

ACCEPTANCE REVIEW MEMO (ARM)

Licensee: Sioux Valley Clinic

License No.: 40-26865-01

Docket No.: 030-29708

Mail Control No.: 471078

Type of Action: Amend

Date of Requested Action: 08-09-06

Reviewer
Assigned:

ARM reviewer(s): Torres

Response	Deficiencies Noted During Acceptance Review
	<ul style="list-style-type: none">[] Open ended possession limits. Limit possession. Submit inventory.[] Submit copies of most recent leak test results.[] Add - delete IC license condition. Add IC paragraph in cover letter.[] Split license from cover letter. Add SUNSI marking to license.[] Ask the licensee if they have any type-amount of EPAct Material.
	REVIEWER: No exemption needed for 35.500 T&E. Explain in cover ltr.

Reviewer's Initials: _____

Date: _____

- ☐ Yes ☐ No Unrestricted release Group 2 or >: Transfer memo to FCDB within 10 days.
- ☐ Yes ☐ No Decommissioning notification should be completed within 30 days.
- ☐ Yes ☐ No Termination request < 90 days from date of expiration
- ☐ Yes ☐ No Expedite (medical emergency, no RSO, location of use/storage not on license, RAM in possession not on license, other)
- ☐ Yes ☐ No TAR needed to complete action.

Branch Chief's and/or Sr. HP's Initials: _____

Date: _____

SUNSI Screening according to RIS 2005-31

☐ Yes ☒ No **Non-Publicly Available, Sensitive** if any item below is checked

General guidance:

- _____ RAM = or > than Category 3 (Table 1, RIS 2005-31), use Unity Rule
- _____ Exact location of RAM (whether = or > than Category 3 or not)
- _____ Design of structure and/or equipment (site specific)
- _____ Information on nearby facilities
- _____ Detailed design drawings and/or performance information
- _____ Emergency planning and/or fire protection systems

Specific guidance for medical, industrial and academic (above Category 3):

- _____ RAM quantities and inventory
- _____ Manufacturer's name and model number of sealed sources & devices
- _____ Site drawings with exact location of RAM, description of facility
- _____ RAM security program information (locks, alarms, etc.)
- _____ Emergency Plan specifics (routes to/from RAM, response to security events)
- _____ Vulnerability/security assessment/accident-safety analysis/risk assess
- _____ Mailing lists related to security response

Branch Chief's and/or Sr. HP's Initials: RITC

Date: 8/18/06

Pre-Licensing Screening

Applicant Information:

Control No. 471078

Name: Sioux Valley Clinic	Type of Request: Amend Program Code(s):
Location: SD	License No.: 40-26865-01 Docket No.: 030-29708

STEP 1-Radioactive Materials and Quantities Requested:

Instructions for Step 1: Complete Step 1 for all applications. If all your responses in Step 1 are "No" then do not complete Step 2 (Screening Criteria). Sign and date the completed step-sheet and add it as the sensitive and non-publicly available OAR in ADAMS. If a "yes" response is indicated for any item in Step 1, also complete Step 2. If the type of use is subject to a Security Order or the requirements for increased controls, complete Step 3 (Item A or Item B) without delay.		Yes or No
A.	The request is from a new applicant.	NO
B.	NUREG-1556, Volume 20, Section 4.9 indicates a licensing site visit is needed for the requested type of use, e.g., (1) Type A broad scope license, (2) panoramic irradiator containing > 10000 curies, (3) manufacturers or distributors using unsealed radioactive material or significant quantities of sealed material, (4) radioactive waste brokers, (5) radioactive waste incinerators, (6) commercial nuclear laundries, and (7) any other application that in the judgement of the reviewer and cognizant supervisor involves complex technical issues, complex safety questions, or unprecedented issues that warrant a site visit.	NO
C.	The applicant requested certain radionuclides and quantities that equal or exceed the Risk Significant Quantity (TBq) values in the table, below, that have been "highlighted" by the reviewer	NO

Table of Risk Significant Quantities

(Category 2 Quantities, IAEA Safety Guide No. RS-G-1.9, Categorization of Radioactive Sources, August 2005)

Radionuclide	Risk Significant Quantity (TBq ¹)	Risk Significant Quantity (Ci ¹)	Radionuclide	Risk Significant Quantity (TBq ¹)	Risk Significant Quantity (Ci ¹)
Am-241	0.6	16	Pm-147	400	11,000
Am-241/Be	0.6	16	Pu-238	0.6	16
Cf-252	0.2	5.4	Pu-239/Be	0.6	16
Cm-244	0.5	14	Ra-226 ²	0.4	11
Co-60	0.3	8.1	Se-75	2	54
Cs-137	1	27	Sr-90 (Y-90)	10	270
Gd-153	10	270	Tm-170	200	5,400
Ir-192	0.8	22	Yb-169	3	81

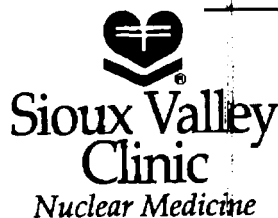
¹ The primary values are TBq. The curie (Ci) values are for informational purposes only.

