this letter on behalf of Stafford M. Smith, M.D.

Dr. Smith is a practicing cardiologist with > 10 years of clinical experience in good standing. He completed a cardiology fellowship where he participated in the performance and interpretation of nuclear cardiac studies. He logged a total of 408 procedures during his fellowship at the Philadelphia Heart Institute (under the direction of Dr. Abdulmassih Iskandrian).

Dr. Smith opened the Scranton Heart Institute, P.C. in June of 2000. At that time he began doing nuclear cardiac studies in his office in contract with Digirad Imaging Systems, Inc. under my supervision. As of this date he has completed 192 such studies. All of these studies were performed and interpreted by Dr. Smith according to the highest academic and administrative standards. I personally overlooked his results and I am completely satisfied with the quality of their administration, interpretation, and of his performance.

Dr. Smith has put in an excess of on-site personal time and effort to achieve excellence in the performance and interpretation of his nuclear cardiac studies. He easily has contributed in excess of the required 500 hours to fulfill the regulation for nuclear licensure *[CFR 35.920 (b) 2 and 3].* (I am an authorized user according to current U.S. Nuclear Regulatory Commission [USNRC] requirements.)

Dr. Smith has completed the Health and Radiological Seminars, Inc. course (200 hours) to meet USNRC *10 CFR 35.* I note that he has received the endorsement of Olindo Preli, M.D. (Director of Nuclear Cardiac Imaging) at Community Medical Center and Mercy Hospital in Scranton, PA to be provided privileges to read nuclear cardiac studies at these institutions, and he currently serves on the hospital Nuclear Cardiac Imaging Reading Panel at Tyler Memorial Hospital in Tunkhannock, PA.

Therefore, I believe that Dr. Smith has provided in excess of the USNRC requirements for both nuclear licensure, and to read nuclear cardiac studies at any hospital institution. I personally endorse his attempts to be provided with clinical privileges for this. Please let me know if I can be of any further assistance regarding this matter.

Best regards,

David D. Macbeth
Clinical Operations Manager
Digirad Imaging Solutions, Inc.

Mid – Atlantic
7584 Morris Court, Suite 228
Allentown, PA 18106
Phone 610-366-3934
Fax 610-366-1483

Mid – West
1246 Brittan Road
Akron, OH 44310
Phone 330-633-1878
Fax 330-633-1967

Florida
7824 Causeway Blvd., Suite B
Tampa, FL 33619
Phone 813-620-3800
Fax 813-620-0909

San Diego
9350 Trade Place
San Diego, CA 92126-6334
Phone 858-578-5300
Fax 858-549-7714

HERMAN, GARDEN, NIERENBERG AND COOPER CARDIOLOGY ASSOCIATES, P.C.

THOMAS JEFFERSON UNIVERSITY HOSPITAL

111 S. 11TH STREET - SUITE 6120 - PHILADELPHIA, PA 19107 - (215) 923-0690 - FAX: (215) 923-1062

1339 PORTER STREET - PHILADELPHIA, PA 19148 - (215) 389-0600 - FAX: (215) 389-0604

WALTER M. HERMAN, M.D., F.A.C.C.
JACK L. GARDEN, M.D., F.A.C.C.
STEVEN J. NIERENBERG, M.D., F.A.C.C.
GLENN S. COOPER, M.D., F.A.C.C.

May 2, 2002

RE: Stafford M. Smith

To Whom It May Concern,

Dr. Smith has asked me to provide a letter verifying his training during his cardiology fellowship at the Philadelphia Heart Institute. During his tenure as a fellow, I served as the Program Director.

This letter is to confirm that Dr. Stafford Smith completed a two year cardiology fellowship from July 1, 1989 through June 30, 1991. During that time, Dr. Smith completed all aspects of his cardiology fellowship and subsequently graduated in good standing. He was accepted into an interventional fellowship at the Medical College of Virginia. During his fellowship, Dr. Smith rotated through our nuclear cardiology service which was headed by Dr. Ami Iskandrian, a nationally and internationally known nuclear cardiologist. Dr. Smith completed a total of 12 weeks of nuclear cardiology. He kept a log book of his experience there for documentation.

