

SARA A.B. FORSTER
MATERIALS LICENSING BRANCH

TELECON & FAX TRANSMITTAL



NUCLEAR REGULATORY COMMISSION
REGION III
2443 WARRENVILLE ROAD
LISLE, ILLINOIS 60532-4351
(630) 829-9892 FAX: (630) 515-1078

TO: Marcia West

COMPANY: Cardinal Health

PAGES: 1 TEL.: (816) 807-8090

FAX #: (816) 974-1443

(Sent via facsimile)

CONVERSATION RECORD

TIME DATE
06/28/2011

NAME OF PERSON(S) CONTACTED	TELEPHONE NO.	ORGANIZATION
Marcia West	(816) 807-8090	external Health Physicist
REPRESENTED PERSON or PERSONS		ORGANIZATION
Patrick M. O'Toole, M.D., Radiation Safety Officer		St. Joseph Health Center
SUBJECT		
License No.: 24-02704-01		Control No.: 575100

SUMMARY

We have reviewed the request to list Corey Chopra, M.D., as an Authorized User on your NRC Material License No. 24-02704-01, (including information contained in the letter dated May 2, 2011, and in the facsimile dated June 20, 2011). We find that we are unable to continue this action until we have received information regarding the following:

The preceptor attestation on the last page of the NRC Form 313A (AUD) does not meet the requirements specified in 10 CFR 35.190(c)(2) and 35.290(c)(2). As discussed during our June 1, 2011, and June 3, 2011 telephone conversations, we require a completed NRC Form 313A (AUD), in order to approve an Authorized User under either 10 CFR 35.190 or 10 CFR 35.290. **To continue review of the request to add Dr. Chopra as an Authorized User, resubmit NRC Form 313A (AUD). The resubmitted form must include a Preceptor Attestation section that concurs with the Training and Experience section of the form.**

We have requested that you submit the referenced item –

a completed NRC Form 313A (AUD)

– via facsimile, to (630) 515-1078. Please reference the Control No. 575100, as listed at the top of this memo. We expect to hear from you on or before July 8, 2011.

For future reference, please always include the name, phone number and fax number of at least one person whom we may contact for additional information when reviewing your licensing correspondence and requests.

Please submit the requested information within 10 days of this record. Include reference control number 575100. Please FAX your response to my attention at (630) 515-1078.

Please direct any questions you have to me at (630) 829-9892 or sara.forster@nrc.gov.

NAME OF PERSON DOCUMENTING CONVERSATION

SIGNATURE

DATE

Sara A.B. Forster

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