

<b>NRC FORM 7</b> (8-2011) 10 CFR 110		<b>U.S. NUCLEAR REGULATORY COMMISSION</b> <b>APPROVED BY OMB: NO. 3150-0027</b> <b>EXPIRES: 08/31/2012</b> Estimated burden per response to comply with this mandatory collection request: 2.4 hours. This submittal is reviewed to ensure that the applicable statutory, regulatory, and policy considerations are satisfied. Send comments regarding burden estimate to the Information Services Branch (T-5 F53), U.S. Nuclear Regulatory Commission, Washington, DC 20555-0001, or by internet e-mail to Infocollects.Resource@nrc.gov, and to the Desk Officer, Office of Information and Regulatory Affairs, NEOB-10202, (3150-0027), Office of Management and Budget, Washington, DC 20503. If a means used to impose an information collection does not display a currently valid OMB control number, the NRC may not conduct or sponsor, and a person is not required to respond to, the information collection.	
<b>APPLICATION FOR NRC EXPORT OR IMPORT LICENSE, AMENDMENT, RENEWAL, OR CONSENT REQUEST(S)</b> <i>(See Instructions on Pages 4 and 5)</i>			
<b>PART A. FOR NRC USE ONLY</b>	<input checked="" type="checkbox"/> <b>PUBLIC</b> <b>OR</b> <input type="checkbox"/> <b>NON-PUBLIC</b>	<b>DATE RECEIVED</b> <b>FEB 21 2012</b>	
LICENSE NUMBER <b>PXB152.00</b>	DOCKET NUMBER	ADAMS ACCESSION NUMBER	
<b>PART B. TO BE COMPLETED FOR ALL LICENSES, AMENDMENTS, RENEWALS, OR CONSENT REQUESTS</b> (If more space is needed to complete any of the items, use Pages 3-4 first, and then attach additional sheets, if necessary.)			
1. NAME AND ADDRESS OF APPLICANT/LICENSEE  Christana Care Health Services, Inc. 4755 Ogletown-Stanton Road Newark, DE 19718	1a. NAME OF APPLICANT'S CONTACT See Page 3	1b. APPLICANT'S REFERENCE NUMBER	
	1c. PHONE NUMBER See Page 3	1d. FAX NUMBER See Page 3	
	1e. E-MAIL ADDRESS See Page 3		
2. TYPE OF ACTION REQUESTED <i>(Check One)</i> <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 20%;"> <input checked="" type="checkbox"/> <b>EXPORT</b>            (Parts B, C, E)         </div> <div style="width: 20%;"> <input type="checkbox"/> <b>IMPORT</b>            (Parts B, D, E)         </div> <div style="width: 20%;"> <input type="checkbox"/> <b>AMENDMENT/RENEWAL</b>            Current License Number: _____         </div> <div style="width: 20%;"> <input type="checkbox"/> <b>CONSENT REQUEST</b>            (Parts B, C)            Current License Number: _____         </div> </div>			
3. CONTRACT NUMBER(S)	4. FIRST SHIPMENT DATE 04/16/2012	5. LAST SHIPMENT DATE N.A.	6. PROPOSED EXPIRATION DATE 02/28/2017
<b>PART C. TO BE COMPLETED FOR EXPORT LICENSES, AMENDMENTS, RENEWALS OR CONSENTS</b> (If more space is needed to complete any of the items, use Pages 3-4 first, and then attach additional sheets, if necessary.)			
7. NAME(S) / ADDRESS(ES) OF SUPPLIERS AND/OR OTHER PARTIES TO THE EXPORT  Customer name and address:  Best Theratronics, Ltd 7643 Fullerton Road Springfield, VA 22153 USA	8. NAME(S) / ADDRESS(ES) OF INTERMEDIATE FOREIGN CONSIGNEE(S)  None	9. NAME(S) / ADDRESS(ES) OF ULTIMATE FOREIGN CONSIGNEE(S)  Best Theratronics, Ltd 413 March Road Ottawa, ON K2K 0E4 Canada	
7a. FUNCTION(S) PERFORMED/SERVICE(S) PROVIDED See Page 3	8a. INTERMEDIATE USE(S) N.A.	9a. ULTIMATE END USE(S) Disposition	
10. DESCRIPTION OF RADIOACTIVE MATERIALS, SEALED SOURCES, NUCLEAR FACILITIES, EQUIPMENT, OR COMPONENTS; FOR NUCLEAR EQUIPMENT INCLUDE TOTAL DOLLAR VALUE OF EQUIPMENT FOR EXPORT  Gammacell 3000 irradiator, S/N 332 containing  Cesium-137 sealed source Model C-3001, S/N A1831 Cesium-137 sealed source Model C-3001, S/N A1846	10a. MAX TOTAL VOLUME / ELEMENT WGT (KG), OR TOTAL ACTIVITY (TBq)  Total activity as of 12/17/2011 per our NSTS inventory report:  91.7947 TBq (2478.4572 Ci)	10b. MAX ENRICHMENT OR WGT %  N/A	10c. MAX ISOTOPE WGT (KG)  N/A
11. FOREIGN OBLIGATIONS (BY COUNTRY AND BY PERCENTAGE OF MAXIMUM TOTAL VOLUME) None			

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(8-2011)  
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U.S. NUCLEAR REGULATORY COMMISSION

# **APPLICATION FOR NRC EXPORT OR IMPORT LICENSE, AMENDMENT, RENEWAL, OR CONSENT REQUEST(S) (Continued)**

LICENSE NUMBER <b>PXB152.00</b>	DOCKET NUMBER	ADAMS ACCESSION NUMBER	<input checked="" type="checkbox"/> PUBLIC OR <input type="checkbox"/> NON-PUBLIC
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## **PART D. TO BE COMPLETED FOR IMPORT LICENSES, AMENDMENTS, OR RENEWALS**


(If more space is needed to complete any of the items, use Pages 3-4 first, and then attach additional sheets, if necessary.)

