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DNMS

## PUBLIC

- ☐ Immediate Release  
☒ Normal Release

## NON-PUBLIC

- ☐ A.3 Sensitive-Security Related  
☐ A.7 Sensitive Internal  
☐ Other:

Reviewer: RJT Date: 1-18-17

Carol Hill

United States Nuclear Regulatory Commission

1600 E. Lamar Blvd.

Arlington, TX 76011-4511

Dear Carol Hill,

I would like to make an amendment to our Material License for Storage of the 5r-90 sources, license number 56-35371-01. Currently, Ms. Amanda Jackson is listed on the license as the Radiation Safety Officer, however she will not be back to cover our site, so we will need to amend the Radiation Safety Officer to Dr. John Young. He is currently on a license for Guam Memorial Hospital Authority, reference number 56-18134-01. Should you need any additional information regarding Guam Regional Medical City, please contact me at (671) 969-4825.

Sincerely,

Katie J. Kessler

Radiation Oncology Manager

Alan Funtanilla

Chief Administrative Officer

1/15/2017  
Date

No 592777



133 Route 3, Dededo, Guam 96929  
P.O. Box 3830 Hagatna, Guam 96932  
Main: (671)969-4823  
Fax: (671) 969-4828

# Fax Cover Sheet

To: United States NRC From: Guam Regional Medical City  
Fax: (817) 200-1188 Pages: 1  
Phone: \_\_\_\_\_ Date: January 16, 2017  
Re: NRC Amendment Attn: Carol Hill

☒ Urgent    ☐ For Review    ☐ Please Comment    ☐ Please Reply    ☐ Please Recycle

Thank you!

**Confidentiality Notice:**

The information in this facsimile report, and any attachments thereto, contain protected health information as defined by the Health Insurance Portability and Accountability Act of 1996 ("HIPAA"), PL 104-191; 43 CFR Parts 160 and 164; and it is confidential and/or privileged. The fax cover sheet and the attached information are for the use of only the individual or entity for which it is intended. If you are not the intended recipient, or any authorized representative of the intended recipient, you are hereby notified that any review, dissemination or copying of this facsimile report and its attachments is strictly prohibited.

592777



## ACKNOWLEDGEMENT - RECEIPT OF CORRESPONDENCE

## Name and Address of Applicant and/or Licensee

Dr. John Young, Radiation Safety Officer  
Guam Regional Medical City  
Radiation Oncology  
133 Route 3  
Dededo, GU 96929

## Date

01/17/2017

## License Number(s)

56-35371-01

## Mail Control Number(s)

592777

## Licensing and/or Technical Reviewer or Branch

CHill

This is to acknowledge receipt of your: ☒ Letter and/or ☐ Application Dated: 01/11/2017

The initial processing, which included an administrative review, has been performed.

☒ Amendment ☐ Termination ☐ New License ☐ Renewal

☐ There were no administrative omissions identified during our initial review.

☐ This is to acknowledge receipt of your application for renewal of the material(s) license identified above. Your application is deemed timely filed, and accordingly, the license will not expire until final action has been taken by this office.

☐ Your application for a new NRC license did not include your taxpayer identification number. Please complete and submit NRC Form 531, Request for Taxpayer Identification Number, located at the following link: <http://www.nrc.gov/reading-rm/doc-collections/forms/nrc531.pdf>  
Follow the instructions on the form for submission.

☐ The following administrative omissions have been identified:

Your application has been assigned the above listed MAIL CONTROL NUMBER. When calling to inquire about this action, please refer to this control number. Your application has been forwarded to a technical reviewer. Please note that the technical review, which is normally completed within 180 days for a renewal application (90 days for all other requests), may identify additional omissions or require additional information. If you have any questions concerning the processing of your application, our contact information is listed below:

Region IV  
U. S. Nuclear Regulatory Commission  
DNMS/NMSB - B  
1600 E. Lamar Boulevard  
Arlington, TX 76011-4511  
(817) 200-1209 or (817) 200-1140

✓ 1/17/17

BETWEEN:

Accounts Receivable/Payable  
and  
Regional Licensing Branches

[ FOR ARPB USE ]  
INFORMATION FROM WBL

Program Code: 03810  
Status Code: Pending Amendment  
Fee Category: 3P  
Exp. Date: 10/31/2026  
Fee Comments:  
Decom Fin Assur Req: N

## License Fee Worksheet - License Fee Transmittal

### A. REGION

#### 1. APPLICATION ATTACHED

Applicant/Licensee: Guam Regional Medical City  
Received Date: 01/17/2017  
Docket Number: 3038990  
Mail Control Number: 592777  
License Number: 56-35371-01  
Action Type: Amendment

#### 2. FEE ATTACHED

Amount: \_\_\_\_\_

Check No.: \_\_\_\_\_

#### 3. COMMENTS

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

*Carl L. Heie*  
1/17/17

### B. LICENSE FEE MANAGEMENT BRANCH (Check when milestone 03 is entered / / )

1. Fee Category and Amount: \_\_\_\_\_

#### 2. Correct Fee Paid. Application may be processed for:

Amendment: \_\_\_\_\_

Renewal: \_\_\_\_\_

License: \_\_\_\_\_

#### 3. OTHER \_\_\_\_\_

Signed: \_\_\_\_\_

Date: \_\_\_\_\_