COLLEEN CAROL CASEY
MATERIALS LICENSING BRANCH
UNITED STATES NUCLEAR REGULATORY COMMISSION
REGION III
2443 WARRENVILLE ROAD STE 210
LISLE, ILLINOIS 60532-4352
OFFICE: (630)-829-9841 FAX: (630) 829-9782 or (630) 515-1259

CONVERSATION RECORD | TIME C3 left msg w/ Call center person | DATE @ 6:47pm CT. on **September 2, 2005**

ACTUALLY FAXED? YES.

NAME OF PERSON(S) CONTACTED	ORGANIZATION	TELEPHONE NO.
James Botti, MS, proposed RSO for St. John Macomb Hospital		734-662-3197

SUBJECT
License No.: 21-01190-05 Control No.: 314270

SUMMARY
We have reviewed your application dated March 10, 2005, and your letters dated March 10, 2005, July 27, 2005, and September 1, 2005, requesting renewal of your byproduct materials license and find that we need additional information as follows:

1. The letter dated July 27, 2005, requests that you be named "Nuclear Medicine RSO" for the license. I noted that this license currently has two RSOs, one for nuclear medicine and one for radiation therapy.

   As NRC can no longer authorize multiple RSOs for medical use licenses, pursuant to a recent internal interpretation of 10 CFR 35.24, only one RSO can be named to this license. **Please respond by advising us who should be the sole RSO for this license, you or Mr. Taylor.**

2. The letter dated September 1, 2005,requested the removal of cesium-137 from your license. It is not clear whether your intention is to delete all authorization for materials in 10 CFR 35.400 or just cesium-137. **Please clarify your specific intentions in this regard.**

   Please note that we will be unable to delete your authorization for either just cesium-137 brachytherapy materials or all materials in 10 CFR 35.400 until the following additional information is responded to:

   a. **Please clarify** whether you ever possessed any cesium-137 or materials in 10 CFR 35.400 under this license. If you did not, please so state.

      If you did, please provide the following:

      1. **Please submit** a description and list of the cesium-137 inventory (manufacturer's name(s) and model nos.) or materials possessed under 10 CFR 35.400 and indicate when the last use of such materials took place (month and year). 6/03

missing

2. **Please forward** a copy of the final leak test results of the last sealed sources (especially cesium-137) possessed under 10 CFR 35.400. In lieu of submitting the final leak test results, a comprehensive close-out survey of areas where 10 CFR 35.400 materials were used/stored may be submitted.

But no mtg/model no Ram mentioned for other 35.400 materials (Ref

The survey should consist of exposure rate measurements to show that all sources of radioactive material have been removed, and contamination checks of areas where radioactive materials were used or stored. Average radiation levels associated with surface contamination and removable contamination should not exceed those specified in our decontamination guide (if you do not have a copy of this document please let me know and a copy will be either be faxed or mailed to you).

Please submit the following information with your close-out survey:

a. A diagram of the facility with survey and wipe test results keyed to specific locations.

N/A. Room still in use for other Brachy.

b. The name of the person performing the survey.

c. The date the survey was performed.

d. The instrument(s) used for exposure rate measurements and for analysis of the wipes.

e. Background readings, each instruments' efficiency or correction factor and the radionuclide standards used to determine the efficiency/correction factor.

f. The date(s) that the survey instruments were last calibrated.

3. **Please forward** a copy of the final disposition of cesium-137 or materials possessed under 10 CFR 35.400 and the acknowledgment of receipt from each recipient of said materials (vendors, other specific licensees who accepted transfer of sources, etc.). This is necessary to determine that the sources were disposed of to authorized recipients who were licensed to possess them.

OK.

4. As a room was used to store the cesium-137 or sealed sources possessed under 10 CFR 35.400, **please advise** us as to whether this room is now decommissioned of all licensed materials and unrestricted in use. Advise us whether this room should be deleted from the license as an area of use, as defined in 10 CFR 35.2.

NA OK

5. **Please advise** us if any authorized user authorizations will change a Change as a result of deleting either cesium-137 or all materials under 10 CFR 35.400.

none.

3. The letter dated September 1, 2005, requests that Daniel Henry Macek, M.D. be restored as an Authorized User to your license because "he was inadvertly left off out previous amendment #50." Dr. Macek will be listed as an AU on your renewed

NR.

license but please note that his name is listed on Amendment No. 50, excerpt attached. He was not included in your renewal application dated March 10, 2005, however. This is a no response item.

4. Your application was silent with respect to continuing authorization for the use of materials in 10 CFR 31.11. **Please clarify your specific intentions with respect to continued authorization of materials in 10 CFR 31.11.**

Please note that *we cannot delete authorization for materials in* 10 CFR 31.11 *nor* can we authorize the release of the room(s) where you used materials in 10 CFR 31.11 for unrestricted use (even by other members of your staff) until we have received and reviewed a copy of the results of your close-out survey and your associated waste has been accounted for. **Please also advise** us if any authorized user authorizations will change if you do decide to request deletion of this material.