12. NAME(S) / ADDRESS(ES) OF FOREIGN SUPPLIERS AND/OR OTHER PARTIES TO IMPORT	13. NAME(S) / ADDRESS(ES) OF INTERMEDIATE CONSIGNEE(S)	14. NAME(S) / ADDRESS(ES) OF ULTIMATE U. S. CONSIGNEE(S)	
12a. NRC EXPORT LICENSE NUMBER(S) (if applicable)	13a. LICENSE NUMBER(S) / EXPIRATION DATE(S)	14a. LICENSE NUMBER(S) / EXPIRATION DATE(S)	
	13b. INTERMEDIATE USE(S)	14b. ULTIMATE END USE(S)	
15. DESCRIPTION OF RADIOACTIVE MATERIALS, SEALED SOURCES, NUCLEAR FACILITIES	15a. MAX TOTAL VOLUME / ELEMENT WGT (KG), OR TOTAL ACTIVITY (TBq)	15b. MAX ENRICHMENT OR WGT %	15c. MAX ISOTOPE WGT (KG)
16. FOREIGN OBLIGATIONS (BY COUNTRY AND BY PERCENTAGE OF MAXIMUM TOTAL VOLUME)			

## **PART E. TO BE COMPLETED FOR ALL LICENSES, AMENDMENTS, RENEWALS OR CONSENT REQUEST(S)**

17. ADDITIONAL INFORMATION PROVIDED ON PAGES 3, 4, AND/OR ON SEPARATE SHEETS? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	17a. COPIES OF RECIPIENTS' AUTHORIZATIONS PROVIDED? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
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**18. CERTIFICATION:** I, the applicant's authorized official, hereby certify that this application is prepared in conformity with Title 10, Code of Federal Regulations, and that all information provided is correct to the best of my knowledge.

18a. PRINT NAME AND TITLE OF AUTHORIZED OFFICIAL  Patrick A. Grusenmeyer, ScD Senior Vice President Cancer and Imaging Services	18b. SIGNATURE -- AUTHORIZED OFFICIAL 	18c. DATE <b>02/08/2012</b>
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FEB 21 2012



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**APPLICATION FOR NRC EXPORT OR IMPORT  
LICENSE, AMENDMENT, RENEWAL OR CONSENT REQUEST(S) (Continued)**

LICENSE NUMBER <b>PXB 152.00</b>	DOCKET NUMBER	ADAMS ACCESSION NUMBER	<input checked="" type="checkbox"/> PUBLIC OR <input type="checkbox"/> NON-PUBLIC
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ADDITIONAL INFORMATION (Reference applicable block numbers from page 1 and/or page 2 for each entry)

Blocks 1a, 1c, 1d, 1e

Joseph F. Solge, Jr., RSO  
Department of Radiation Safety  
Christiana Hospital  
Room 1127 - MAP 2  
4755 Ogletown-Stanton Road  
Newark, DE 19718  
Phone(302)623-3822 Fax(302)623-3865  
E-mail: jsolge@christianacare.org

Block 7a.

The following is a brief description of the service that will be provided by Best Theratronics in removing our Gammacell 3000, S/N 332 back to Canada for final disposition:

1. Hire an approved transport company to ship the overpack and new Raycell irradiator to Christiana Hospital.
2. Hire local riggers to assist the Best Theratronics technician to move the Gammacell 3000 from the current location to the loading dock where it is packed for transport back to Canada.
3. Use the same transport company to return the Gammacell 3000 back to Canada, along with the metal stand, covers, and electronics.

*ms*  
FEB 21 2012  
*ms*



**CHRISTIANA CARE**  
HEALTH SERVICES

Department of Radiation Safety

4755 Ogletown-Stanton Road  
Room 1127 - MAP 2  
Newark, Delaware 19718

302-623-3822 phone  
302-623-3865 fax

Joseph F. Solge, Jr.  
Radiation Safety Officer  
jsolge@christianacare.org

February 17, 2012

Stephen Dembek, Acting Deputy Director  
Office of International Programs  
U.S. Nuclear Regulatory Commission  
11555 Rockville Pike  
Rockville, MD 20852

Re: NRC License 07-12153-02

Dear Mr. Dembek:

I am submitting to you an application for an export license that we will need to return our Gammacell 3000 137Cesium blood irradiator to Best Theratronics, Ltd in Ottawa, ON, Canada. We are replacing this unit with a new Raycell dual head X-ray irradiator. The return of the Gammacell 3000 is part of the purchase agreement for the X-ray unit. I have attached a completed copy of NRC Form 7 "APPLICATION FOR NRC EXPORT OR IMPORT LICENSE, AMENDMENT, RENEWAL, OR CONSENT REQUEST(S)" and a check for \$5500.00 as payment for the application fee.

If you have any questions about this request, or need any further information, please contact me at any of the numbers listed above. Thank you very much for your consideration of this matter.

Sincerely,

Joseph F. Solge, Jr.  
Radiation Safety Officer

Approved by:

Patrick Grusenmeyer  
Vice President, Helen F. Graham Cancer Center

JFS/jfs

Cc: Ken Love

*me*  
*js* FEB 21 2012