If any further questions are required, please do not hesitate to contact me.

Sincerely,

Steven J. Nierenberg, M.D., F.A.C.C.
Cardiology Fellowship Director,
Presbyterian University of
Pennsylvania Medical Center
Philadelphia Heart Institute
1988 - 1996

SJN/jmp

cc: Stafford M. Smith, M.D.

UAB SCHOOL OF MEDICINE

Department of Medicine

May 3, 2002

Stafford M. Smith, M. D., F.A.C.P., F.A.C.C.
Scranton Heart Institute, P.C.
233 Northern Boulevard, Suite #1
Clarks Summit, PA 18411-9304

Dear Dr. Smith:

This letter is to confirm that while you were in the Cardiology Fellowship training program at Philadelphia Heart Institute, you spent three months of training in Nuclear Cardiology under my supervision. You were involved in the performance and interpretation of some 300 studies.

Wish you well in your continued interest in the field.

Sincerely,

Ami E. Iskandrian, M. D., F.A.C.C., F.A.H.A.
Distinguished Professor of Medicine and Radiology
Director, Nuclear Cardiology
Division of Cardiovascular Disease

Nuclear Cardiology
Division of Cardiovascular Disease
311 Tinsley Harrison Tower
1900 University Boulevard
205.934.0545 • Fax 205.934.7579
aiskand@uab.edu

The University of
Alabama at Birmingham
Mailing Address:
THT 311
1530 3RD AVE S
BIRMINGHAM AL 35294-0006

ITEM 8 – TRAINING FOR INDIVIDUALS WORKING IN OR FREQUENTING RESTRICTED AREAS

7A TRAINING PROGRAM

The facility will follow the Model Training Program as listed in Appendix A of Regulatory Guide 10.8.

ITEM 9 – FACILITIES AND EQUIPMENT

9.1 ANNOTATED DRAWING

Appended as 9.1.1 is an annotated drawing of the facility and adjacent areas to where the byproduct material will be stored and used located at 102 North Abington Road, Suite 103, Clarks Summit, PA.