The survey should consist of exposure rate measurements to show that all sources of radioactive material have been removed, and contamination checks of areas where radioactive materials were used or stored. Average radiation levels associated with surface contamination and removable contamination should not exceed those specified in the enclosed decontamination guide. Please submit the following information with your close-out survey:

a. A diagram of the facility with survey and wipe test results keyed to specific locations.

b. The name of the person performing the survey.

c. The date the survey was performed.

d. The instrument(s) used for exposure rate measurements and for analysis of the wipes.

e. Background readings and each instruments' efficiency or correction factor.

f. The date(s) that the survey instruments were last calibrated.

5. In Subitem Nos. 6, 7, 8, and 9 H. I will delete this authorization in favor of incorporating it into the authorization for materials in 10 CFR 35.500. *This is a no* response item.

6. I will delete Condition No. 13, as it appears on Amendment No. 50, because 10 CFR 35.70 no longer exists as a regulatory requirement. This is a no response item.

7. Item 8.15, Item 9 of your renewal application dated March 10, 2005, shows a facility diagram, including a room labelled "HDR room," marked G69. Your license does not authorize a HDR device. **Please explain this room marking.**

8. Item 8.19, Item 9 of your renewal application dated March 10, 2005, included a statement concerning calibration of dosimetry equipment and therapy sealed sources calibration procedures, see excerpt attached. This commitment does not appear to be applicable to your licensed program. **Please explain this**

withdrawn

commitment and, if necessary, advise us to withdraw it from your renewal application.

In accordance with 10 CFR 2.390 of the NRC's "Rules of Practice," a copy of this letter will be available electronically in the NRC Public Document Room or from the Publicly Available Records (PARS) component of NRC's document system (ADAMS). The NRC's document system is accessible from the NRC Web site at http://www.nrc.gov/reading-rm/adams.html.

ACTION REQUIRED

Submit the requested information within 8 calendar days (by September 10, 2005) or contact me to arrange a different response date or mechanism for resolving these discrepancies. Please reference control number **314270** to facilitate proper handling. Upon receipt of your response we will resume our review. Address your written response to my attention at the above address.

PLEASE DIRECT ANY QUESTIONS YOU MAY HAVE TO ME AT (630) 829-9841 or (800) 522-3025.

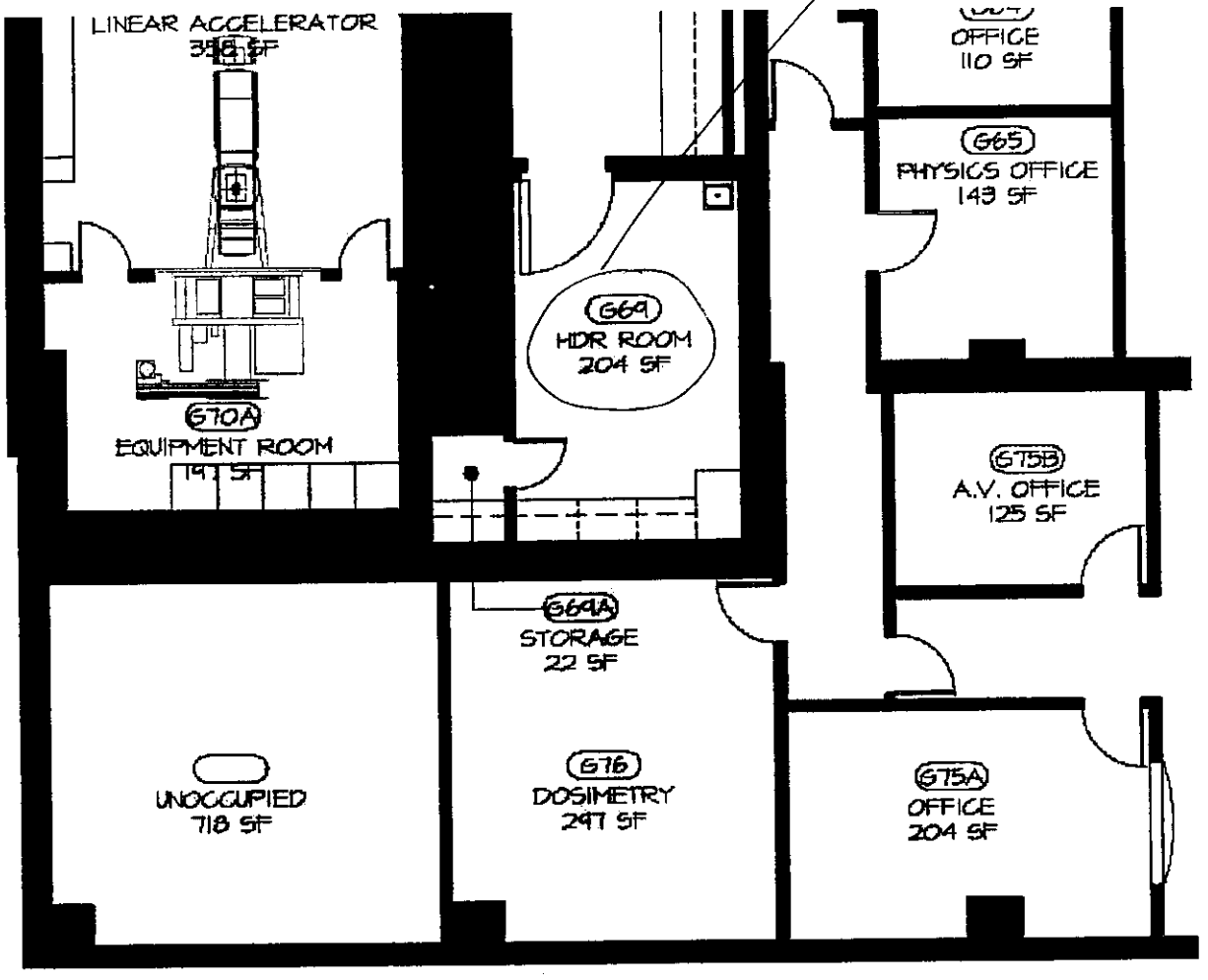
NAME OF PERSON DOCUMENTING CONVERSATION	SIGNATURE	DATE
Colleen Carol Casey	Colleen Carol Casey	September 2, 2005

