



CONVERSATION RECORD

| | | | | |
|--|--|------------------------|---|--|
| NAME OF PERSON(S)/TITLE CONTACTED OR IN CONTACT WITH YOU | | DATE OF CONTACT | TYPE OF CONVERSATION | |
| Joseph J. Mueller | | 10/04/2019 | <input type="checkbox"/> E-MAIL <input checked="" type="checkbox"/> TELEPHONE <input type="checkbox"/> INCOMING <input checked="" type="checkbox"/> OUTGOING | |
| E-MAIL ADDRESS | | TELEPHONE NUMBER | | |
| jmueller@cava.cc | | 248-365-6896 | | |
| ORGANIZATION | | DOCKET NUMBER(S) | | |
| CAVA Associates, P.C. | | 030-35016 | | |
| LICENSE NAME AND NUMBER(S) | | MAIL CONTROL NUMBER(S) | | |
| CAVA Associates, P.C. 21-32177-01 | | 613899 | | |
| SUBJECT | | | | |
| Pending Renewal of NRC License - Additional Information Required | | | | |
| SUMMARY AND ACTION REQUIRED (IF ANY) | | | | |
| <p>The is a summary of the conversation that occurred between Laura Cender and Joseph Mueller on Oct. 4, 2019 regarding the pending NRC license renewal application dated August 5, 2019.</p> <p>Please provide your appropriately signed and dated response to the following items by no later than Friday Nov. 8, 2019. You may submit your response via fax to 630-515-1078.</p> <ol style="list-style-type: none">1. In Item 2 of the submitted NRC Form 313 the business name is listed as Cardiology and Vascular Associates, P.C., while the business name listed on your NRC license is CAVA Associates, P.C. Please indicate which name you would like to have listed on the license. If you do request to change the name listed on the license, please additionally provide a statement confirming that no change in company ownership or transfer of the license constituting a change of control as described in 10 CFR 30.34(b) has occurred.2. Please indicate the title of the certifying officer, Kirit Patel, M.D., who signed the NRC Form 313 (i.e. CEO, owner, etc.)3. Please submit a copy of the delegation of authority memo formally appointing you to the position of Radiation Safety Officer. The memo is to be signed by both yourself and your executive management responsible for oversight of the radiation safety program. The memo must be prepared in accordance with the requirements of 10 CFR Parts 35.24(b), 35.24(e), and 35.24(g). | | | | |
| NAME OF PERSON DOCUMENTING CONVERSATION | | | | |
| Laura B. Cender | | | | |
| SIGNATURE | | | DATE OF SIGNATURE | |
| <i>Laura B. Cender</i> | | | Oct. 4, 2019 | |

CONVERSATION RECORD (continued)

LICENSE NAME AND NUMBER(S)

CAVA Associates, P.C.
21-32177-01

MAIL CONTROL NUMBER(S)

613899

SUMMARY AND ACTION REQUIRED (IF ANY) (Continued)

A model Delegation of Authority memo has been attached to this record for your convenience and may also be located in Appendix I, "Typical Duties and Responsibilities of the Radiation Safety Officer and Sample Delegation of Authority," of NUREG 1556 Vol. 9, Rev. 3.

4. Please provide the medical license number and issuing entity (e.g. state or territory) for Anjani Rao, M.D. and Divakar Pai, M.D.
5. Please provide the following statement regarding training for individuals working in or frequenting restricted areas:

"We have developed and will implement and maintain written procedures for a program for training required under 10 CFR 19.12 for each group of workers, including (i) topics covered, (ii) qualifications of the instructors, (iii) method of training, (iv) method for assessing the success of the training, (v) initial training, and (vi) annual refresher training."
6. Please provide a facility diagram for your Clarkston, MI office that includes the following items:
 - a.) Indicate the room numbers for each area where byproduct material is prepared, used, and stored.
 - b.) Indicate the direction North on the diagram.
 - c.) Indicate the location of doors on the diagram, and specify which doors are access controlled (i.e. locked). Indicate if any other areas are access controlled.
 - d.) Indicate all areas listed in the provided legend on the facility diagram including the package receipt area and location of radioactive waste.
 - e.) If possible without losing significant image quality, please resize the diagram to be larger on the page.
7. Please provide a facility diagram for your Bloomfield Hills, MI facility that includes the following information:
 - a.) Please resubmit a clearer image of the facility with legible dimensions and labeled features.
 - b.) Please indicate the use of areas above and below locations where byproduct material is prepared, used, and stored.
 - c.) Specify which doors and areas are access controlled (i.e. locked).
8. Please clarify your response to Item 9 Radiation Monitoring Instruments as your responses are not consistent between the information provided on page C-18 and section 8.17 of the attached Page 9. Specifically, please provide one or both of the following statements:
 - a.) "Radiation monitoring instruments will be calibrated by a vendor who is licensed by the NRC or an Agreement State to perform instrument calibrations."and/or
 - b.) "We have developed and will implement and maintain written radiation survey meter calibration procedures in accordance with the requirements in 10 CFR 20.1501 and that meet the requirements of 10 CFR 35.61."

