

MAY 17 1991

License No. 29-03047-01  
Docket No. 030-02465  
Control No. 111798

Beth Israel Hospital  
ATTN: Jeffrey Moll  
Executive Director  
70 Parker Avenue  
Passaic, New Jersey 07055

Dear Mr. Moll:

Please find enclosed the renewal of your NRC Material License.

Please review the enclosed document carefully and be sure that you understand all conditions. If there are any errors or questions, please notify the Region I Material Licensing Section, (215) 337-5093, so that we can provide appropriate corrections and answers.

Please be advised that you must conduct your program involving licensed radioactive materials in accordance with the conditions of your NRC license, representations made in your license application, and NRC regulations. In particular, please note the items in the enclosed, "Requirements for Materials Licensees."

Please note that your license has been written in a format compatible with the revision of 10 CFR 35, "Medical Use of Byproduct Material" (enclosed), effective April 1, 1987. Your licensed material activities must be conducted in accordance with the revised Part 35 regulations.

Since serious consequences to employees and the public can result from failure to comply with NRC requirements, the NRC expects licensees to pay meticulous attention to detail and to achieve the high standard of compliance which the NRC expects of its licensees.

You will be periodically inspected by NRC. A fee may be charged for inspections in accordance with 10 CFR Part 170. Failure to conduct your program safely and in accordance with NRC regulations, license conditions, and representations made in your license application and supplemental correspondence with NRC will result in prompt and vigorous enforcement action against you. This could include issuance of a notice of violation, or in case of serious violations, an imposition of a civil penalty or an order suspending, modifying or revoking your license as specified in the General Policy and Procedures for NRC Enforcement Actions, 10 CFR Part 2, Appendix C.

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We wish you success in operating a safe and effective licensed program.

Sincerely,

**Original Signed By:**  
**Steven R. Courtemanche**

Steven R. Courtemanche  
Nuclear Materials Safety Section A  
Division of Radiation Safety  
and Safeguards

Enclosures:

1. Amendment No. 53
2. Requirements for Material Licensees
3. Requirements for Medical Licensees
4. NRC Forms 3 and 313
5. 10 CFR Parts 2, 19, 20, 35, 71 and 170
6. Regulatory Guide 10.8
7. NRC Form 473 - Diagnostic Misadministration Report
8. Notice for Medical Radiation Safety Officers

DRSS:RI  
Schulick/kamp/cmm

for 05/13/91

DRSS:RI  
Courtemanche

05/13/91

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ML 29-03047-01/LTR - 0002.0.0  
05/13/91

# CONVERSATION RECORD

TIME

DATE

TYPE

☐ VISIT

☐ CONFERENCE

☒ TELEPHONE

☐ INCOMING

☐ OUTGOING

ROUTING

NAME/SYMBOL INT

Location of Visit/Conference:

NAME OF PERSON(S) CONTACTED OR IN CONTACT WITH YOU

ORGANIZATION (Office, dept., bureau, etc.) TELEPHONE NO.

SUBJECT

SUMMARY

ACTION REQUIRED

NAME OF PERSON DOCUMENTING CONVERSATION

SIGNATURE

DATE

ACTION TAKEN

SIGNATURE

TITLE

DATE

50271-101

U.S. G.P.O. 1983-301-526/8348

CONVERSATION RECORD

OPTIONAL FORM 271 (12-76)  
DEPARTMENT OF DEFENSE

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c) All radioactive waste are shipped back to the Vendor - SYNCOR. The very minimal waste that are accrued during the day are stored inside the hot lab in area 5 and 6 of floor plan. (\*Document 1)

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d) The hot lab is provided with a L-block and lead glass and lead bricks structure with a hood vented out of the building. (Position 5,6 and 7 on the floor plan). This place is monitored daily and weekly by survey and wipe tests and is always locked for safety. (\*Document 1)

e) A radiation protection survey has been conducted in and around the hot lab and no discernable reading has been registered in the counting room or the corridors surrounding the hot lab.

f) A fume hood is in place inside the hot lab for the preparation and safe dispensing of the radiopharmaceuticals.

3. The department is equipped with two Ludlum GM survey meters which are duly calibrated according to the NRC regulations.

4. a) We would like to amend our license to use Syncor Corporation as a vendor to calibrate the Survey meters. Currently we have two survey meters and one of them will be in the department while the other one is sent for calibration. However, Syncor Corp. has also agreed to lend us a loaner in case both the survey meters are not available for use. A copy of the NRC license of the Syncor Corp. is also attached (\*Document 3)

b) A log book has been maintained in the hot lab and each survey meter is provided with a checksourse. A daily check of the survey meter is logged in. (\*Document 4)

5. All of the radiopharmaceutical doses received for the day are shipped back to the vendor by the closing hours. We do not anticipate an accumulation of the radioactive waste. However we do keep some sealed sources of very nominal activity for calibration purposes. The dose rate at the surface of the lead glass for the hood is always less than 0.2 mR/hr. If the doserate exceeds 0.2 mR/hr rate a necessary step will be taken to reduce the dose rate.

