

From: Shirley Xu
To: Calivox@aol.com
Date: Tue, Feb 7, 2006 10:02 AM
Subject: The Chambersburg Hospital Renewal

License number: 37-12771-01
Docket number: 03003167
Control number: 138318

Hi Mark,

The following are the issues that I talked to you over the phone.

1. On a detailed version of your facility diagram, please indicate the position of each of the areas described below (a-d) and describe the type, dimensions, and thickness of shielding that you will use and security measure of the locations.

- a. Long term storage shed.
- b. Summit Health Center, 757 Norland Ave., Suite 102
- c. Hot Lab in Nuclear Medicine Department at 112 North Seventh Street.

In addition, identify adjacent areas across the walls from use and storage locations including above and below and show that adequate steps have been taken to assure that radiation levels in unrestricted areas will not result in doses to individual members of the public in excess of those specified in 10 CFR 20.1301.

2. Please provide the manufacture and model information for I-125 sealed sources that used in your facility.

3. Your reply should be signed by a management representative. Please include the control number on your reply.

Shirley Xu
USNRC-RI
610 337-5006 voice
610 337-5269 fax

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