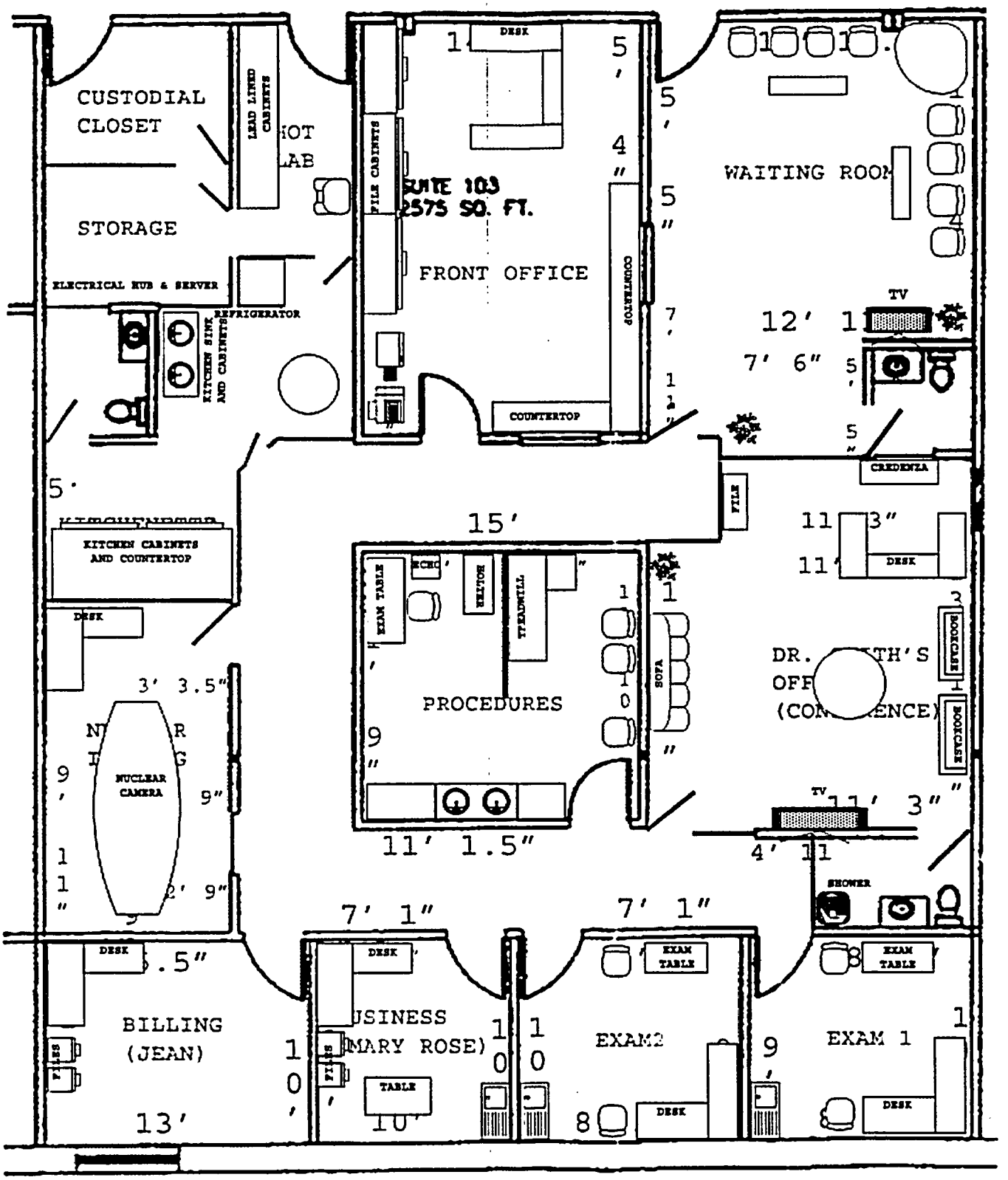
9.2 SURVEY INSTRUMENT CALIBRATION

The facility will possess two survey meters (Ludlum 14C or equivalent). These meters will be calibrated by A.M. Calibration located in Gaithersurg, Maryland or equivalent licensed facility subject to the Model Procedure for Calibrating Survey Instruments illustrated in Appendix B of Regulatory Guide 10.8.

9.3 DOSE CALIBRATOR CALIBRATION

The facility will possess one dose calibrator
Capintec, model 15W, serial TBD or equivalent range dose calibrator

This facility will follow the Model Program for Calibrating Dose Calibrators as illustrated in Appendix C of Regulatory Guide 10.8 for Calibration Procedures.



SCRANTON HEART INSTITUTE, P.C. OFFICE
SUITE #103; 102 NORTH ABINGTON ROAD
CLARKS SUMMIT, PA

9.4 PERSONNEL MONITOR PROGRAM

The facility will follow the Model Personnel External Exposure Monitoring Program illustrated in Appendix D of Regulatory Guide 10.8. Dosimetry services will be provided by Radiation Detection Company or any other NVLAP approved facility.

9.5 IMAGING EQUIPMENT

This facility will be equipped with a Siemens Gamma Camera, Model TBD or equivalent gamma camera equipment.

ATT 9.6 OTHER EQUIPMENT

The facility will also be equipped with

1 – Well Counter adapter for Capintec dose calibrator 15W or equivalent
1- L-shield
1 – Set of lead pigs and other radiation safety devices

ITEM 10 – RADIATION SAFETY PROGRAM

10.1 RADIATION SAFETY COMMITTEE/RADIATION SAFETY OFFICER

This facility is not listed as an institution and will not have a radiation safety committee. Please find the Radiation Safety Officer delegation of authority attached as ATT 10.1.1 which will be posted at each site.