6. The Room # 1, (see the attached Nuclear Medicine Dept. floor plan) where the Xenon-133 is being used has only one airflow inlet and only one exhaust. The rate of flow was measured at both inlet, and at the door entrance. The total flow of air is 900 ft<sup>3</sup>/minute. The rate of exhaust is .1250 ft<sup>3</sup>/minute. And hence the room is at negative pressure compared to its surroundings. A record of this has not been kept for the past years. However we will correct it by keeping a log of these measurements. We intend to take a flow measurements every six month in January and July of each calendar year. The above measurements were taken using a Alnor Velometer Model Series 6001. We will have this instrument calibrated annually by the 'ALNOR INSTRUMENTS CO.' 7555 North Linder Ave. Skokie, IL 60077. We have also attached a form that will be used in future for the airflow measurements. These forms will be logged in the Nuclear Medicine Dept. (\*Document 1 and 5)

7. Please refer to the attached form wherein the collection system of the room has been measured for contamination and logged on a monthly basis. (\*Document 6)

8. The department has three mobile transporters on wheels with adequate shielding for the transportation to various locations in the department.



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9. The personnel handling the brachytherapy are provided with a general badge and a ring badge to monitor the doses. The film badge service is provided by the Landover company.

10. Please see the attached forms for receiving, removing and returning of the brachytherapy sources. The log book of these forms are maintained for the past five years. Also attached are the quarterly inventory, wipe tests and the survey of the hot lab with the ambient doses. (\*Document 7)

11. Please see the attached form for surveying the room used for brachytherapy during and after the implant of the sources. A copy of this form is filed in the physics department and also in the patient's chart. (\*Document 8)

13. For the I-125 eye implant we use an Eye plaque and a template manufactured by 'TRACHSEL DENTAL STUDIO, INC.' at 1834, 15th street N.W., P.O. Box 6598, Rochester, Minnesota, 55903. We have attached the manufacturer's information on this product. (\*Document 9)

a) The protocol used for this treatment technique is based on the publication "NEW TECHNIQUES FOR IODINE-125 RADIOTHERAPY OF INTRAOCULAR TUMORS" by Samuel Packer et. al. published in Ann Ophthalmol 1987; 19 : page 26-30. (\*Document 10)

b) During the implant the patient is confined to a room dedicated for the Radiation oncology patients and hence the need for the documentation for items 13b, 13c, 13d, and 13f in your letter will not arise.

c) See the note above in 13b.

d) See the note above in 13b.

e) A radiation sign will be posted on the entrance door of the room that the patient is confined and a note with the site of implant, type of isotope, dose rate will always be included in the patient's chart. And all the hospital personnel involved in the care of patient will also be instructed of the same.

f) See the note above in 13b.

14. In accordance with the 10 CFR 31.11 (a), we wish to continue to have the authorization for a 10 millicurie of the prepacked kits of radioactive materials.

The following are the list of the amendments that we are seeking with this letter:

1. To include the change in the floor plan of the Nuclear Medicine dept.
2. To change the vendor for the calibration of the survey meters from 'Bio Med Assoc.' to 'Syncor'.

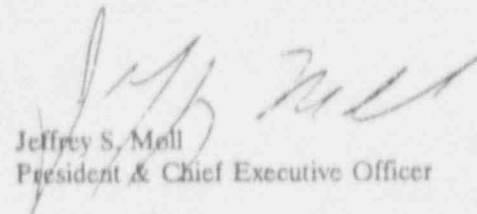
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PEDIATRICS PEDIATRICS  
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Documents enclosed:

1. Floor plan for Nuclear Medicine Dept.
2. Wipe test protocol for Nuclear Medicine Dept.
3. NRC license and calibration protocol for Syncor corp.
4. Daily check of the survey meter form
5. Semi annual air-flow check log sheet
6. Monthly contamination check of the collection systems log sheet
7. Receiving, removing and returning of the brachytherapy sources log sheets.
8. Room survey sheet for the implant
9. Eye plaque information for I-125 eye implant
10. Protocol for I-125 eye implant (published paper).

We have enclosed the NRC form 313 and a check for a sum \$ 120.00 for the amendment. Thank you for your cooperation in this matter. If you have any questions regarding this application, please contact our Radiation Safety Officer and the Medical Physicist, Mr. Sreenivasa Murthy at (201) 365-5250.

Sincerely Yours,



Jeffrey S. Moll  
President & Chief Executive Officer