² The Atomic Energy Act, as amended by the Energy Policy Act of 2005, authorizes NRC to regulate Ra-226 and NRC is in the process of amending its regulations for discrete sources of Ra-226.

Calculations of the Total Activity or the Unity Rule are attached to document whether or not the screening criteria in Step 2 were also completed to evaluate the application. NOTE--If an amendment of an existing license is being requested, the calculations will include the previously authorized quantities for the radionuclide(s).	Yes, No, or Not Applicable (NA)
Total Activity--multiple activities are requested for a single radionuclide and the sum of the activities equals or exceeds the quantity of concern for the radionuclide	<input checked="" type="checkbox"/>
Unity Rule--multiple radionuclides are requested and the sum of the ratios equals or exceeds unity, e.g., [(total activity for radionuclide A) ÷ (risk significant quantity for radionuclide A)] + [(total activity for radionuclide B) ÷ (risk significant quantity for radionuclide B)] ≥ 1.0.	<input checked="" type="checkbox"/>

Signature and Date for Step 1:

ATC 8/18/06
License Reviewer and Date



1201 S EUCLID AVE STE 401
SIOUX FALLS SD 57105-0403
Phone: (605) 328-8970
www.siouxvalley.org

277C
August 9, 2006

Via FAX 1.817.860.8263

U.S. Nuclear Regulatory Commission Region IV
Nuclear Materials Licensing Branch
Attn: Roberto J. Torres
611 Ryan Plaza Drive, Suite #400
Arlington, TX 76011

Dear Mr. Torres:

We request an amendment to our NRC Materials License #40-26865-01 to modify our authorized user (AUs) list, change Radiation Safety Officer and add an area of use. We request removal of Dr. Julie A. McKay as an AU, as she no longer practices at our location. There are two new experienced AUs to be added to our license. Both AUs are listed as AUs on NRC Materials License #40-12378-01. Their names and requested authorizations are:

Authorized User	Material and Use
Fred Clinton Lovrien, M.D.	35.100; 35.200; 35.300
David C. Hickey, M.D.	35.100; 35.200; 35.300; 31.11

These proposed Authorized Users are experienced Authorized Users, covered under 10CFR35.57(b)(1), and are exempt from the training requirements of Subparts D through H for which they are already listed as authorized. As we no longer have a device for 35.500 medical uses (as listed in License Item 9.D.), we request that Item 9.D. be authorized only for storage and for transfer to another licensee such as a manufacturer or source broker for disposal. The only 35.500 source in our inventory is over ten years old and has not been used in over 5 years. We request to be exempted from a requirement for 35.500 Authorized User training, as we have no present intent to medically use radioactive materials under 35.500.

We request a change in Radiation Safety Officer for Sioux Valley Clinic Nuclear Medicine from Dr. Schultz to Dr. Fred C. Lovrien effective August 11, 2006. Dr. Fred C. Lovrien is already a Radiation Safety Officer on NRC Materials License #40-12378-01 and, as such, will not require submission of preceptorship documentation under 10CFR35.57(a)(2). We request that Dr. Schultz be removed as an authorized user. effective on his retirement date of August 12, 2006.

We also attach a map of a new area of use in a physically connected medical office building in space controlled by Sioux Valley Clinic. This area will only be used for 35.100 and 35.200 uses, as a remote camera room and injection area. All radioactive materials will be received and assayed in the existing hot lab listed in Item 10 of our license. The address of the new area of use is Sioux Valley Clinic; Breast and Bone Health Institute; 1500 W. 22nd Street, Suite 302; Sioux Falls, SD 57105. We will begin day-of-use and weekly removable contamination surveys in this new area of use immediately. Under 35.14, we will begin use of the remote camera room for imaging and localization studies, possibly to include routine injection of Tc99m radiopharmaceuticals. There will be no storage or receipt of radioactive materials in this new area of use. There will be no other authorized uses under 35.300 or 31.11 in the new area of use.