ATT 10.1 Radiation Safety Officer Delegation of Authority

Memo To: All Employees
From: Stafford M. Smith, MD and Scranton Heart Institute
Subject: Delegation of Authority

Stafford Smith, MD has been appointed Radiation Safety Officer and is responsible for ensuring the safe use of radiation at this facility. The Radiation Safety Officer is responsible for managing the radiation safety program; identifying radiation safety problems; initiating, recommending, or providing corrective actions; verifying implementation of corrective actions; and ensuring compliance with regulations. The Radiation Safety Officer is hereby delegated the authority necessary to meet those responsibilities.

The Radiation Safety Officer is also responsible for assisting the Radiation Safety Committee, if applicable, in the performance of its duties and serving as its secretary.

10.2 ALARA PROGRAM

The facility will use the Model Program for Maintaining Occupational Radiation Exposure at Medical Institutions ALARA Program as attached as illustrated in Appendix G of Regulatory Guide 10.8. Please find the attached program for these facilities attached as ATT 10.2.

ALARA PROGRAM

Scranton Heart Institute, PC

Licensee's Name

September 16, 2004

Date of Implementation

1. Management Commitment

We, the management of this medical facility, are committed to the program described herein for keeping individual and collective doses as low as is reasonable achievable (ALARA). In accord with this commitment, we hereby describe an administrative organization for radiation safety and will develop the necessary written policy, procedures, and instructions to foster the ALARA concept within our institution. The organization will include a Radiation Safety Officer (RSO).

We will perform a formal annual review of the radiation safety program, including ALARA considerations. This will include reviews of operating procedures and past dose records, inspections, etc. and consultations with the radiation safety staff or outside consultants.

Modifications to operating and maintenance procedures and to equipment and facilities will be made if they will reduce exposure unless the cost, in our judgment, is considered to be unjustified. We will be able to demonstrate, if necessary, that improvements have been sought, that modifications have been considered, and that they have been implemented when reasonable. If modifications have been recommended but not implemented, we will be prepared to describe the reasons for not implementing them.

In addition to maintaining doses to individuals as far below the limits as is reasonably achievable, the sum of the doses received by all exposed individuals will also be maintained at the lowest practicable level. It would not be desirable, for example, to hold the highest doses to individuals to some fraction of the applicable limit if this involved exposing additional people and significantly increasing the sum of radiation doses received by all involved individuals.

2. **Radiation Safety Committee - Not applicable for this facility.**

Delegation of Authority – Management of this facility will support the RSO when it is necessary for the RSO to assert authority.

3. **Radiation Safety Officer**

Review of ALARA Program

The RSO will encourage all users to review current procedures and develop new procedures as appropriate to implement the ALARA concept.

The RSO will perform a quarterly review of occupational radiation exposure with particular attention to instances in which the investigation levels in Table 1 are exceeded. The principal purpose of this review is to assess trends in occupational exposure as an index of the ALARA program quality and to decide if action is warranted when investigation levels are exceeded.

TABLE 1

INVESTIGATION LEVELS

	Investigation levels in (mrems per calendar quarter) Level I	Level II
1. Whole Body; head and trunk Active blood-forming organs; Lens of eyes; or gonads	125	375
2. Hands and forearms; feet and Ankles	1875	5625
3. Skin of whole body	750	2250

The RSO will evaluate our facilities overall efforts for maintaining doses ALARA on an annual basis. This review will include the efforts of the RSO, authorized users and workers as well as those of management.

ANNUAL AND QUARTERLY REVIEW

Annual review of the radiation safety program. The RSO will perform an annual review of the radiation safety program for adherence to ALARA concepts. Reviews of specific methods of use may be conducted on a more frequent basis.

Quarterly review of occupational exposures. The RSO will review at least quarterly the external radiation doses of authorized users and workers to determine that their doses are ALARA in accordance with the provisions of Section 6 of this program.

Quarterly review of records of radiation surveys. The RSO will review radiation surveys in unrestricted and restricted areas to determine that dose rates and amounts of contamination were at ALARA levels during the previous quarter.

EDUCATION RESPONSBILITIES FOR ALARA PROGRAM

The RSO will schedule briefings and educational sessions to inform workers of ALARA program efforts.

