

U.S. NUCLEAR REGULATORY COMMISSION		Date: 06/15/2005															
TELEPHONE CONVERSATION RECORD		Time: 11:15 AM															
Mail Control or Report No(s).	137025	License No(s).	29-16585-01 Docket No(s). 030-11347														
<table> <tr> <td>Name of Licensee:</td> <td>Hackettstown Community Hospital</td> </tr> <tr> <td>Name of Participant(s):</td> <td>Elaine Rovazzi, Physicist</td> </tr> <tr> <td>Telephone No.</td> <td>973-322-5118</td> </tr> <tr> <td>Subject:</td> <td>Amendment Request</td> </tr> <tr> <td colspan="2"> <small>(NOTE: This will be used as the Documents Title in ADAMS)</small> </td> </tr> <tr> <td>Summary:</td> <td> Phoned Ms. Rovazzi at 9:00 AM to discuss the hospital's request to amend their license to add a new Authorized User (AU) and include a name change. Ms. Rovazzi was not available but returned my call at 11:15 AM. I inquired whether the hospital wanted to include 35.100 for Dr. Clay Hinrichs along with 35.200. She indicated that they wanted 35.100 and 35.200 for Dr. Hinrichs. She stated that the omission of 35.100 from their request was a mistake. I also asked if the name change involved a change of ownership. She indicated that it was a name change only. </td> </tr> <tr> <td>Action Required:</td> <td>Amend license to add new AU and change the licensee's name to Hackettstown Regional Medical Center.</td> </tr> </table>				Name of Licensee:	Hackettstown Community Hospital	Name of Participant(s):	Elaine Rovazzi, Physicist	Telephone No.	973-322-5118	Subject:	Amendment Request	<small>(NOTE: This will be used as the Documents Title in ADAMS)</small>		Summary:	Phoned Ms. Rovazzi at 9:00 AM to discuss the hospital's request to amend their license to add a new Authorized User (AU) and include a name change. Ms. Rovazzi was not available but returned my call at 11:15 AM. I inquired whether the hospital wanted to include 35.100 for Dr. Clay Hinrichs along with 35.200. She indicated that they wanted 35.100 and 35.200 for Dr. Hinrichs. She stated that the omission of 35.100 from their request was a mistake. I also asked if the name change involved a change of ownership. She indicated that it was a name change only.	Action Required:	Amend license to add new AU and change the licensee's name to Hackettstown Regional Medical Center.
Name of Licensee:	Hackettstown Community Hospital																
Name of Participant(s):	Elaine Rovazzi, Physicist																
Telephone No.	973-322-5118																
Subject:	Amendment Request																
<small>(NOTE: This will be used as the Documents Title in ADAMS)</small>																	
Summary:	Phoned Ms. Rovazzi at 9:00 AM to discuss the hospital's request to amend their license to add a new Authorized User (AU) and include a name change. Ms. Rovazzi was not available but returned my call at 11:15 AM. I inquired whether the hospital wanted to include 35.100 for Dr. Clay Hinrichs along with 35.200. She indicated that they wanted 35.100 and 35.200 for Dr. Hinrichs. She stated that the omission of 35.100 from their request was a mistake. I also asked if the name change involved a change of ownership. She indicated that it was a name change only.																
Action Required:	Amend license to add new AU and change the licensee's name to Hackettstown Regional Medical Center.																
Prepared By: Willie J. Lee		Date: June 15, 2005															