St. John Macomb Hospital
NRC License Renewal # 21-01190-05

FACILITY DIAGRAM

8.15 Item 9

Radiation Therapy Department Hot Lab



All sealed sources are stored in shielded container in the storage. Access is restricted by lock and key to authorized personnel only.

MATERIALS LICENSE
SUPPLEMENTARY SHEET

License Number
21-01190-05

Docket or Reference Number
030-02005

Amendment No. 50

S. Wagenburg, M.D.	10 CFR 35.100, 35.200, 35.300, 35.500, 31.11, and gadolinium-153 in VANTAGE devices for medical radiography.
H. J. Zeskind, M.D.	10 CFR 35.100, 35.200, 35.300, 35.400, 35.500, 31.11, uranium depleted in uranium-235, and gadolinium-153 in VANTAGE devices for medical radiography.
G. L. Figacz, M.D.	10 CFR 35.100, 35.200, 35.300, 35.500, 31.11, and gadolinium-153 in VANTAGE devices for medical radiography.
Kevin O'Brien, M.D.	10 CFR 35.100, 35.200, 35.300, 35.500, 31.11, and gadolinium-153 in VANTAGE devices for medical radiography.
Amr Aref, M.D.	10 CFR 35.400 and uranium depleted in uranium-235.
David G. Fry, M.D.	10 CFR 35.100, 35.200, 35.300, 35.500, 31.11, and gadolinium-153 in VANTAGE devices for medical radiography.
Richard G. Hayes, M.D.	10 CFR 35.100, 35.200, 35.300, 35.500, 31.11, and gadolinium-153 in VANTAGE devices for medical radiography.
Daniel Henry Macek, M.D.	10 CFR 35.100, 35.200, 35.300, and gadolinium-153 in VANTAGE devices for medical radiography.
Paul Chuba, M.D.	10 CFR 35.400 and uranium depleted in uranium-235.
Philip Adler, M.D.	10 CFR 35.100, 35.200, and gadolinium-153 in VANTAGE devices for medical radiography.
Linda Sue Rissman, D.O.	10 CFR 35.400.
Cynthia Holland Browne, Ph.D., M.D.	10 CFR 35.400.
Ahmed E. Ezz, M.D.	10 CFR 35.300 (excluding iodine-131 for hyperthyroid and thyroid carcinoma treatments) and 35.400.
Zenon Zarewych, M.D.	10 CFR 35.100 and 35.200.

TRANSMISSION VERIFICATION REPORT

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NRC FORM 386 (RIII)
(4-2004)

UNITED STATES
NUCLEAR REGULATORY COMMISSION
REGION III
2443 Warrenville Road, Suite 210
Lisle, Illinois 60532-4352

TELEFAX TRANSMITTAL

DATE: 9/2/05

NUMBER OF PAGES: 7
(including this page)

SEND TO: JAMES BOTTI

LOCATION: ST. JOHN MACOMB

FAX NUMBER: 734-662-9224 ☐ **VERIFY BY CALLING SENDER**

FROM: COLLEEN CASEY
(SENDER)

TELEPHONE NUMBER: 630-829-9841 FAX NUMBER: 630-829-9782

If you do not receive the complete fax transmittal, please contact the sender as soon as possible at the telephone number provided above.

MESSAGE

Please call me to discuss.

Thank you.