The RSO will ensure that authorized users, workers and ancillary personnel who may be exposed to radiation will be instructed in the ALARA philosophy and informed that management and the RSO are committed to implementing the ALARA concept.

COOPERATIVE EFFORTS FOR DEVELOPMENT OF ALARA PROCEDURES

Radiation workers will be given opportunities to participate in formulating the procedures that they will be required to follow.

The RSO will be in close contact with all users and workers in order to develop ALARA procedures for working with radioactive materials.

The RSO will establish procedures for receiving and evaluating the suggestions of individual workers for improving health physics practices and will encourage the use of those procedures.

Reviewing instances of deviation from good ALARA practices

The RSO will investigate all known instances of deviation from good ALARA practices and, if possible, will determine the causes. When the cause is known, the RSO will implement changes in the program to maintain doses ALARA.

AUTHORIZED USERS

New methods of use involving potential radiation doses

The authorized user will consult with the RSO and/or RSC during the planning stage before using radioactive materials for new uses.

The authorized user will review each planned use of radioactive material to ensure that doses will be kept ALARA. Trial runs may be helpful.

Authorized user's responsibility to supervised individuals

The authorized user will explain the ALARA concept and the need to maintain exposures ALARA to all supervised individuals.

The authorized user will ensure that supervised individuals who are subject to occupational radiation exposure are trained and educated in good health physics practices and in maintaining exposures ALARA.

INDIVIDUALS WHO RECEIVE OCCUPATIONAL RADIATION DOSES

Workers will be instructed in the ALARA concept and its relationship to work procedures and work conditions.

Workers will be instructed in recourses available if they feel that ALARA is not being promoted on the job.

ESTABLISHMENT OF INVESTIGATIONAL LEVELS IN ORDER TO MONITOR INDIVIDUAL OCCUPATIONAL EXTERNAL RADIATION DOSES

This institution hereby establishes investigational levels for occupational external radiation doses which, when exceeded, will initiate review or investigation by the RSO and/or the RSO. The investigational levels that we have adopted are listed in Table 1. These levels apply to the exposure of individual workers.

The RSO will review and record on Form NRC-5 "Current Occupational External Radiation Exposures," or an equivalent form results of personnel monitoring not less than once in any calendar quarter as required by 20.401 or 10 CFR Part 20. The following actions will be taken at the investigational levels as stated in Table 1:

Personnel dose less than investigational Level I.

Except when deemed appropriate by the RSO, no further action will be taken in those cases where an individual's dose is less than Table 1 values for the Investigational Level I.

Personnel dose equal to or greater than Investigational Level I but less than Investigational Level II.

The RSO will review the dose of each individual whose quarterly dose equals or exceeds Investigational Level I. The RSO will compare these doses to other industry standards performing similar tasks as an index of ALARA program quality and will record the review. If the dose does not equal or exceed Investigation Level II, no action related specifically to the exposure is required unless deemed appropriate.

Personnel dose equal to or greater than Investigational Level II.

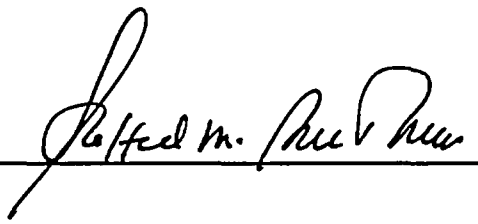
The RSO will investigate in a timely manner the causes of all personnel doses equaling or exceeding Investigational Level II and, if warranted, will take action.

Reestablishment of investigational levels to levels above those listed in Table 1.

In cases where a worker's or a group of workers' doses need to exceed an investigational level, a new, higher investigational level may be established for that individual or group on the basis that it is consistent with good ALARA practices. Justification for new investigational levels will be documented.

Signature of Certifying Official

I hereby certify that this facility has implemented the ALARA program set forth above.



Signature

STAFFORD M. SMITH, M.D.

Name (Printed)

RSO

Title

11/17/04

Date

10.3 LEAK TEST

The facility will implement the Model Procedure for Leak-Testing Sealed Sources as listed as Appendix H of Regulatory Guide 10.8.