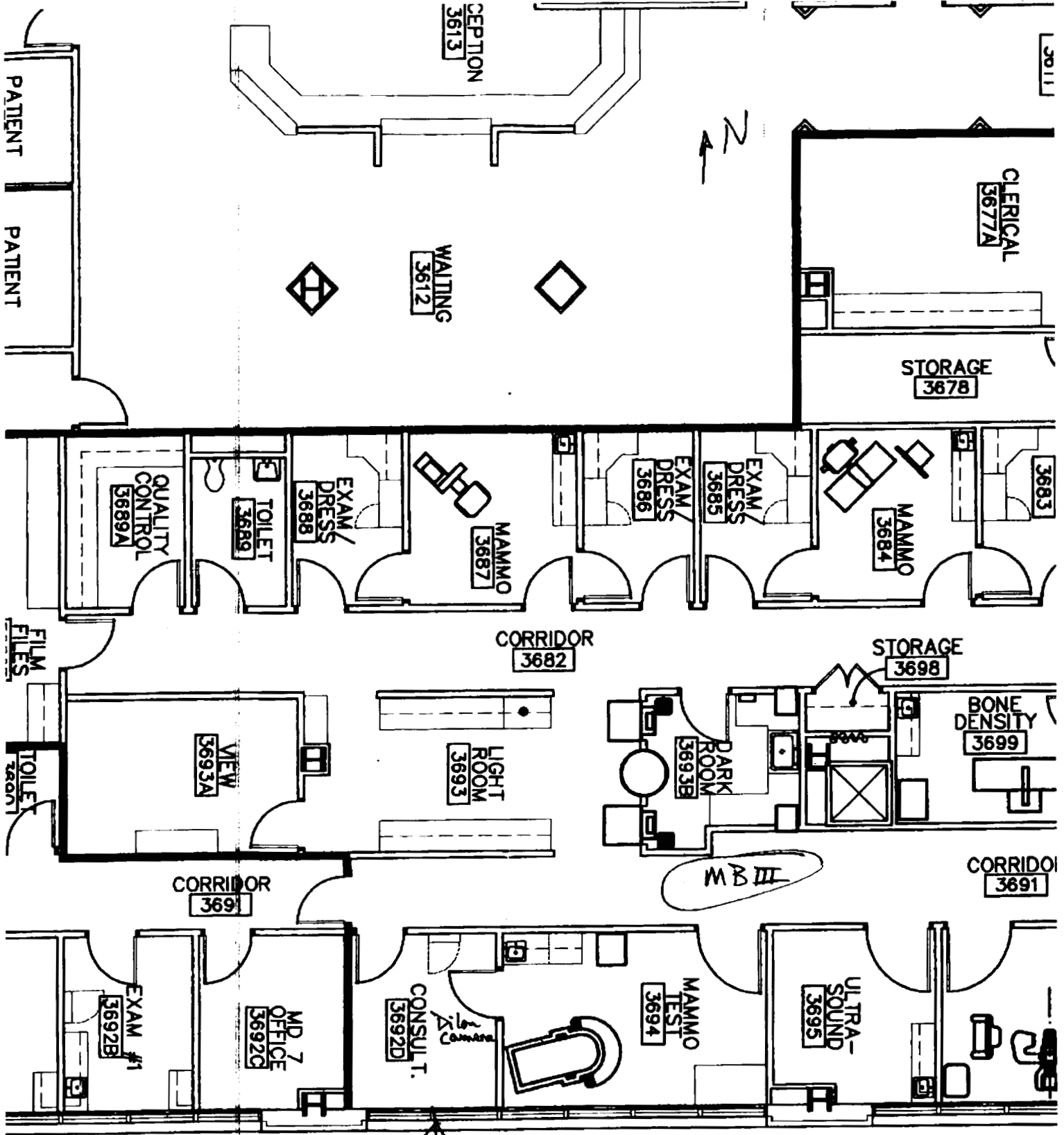
Thank you for your attention to this matter. Do not hesitate to contact me if there are any questions at 605-328-8974.

Sincerely,



Darin Berg

Manager for Sioux Valley Clinic -- Nuclear Medicine



Exterior (overhang)

$\frac{1}{8}'' = 1'$ scale

Sioux Valley Clinic
Breast & Bone Health
Institute
1500 W. 22nd St.
Suite 302
Sioux Falls, SD
57105

44175

AUG 21 2006

DATE

This is to acknowledge the receipt of your letter/application dated 08-09-2006, and to inform you that the initial processing, which includes an acceptance review, has been performed.

☒ There were no administrative omissions. Your application will be 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:

The action you requested is normally processed in 90 days.

☐ A copy of your action has been forwarded to the NRC Office of the Chief Financial Officer, who will contact you separately if there is a fee issue involved.

Your action has been assigned **Mail Control Number** 471078.

When you call to inquire about this action, please refer to this mail control number.

You may call me at 817/860-8103.

Sincerely,

Colleen Muenahan
Licensing Assistant

(FOR LEMS USE)
INFORMATION FROM LTS

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Program Code: 02120
Status Code: 0
Fee Category: 7C
Exp. Date: 20090131
Fee Comments:
Decom Fin Assur Reqd: N
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.: See Comments:
.: Decom Fin Assur Req'd: N_____
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