CONVERSATION RECORD (continued)

LICENSE NAME AND NUMBER(S)

CAVA Associates, P.C.
21-32177-01

MAIL CONTROL NUMBER(S)

613899

SUMMARY AND ACTION REQUIRED (IF ANY) (Continued)

9. Please provide the following statement regarding occupational dose:

a.) "We will maintain, for inspection by the NRC, documentation demonstrating that unmonitored individuals are not likely to receive a radiation dose in excess of the limits in 10 CFR 20.1502."

or

b.) "We will monitor individuals in accordance with the criteria in the section titled, 'Radiation Safety Program—Occupational Dose' in NUREG-1556, Vol. 9, Rev. 3, 'Consolidated Guidance About Materials Licenses: Program-Specific Guidance About Medical Use Licensees.'

10. Please provide the following statement regarding material receipt and accountability:

a.) "We will develop, implement, and maintain written procedures for licensed material accountability and control to ensure that:

- license possession limits are not exceeded
- licensed material in storage is secured from unauthorized access or removal
- licensed material not in storage is maintained under constant surveillance and control
- records of receipt (either from the licensee's own production operations or from another licensee), transfer, and disposal of licensed material, are maintained."

11. Please provide the following statement regarding safe use of unsealed licensed material:

a.) "We have developed and will implement and maintain written procedures for safe use of unsealed byproduct material that meet the requirements of 10 CFR 20.1101 and 10 CFR 20.1201."

12. Please provide the following statement regarding waste management:

a.) "Contact the appropriate NRC Regional Office for guidance on treatment or disposal of waste by incineration or compaction."

Model Delegation of Authority to Radiation Safety Officer

Memo To: Radiation Safety Officer

From: Management Representative

Subject: Delegation of Authority

You, _____, have been appointed radiation safety officer and are responsible for ensuring the safe use of radiation. You are responsible for managing the Radiation Protection Program; identifying radiation protection problems; initiating, recommending, or providing corrective actions; verifying implementation of corrective actions; stopping unsafe activities; and ensuring compliance with regulations. You are hereby delegated the authority necessary to meet those responsibilities, including prohibiting the use of byproduct material by employees who do not meet the necessary requirements and shutting down operations, when justified, to maintain radiation safety. You are required to notify management if staff does not cooperate and does not address radiation safety issues. In addition, you are free to raise issues with the U.S. Nuclear Regulatory Commission at any time. It is estimated that you will spend _____ hours per week conducting radiation protection activities.

Signature of Management Representative (Name)

Manager Title

Date

I accept the above responsibilities,

Signature of Radiation Safety Officer

Date

cc: Affected department heads

Cender, Laura

From: Cender, Laura
Sent: Friday, October 04, 2019 9:49 AM
To: jmueller@cava.cc
Subject: Pending Renewal of NRC License No. 21-32177-01 - Additional Information Required
Attachments: Conversation Record to CAVA Associates, P.C. - Oct. 4, 2019.pdf; Model Delegation of Authority to Radiation Safety Officer.docx

Hello Joseph

Thank you for taking time out of your day to discuss your pending NRC license renewal request. As we discussed, a record of our conversation is attached. Please let me know if you have any difficulties accessing the conversation record.

Additionally, as we discussed, Revision 3 of the NRC Guidance document NUREG 1556 Vol. 9 has been recently issued. You may access the guidance document, which provides detailed information for each renewal application item in Section 8 of the file, at the following link: <https://www.nrc.gov/docs/ML1925/ML19256C219.pdf>.

Please submit your response with an appropriately signed cover letter or NRC Form 313 by no later than Nov. 8, 2019. You may submit your response directly to our regional office via fax to 630-515-1078.

Please feel free to reach out to me at 630-829-9712 or via email if you have any questions.

Thank you,
Laura Cender

Laura Cender
U.S. Nuclear Regulatory Commission
Materials Licensing Branch
E-mail: Laura.Cender@nrc.gov
Phone: (630) 829-9712
Fax: (630) 515-1078