10.4 SAFE USE OF RADIOPHARMACEUTICALS

The facility will implement the Model Rules for the Safe Use of Radiopharmaceuticals as listed as Appendix I of Regulatory Guide 10.8.

10.5 SPILL PROCEDURES

The facility will implement the Model Spill Procedures as listed in Appendix J of Regulatory Guide 10.8.

10.6 ORDERING AND RECEIVING RADIOACTIVE MATERIALS

The facility will implement the Model Guidance for Ordering and Receiving Radioactive Material as listed in Appendix K of Regulatory guide 10.8.

10.7 OPENING PACKAGES

The facility will implement the Model Procedure for Safely Opening Packages Containing Radioactive Material as listed in Appendix L of Regulatory Guide 10.8.

10.8 UNIT DOSAGE RECORDS

The facility will implement the Model Program for Unit Dosage Records as listed in Appendix M.1 of Regulatory Guide 10.8.

10.9 MULTIDOSE VIAL RECORDS

If applicable, the facility will implement the Model Program for Multi-dosage vial use as listed in Appendix M.2 of Regulatory Guide 10.8.

10.10 MOLYBDENUM CONCENTRATION RECORDS

N/A

10.11 IMPLANT SOURCE USE RECORDS

N/A

10.12 AREA SURVEY PROCEDURES

The facility will implement the Model Procedure for Area Surveys as listed in Appendix N of Regulatory Guide 10.8. The facility will also adopt the Recommended Action Levels as illustrated in Table N-1 of Regulatory Guide 10.8.

10.13 AIR CONCENTRATION CONTROL

N/A

10.14 RADIOPHARMACEUTICAL THERAPY

N/A

10.15 IMPLANT THERAPY

N/A

10.16 OTHER SAFETY PROCEDURES

N/A

ITEM 11 – WASTE MANAGEMENT

11.1 WASTE DISPOSAL

The facility will implement the Model Procedure for Waste Disposal listed as Appendix R of Regulatory Guide 10.8.

11.2 OTHER WASTE DISPOSAL

All sealed sources will be returned to the manufacturer in their approved provided return kits. For all other procedures see Item 11.1.

This is to acknowledge the receipt of your letter/application dated

11/17/2009, and to inform you that the initial processing which includes an administrative review has been performed.

☑ NEW LICENSE APPLICATION (030 36758)
There were no administrative omissions. Your application was assigned to a technical reviewer. Please note that the technical review may identify additional omissions or require additional information.

☐ Please provide to this office within 30 days of your receipt of this card

_____.

A copy of your action has been forwarded to our License Fee & Accounts Receivable Branch, who will contact you separately if there is a fee issue involved.

Your action has been assigned **Mail Control Number** 136030.
When calling to inquire about this action, please refer to this control number.
You may call us on (610) 337-5398, or 337-5260.

NRC FORM 532 (RI)
(6-96)

Sincerely,
Licensing Assistance Team Leader

BETWEEN:

License Fee Management Branch, ARM
and
Regional Licensing Sections

(FOR LFMS USE)
INFORMATION FROM LTS

Program Code: 02220
Status Code: 3
Fee Category: _____
Exp. Date: 0
Fee Comments: _____
Decom Fin Assur Reqd: _

LICENSE FEE TRANSMITTAL

A. REGION I

1. APPLICATION ATTACHED
   Applicant/Licensee: SCRANTON HEART INSTITUTE, PC
   Received Date: 20041126
   Docket No: 3036758
   Control No.: 136030
   License No.: 37-30976-01
   Action Type: New Licensee

2. FEE ATTACHED
   Amount: $1,400.00
   Check No.: 2137

3. COMMENTS

Signed M. A. Perkins
Date 11/30/2004

B. LICENSE FEE MANAGEMENT BRANCH (Check when milestone 03 is entered /__/)

1. Fee Category and Amount: _____

2. Correct Fee Paid. Application may be processed for:
   Amendment _____
   Renewal _____
   License _____

3. OTHER _____
   _____

Signed _____
Date _____